



Managed by Brookhaven Science Associates
for the U.S. Department of Energy

April 6, 2006

Ms. Kathleen Newcomer
Suffolk County Department of Health Services
Office of Water Resources
Bureau of Drinking Water
Suite 1C
360 Yaphank Avenue
Yaphank, New York 11980

Dear Ms. Kathleen Newcomer:

Subject: Monthly Water Treatment Plant Reports
Reference: Suffolk County Minimum Monitoring Requirements for March 2006

In accordance with the requirements of the BNL Potable Water System Sampling Plan and the 2006 SCDHS Minimum Monitoring Requirements for the BNL Potable Water Supply, included please find the following attachments for your records:

- Attachment I: BNL Potable Water Monthly Operational Data for March 2006.
- Attachment II: March 2006 Biweekly and Semi Annual Water Quality Monitoring Data for the BNL Distribution System and Potable Water Wells.
- Attachment III: March 2006 Stage 1 Disinfectants & Disinfection Byproduct Rule Monitoring Data and Bacteriological Analyses for the BNL Distribution System.

Collection and analysis of these samples is performed in accordance with the guidelines of the BNL Quality Assurance program, the SCDHS Community Water Supply Monitoring Requirements, and the BNL Potable Water System Sampling Plan. Plant Engineering Division personnel using standard operating procedures collect routine monitoring samples; a contractor laboratory using standard methods of analysis performs the subsequent analyses. The Quality Assurance documentation is available from the Environmental and Waste Management Services Division and Plant Engineering

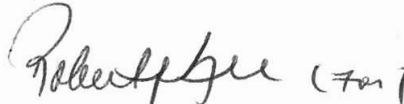


ENVIRONMENTAL
MANAGEMENT SYSTEM
REGISTERED TO
ISO 14001:2004

Divisions. Based on this information, we believe the values contained in these reports are representative of the BNL potable water system.

Should there be any questions regarding this report or the analytical or operational data contained herein, please call either J. Higbie at (631) 344-5919, R. Lee at (631) 344-3148, or W. Chaloupka at (631) 344-7136.

Sincerely,



George A. Goode
Environmental & Waste Management Services
Division Manager

GAG/JB:car

Attachments: As noted

cc: L. Ambroszkiewicz, SCDHS
W. Chaloupka
J. Granzen
G. Goode
J. Higbie
R. Lee
E. Murphy
P. Ponturo, SCDHS
L. Ross
J. Tarpinian

w/attachments
w/attachments
w/attachments
w/o attachments
w/attachments
w/attachments
w/attachments
w/o attachments
w/o attachments
w/o attachments

File: EC61ER.06

ATTACHMENT I

Brookhaven National Laboratory

Potable Water Supply

Monthly Operational Data for March 2006

for the BNL Potable Water System

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: March 2006
------------------	------------------	----------------	------------------------------

LOCATION: **Water Treatment Facility**

Did an emergency occur in any part of the water system? YES NO

Source: Ground Water

Does the system have a chlorination waiver? YES NO

Day of month	CHLORINATION			pH		Totalizer Daily Totalizer 280946
	Treated Water	Liquid Sodium Hypochlorite	Free Cl2	Lime	Sodium	
	K Gals	Gallons	Cl2 use per 24hrs	mg/l	Hydroxide	
1	957	164	8	1.00	7.7	281903
2	955	155	5	0.97	7.5	282858
3	993	145	10	1.10	7.8	283851
4	0					
5	0					
6	2,683	120	25	0.68	7.7	286534
7	908	110	10	0.52	7.5	287442
8	965	100	10	0.44	7.5	288407
9	945	90	10	0.94	7.8	289352
10	1,330	75	15	0.86	7.6	290682
11	0					
12	0					
13	4,722	20+100	55	1.40	7.6	295404
14	1,655	110+90	10	0.65	7.6	297059
15	1,528	180	20	1.10	7.6	298587
16	1,612	170	10	0.96	7.6	300199
17	1,544	160	10	0.69	7.4	301743
18	0					
19	0					
20	4,754	120	40	0.80	6.9	306497
21	1,555	110	10	0.82	7	308052
22	1,547	100+90	10	0.96	7.2	309599
23	1,382	180	10	0.63	7.1	310981
24	1,258	170	10	0.99	7.3	312239
25	0					
26	0					
27	2,983	150	20	1.10	7.3	315222
28	1,137	140	10	0.57	7.3	316359
29	928	130	10	0.70	7.5	317287
30	1,113	120	10	0.62	7.5	318400
31	1,233	110	10	1.00	7.5	319633
TOT	38,687		338			
AVG.	1247.97		10.90	No. Days:	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? YES NO

If yes, check reason's below.

Actual number of samples fewer than required.

Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

Failure to analyze repeat samples.

Does an MCL violation exist? YES NO

If yes, check reason(s) below.

Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

Positive E. Coli result followed by a positive total coliform repeat sample.

Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: *J. Deary*

Date: 4-5-06

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: March	2006
------------------	------------------	----------------	-------------------------	------

LOCATION: **WELL NO. 4**

Did an emergency occur in any part of the water system? YES NO

Source: Ground Water Does the system have a chlorination waiver? YES NO

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer 1648622
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl ₂ Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl ₂ use per 24hrs				
1	0	0	0	NR	NR	1648622	
2	0	0	0	NR	NR	1648622	
3	0	0	0	NR	NR	1648622	
4	0						
5	0						
6	0	0	0	NR	NR	1648622	
7	0	0	0	NR	NR	1648622	
8	0	0	0	NR	NR	1648622	
9	0	0	0	NR	NR	1648622	
10	0	0	0	NR	NR	1648622	
11	0						
12	0						
13	0	0	0	NR	NR	1648622	
14	0	0	0	NR	NR	1648622	
15	0	0	0	NR	NR	1648622	
16	0	0	0	NR	NR	1648622	
17	0	0	0	NR	NR	1648622	
18	0						
19	0						
20	0	0	0	NR	NR	1648622	
21	0	0	0	NR	NR	1648622	
22	0	0	0	NR	NR	1648622	
23	0	0	0	NR	NR	1648622	
24	0	0	0	NR	NR	1648622	
25	0						
26	0						
27	0	0	0	NR	NR	1648622	
28	0	0	0	NR	NR	1648622	
29	0	0	0	NR	NR	1648622	
30	0	0	0	NR	NR	1648622	
31	0	0	0	NR	NR	1648622	
TOT	0		0				
AVG.	0.00		0.00	No. Days:	31		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? YES NO

If yes, check reason's below.

Actual number of samples fewer than required.

Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

Failure to analyze repeat samples.

Does an MCL violation exist? YES NO

If yes, check reason(s) below.

Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

Positive E. Coli result followed by a positive total coliform repeat sample.

Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: *Sec. [Signature]*

Date: 4-5-06

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: March 2006
------------------	------------------	----------------	------------------------------

LOCATION: **WELL NO. 6**

Did an emergency occur in any part of the water system? YES _____ NO **X**

Source: Ground Water Does the system have a chlorination waiver? YES _____ NO **X**

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer
	Treated Water	Liquid Sodium Hypochlorite		Free Cl ₂ Residual	Lime Sodium	612506	
	K Gals	Gallons	Cl ₂ use per 24hrs	mg/l	Hydroxide		
1	334	141	9	0.35	6.2	612840	
2	368	129	12	0.00	6.1	613208	
3	250	120+30	9	0.21	6.1	613458	
4	0						
5	0						
6	1,088	108	42	0.40	6	614546	
7	320	96	12	0.20	6.2	614866	
8	321	80	16	0.30	6	615187	
9	348	65	15	0.19	6	615535	
10	501	45+98	20	0.29	6	616036	
11	0						
12	0						
13	2,605	133+17	126	0.00	6.1	618641	
14	451	135	15	0.20	6.1	619092	
15	560	126+24	9	0.30	6.1	619652	
16	235	147	13	0.13	6.1	619887	
17	345	135	12	0.14	6.1	620232	
18	0						
19	0						
20	950	117	18	0.02	6.1	621182	
21	217	111	6	0.55	6	621399	
22	444	99	12	0.59	6	621843	
23	449	90	9	0.01	6	622292	
24	294	90	0	0.01	6	622586	
25	0						
26	0						
27	614	78	12	0.01	6	623200	
28	257	78	0	0.05	6	623457	
29	205	66	8	0.03	6.1	623662	
30	317	57	11	0.02	6.1	623979	
31	291	45	12	0.03	6	624270	
TOT	11,764		398				
AVG.	379.48		12.84	No. Days:	31		

Population Served **3,500**

Number of routine samples **4**

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples **7**

Does a M&AR violation exist? YES _____ NO **X**

If yes, check reason's below.

_____ Actual number of samples fewer than required.

_____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

_____ Failure to analyze repeat samples.

Does an MCL violation exist? YES _____ NO **X**

If yes, check reason(s) below.

_____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

_____ Positive E. Coli result followed by a positive total coliform repeat sample.

_____ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: *J.C. [Signature]*

Date: 4-5-06

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: March	2006
------------------	------------------	----------------	-------------------------	------

LOCATION: **WELL NO. 7**

Did an emergency occur in any part of the water system? YES NO

Source: Ground Water

Does the system have a chlorination waiver? YES NO

Day of month	CHLORINATION			Free Cl2 Residual mg/l	pH		Totalizer Daily Totalizer 1922070
	Treated Water	Liquid Sodium Hypochlorite			Lime Sodium Hydroxide		
	K Gals	Gallons	Cl2 use per 24hrs				
1	849	85	14	0.35	6.2	1922919	
2	930	72	13	0.00	6.1	1923849	
3	808	60+90	12	0.21	6.1	1924657	
4	0						
5	0						
6	2,511	114	36	0.40	6	1927168	
7	848	100	14	0.20	6.2	1928016	
8	855	92	8	0.30	6	1928871	
9	926	72	20	0.19	6	1929797	
10	1,411	72+78	18	0.29	6	1931208	
11	0						
12	0						
13	4,605	75	75	0.00	6.1	1935813	
14	1,466	54	21	0.20	6.1	1937279	
15	1,504	36+114	18	0.30	6.1	1938783	
16	1,557	132	18	0.13	6.1	1940340	
17	1,500	114	18	0.14	6.1	1941840	
18	0						
19	0						
20	4,655	36+114	78	0.02	6.1	1946495	
21	1,539	126	24	0.55	6	1948034	
22	1,539	99	27	0.59	6	1949573	
23	1,360	81	8	0.01	6	1950933	
24	1,177	66+84	15	0.01	6	1952110	
25	0						
26	0						
27	2,700	135	15	0.01	6	1954810	
28	1,049	120	15	0.05	6	1955859	
29	765	120	0	0.70	6.1	1956624	
30	1,151	108	12	0.02	6.1	1957775	
31	1,129	90	18	0.03	6	1958904	
TOT	36,834		497				
AVG.	1188.19		16.03	No. Days:	31		

Population Served **3,500**

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? YES NO

If yes, check reason's below.

Actual number of samples fewer than required.

Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

Failure to analyze repeat samples.

Does an MCL violation exist? YES NO

If yes, check reason(s) below.

Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

Positive E. Coli result followed by a positive total coliform repeat sample.

Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: *J. A. [Signature]*

Date: 4-5-06

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: March 2006
------------------	------------------	----------------	------------------------------

LOCATION: **WELL NO. 10**

Did an emergency occur in any part of the water system? YES NO

Source: Ground Water

Does the system have a chlorination waiver? YES NO

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl2 use per 24hrs				
1	0	0	0	NR	NR	771803	
2	0	0	0	NR	NR	771803	
3	0	0	0	NR	NR	771803	
4	0						
5	0						
6	69	0	0	NR	NR	771872	
7	0	0	0	NR	NR	771872	
8	0	0	0	NR	NR	771872	
9	0	0	0	NR	NR	771872	
10	0	0	0	NR	NR	771872	
11	0						
12	0						
13	0	0	0	NR	NR	771872	
14	0	0	0	NR	NR	771872	
15	0	0	0	NR	NR	771872	
16	0	0	0	NR	NR	771872	
17	0	0	0	NR	NR	771872	
18	0						
19	0						
20	0	0	0	NR	NR	771872	
21	0	0	0	NR	NR	771872	
22	0	0	0	NR	NR	771872	
23	0	0	0	NR	NR	771872	
24	0	0	0	NR	NR	771872	
25	0						
26	0						
27	0	0	0	NR	NR	771872	
28	0	0	0	NR	NR	771872	
29	0	0	0	NR	NR	771872	
30	0	0	0	NR	NR	771872	
31	0	0	0	NR	NR	771872	
TOT	69		0				
AVG.	2.23		0.00	No. Days:	31		

Population Served **3,500**

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? YES NO

If yes, check reason's below.

Actual number of samples fewer than required.

Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

Failure to analyze repeat samples.

Does an MCL violation exist? YES NO

If yes, check reason(s) below.

Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

Positive E. Coli result followed by a positive total coliform repeat sample.

Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: JL Rosen

Date: 4-5-06

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: March 2006
------------------	------------------	----------------	------------------------------

LOCATION: WELL NO. 11

Did an emergency occur in any part of the water system? YES _____ NO X

Source: Ground Water

Does the system have a chlorination waiver? YES _____ NO X

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide		
		Gallons	Cl2 use per 24hrs		Sodium	Totalizer	
1	0	57	0	NR	NR	722540	
2	0	57	0	NR	NR	722540	
3	0	57	0	NR	NR	722540	
4	0						
5	0						
6	6	57	0	NR	NR	722546	
7	0	57	0	NR	NR	722546	
8	0	57	0	NR	NR	722546	
9	0	57	0	NR	NR	722546	
10	0	57	0	NR	NR	722546	
11	0						
12	0						
13	88	54	3	NR	NR	722634	
14	0	54	0	NR	NR	722634	
15	47	54	0	NR	NR	722681	
16	0	51	3	NR	NR	722681	
17	0	51	0	NR	NR	722681	
18	0						
19	0						
20	0	51	0	NR	NR	722681	
21	0	51	0	NR	NR	722681	
22	0	51	0	NR	NR	722681	
23	0	51	0	NR	NR	722681	
24	0	51	0	NR	NR	722681	
25	0						
26	0						
27	0	51	0	NR	NR	722681	
28	0	51	0	NR	NR	722681	
29	0	51	0	NR	NR	722681	
30	0	51	0	NR	NR	722681	
31	0	51	0	NR	NR	722681	
TOT	141		6				
AVG.	4.55		0.19	No. Days:	31		

Population Served **3,500**

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? YES _____ NO X

If yes, check reason's below.

_____ Actual number of samples fewer than required.

_____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

_____ Failure to analyze repeat samples.

Does an MCL violation exist? YES _____ NO X

If yes, check reason(s) below.

_____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

_____ Positive E. Coli result followed by a positive total coliform repeat sample.

_____ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: *JC*

Date: 4-5-06

Title: Water Systems Supervisor

Certification No. NY0031941

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

PUBLIC WATER SUPPLY PROTECTION

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD: March 2006
------------------	------------------	----------------	------------------------------

LOCATION: WELL NO. 12

Did an emergency occur in any part of the water system? YES NO

Source: Ground Water

Does the system have a chlorination waiver? YES NO

Day of month	CHLORINATION				pH		Totalizer Daily Totalizer 803011
	Treated Water K Gals	Liquid Sodium Hypochlorite		Free Cl2 Residual mg/l	Lime Sodium Hydroxide	Totalizer	
		Gallons	Cl2 use per 24hrs				
1	0	78	0	NR	NR	803011	
2	0	78	0	NR	NR	803011	
3	0	78	0	NR	NR	803011	
4	0						
5	0						
6	4	78	0	NR	NR	803015	
7	0	78	0	NR	NR	803015	
8	0	78	0	NR	NR	803015	
9	0	78	0	NR	NR	803015	
10	0	78	0	NR	NR	803015	
11	0						
12	0						
13	112	75	3	NR	NR	803127	
14	216	75	0	NR	NR	803343	
15	118	75	0	NR	NR	803461	
16	0	72	3	NR	NR	803461	
17	155	72	0	NR	NR	803616	
18	0						
19	0						
20	0	69	0	NR	NR	803616	
21	0	69	0	NR	NR	803616	
22	0	69	0	NR	NR	803616	
23	292	63	6	NR	NR	803908	
24	0	63	0	NR	NR	803908	
25	0						
26	0						
27	0	63	0	NR	NR	803908	
28	0	63	0	NR	NR	803908	
29	0	63	0	NR	NR	803908	
30	0	63	0	NR	NR	803908	
31	0	63	0	NR	NR	803908	
TOT	897		12				
AVG.	28.94		0.39	No. Days:	31		

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? YES NO

If yes, check reason's below.

Actual number of samples fewer than required.

Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

Failure to analyze repeat samples.

Does an MCL violation exist? YES NO

If yes, check reason(s) below.

Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

Positive E. Coli result followed by a positive total coliform repeat sample.

Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: *[Signature]*

Date: 4-5-06

Title: Water Systems Supervisor

Certification No. NY0031941

3/31/2006
Pump Data

MONTHLY GALLONAGE REPORT
mar2006.xls

Date	Well 4	Well 6	Well 7	Well10	Well11	Well12	Daily Total
1	0	334	849	0	0	0	1,183
2	0	368	930	0	0	0	1,298
3	0	250	808	0	0	0	1,058
4	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0
6	0	1,088	2,511	69	6	4	3,678
7	0	320	848	0	0	0	1,168
8	0	321	855	0	0	0	1,176
9	0	348	926	0	0	0	1,274
10	0	501	1,411	0	0	0	1,912
11	0	0	0	0	0	0	0
12	0	0	0	0	0	0	0
13	0	2,605	4,605	0	88	112	7,410
14	0	451	1,466	0	0	216	2,133
15	0	560	1,504	0	47	118	2,229
16	0	235	1,557	0	0	0	1,792
17	0	345	1,500	0	0	155	2,000
18	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0
20	0	950	4,655	0	0	0	5,605
21	0	217	1,539	0	0	0	1,756
22	0	444	1,539	0	0	0	1,983
23	0	449	1,360	0	0	292	2,101
24	0	294	1,177	0	0	0	1,471
25	0	0	0	0	0	0	0
26	0	0	0	0	0	0	0
27	0	614	2,700	0	0	0	3,314
28	0	257	1,049	0	0	0	1,306
29	0	205	765	0	0	0	970
30	0	317	1,151	0	0	0	1,468
31	0	291	1,129	0	0	0	1,420
Total	0	11,764	36,834	69	141	897	49,705
			Totalizer		Totalizer		Total(x1,000)
			This Month		Last Month		Gallons
	Well 4		1,648,622		1,648,622		0
	Well 6		624,270		612,506		11,764
	Well 7		1,958,904		1,922,070		36,834
	Well 10		771,872		771,803		69
	Well 11		722,681		722,540		141
	Well 12		803,908		803,011		897
AGS Water Supply Meter			576,942		571,810		5132.00
Medical Reactor - Well 105							0.00
Biology Building - Well 9			6,793,140		6,793,050		0.09

ATTACHMENT II

Brookhaven National Laboratory

Potable Water Supply

March 2006 Biweekly and Semi Annual Water Quality Monitoring Data

for the BNL Distribution System and Potable Water Wells

Attachment II
Table 1 - Summary of Water Quality Analyses
for the BNL Potable Water System
March 2006

Sample Location	Sample Date	pH (SU)	Temperature (Degrees F)	Conductivity (μ mhos)	Alkalinity (mg/L)	Calcium (mg/L)
WTP	3/2/06	7.5	56	164	ANR	ANR
WTP	3/7/06	7.5	53	155	ANR	ANR
WTP	3/9/06	7.8	53	159	ANR	ANR
WTP	3/14/06	7.6	55	140	ANR	ANR
WTP	3/16/06	7.6	56	145	ANR	ANR
WTP	3/21/06	7	52	151	ANR	ANR
WTP	3/23/06	7.1	54	157	ANR	ANR
WTP	3/28/06	7.3	57	168	ANR	ANR
WTP	3/30/06	7.5	55	147	ANR	ANR
Well 6	3/3/06	6.1	55	118	8.3	5.26
Well 7	3/3/06	6.0	54	109	11.1	5.89
Well 10	3/3/06	6.6	55	150	19.5	5.92
Well 11	3/3/06	6.3	54	90	12.6	4.58
Well 12	3/3/06	6.2	55	118	16.0	6.65

ANR- Analysis Not Required

NR- Not Reported

Note: Field parameters are only conducted for facilities that are in operation on the day of measurement.

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040, FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-009

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID : 5111891

Client ID. : 21965-009

Collected : 3/3/2006 1:20:00 PM Point No: 093-07
Received : 3/3/2006 3:35:00 PM Location: Well #6 Raw

Collected By CLIENT

Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	118		1	µmhos/cm		E120.1	03/03/2006
PH (FIELD)	6.1		1	pH Units		E150.1	03/03/2006 5:00 PM
Temperature	13		1	°C		E170.1	03/03/2006
Calcium	5260		1	µg/L		E200.7	03/21/2006 10:32 AM
Alkalinity, Total (As CaCO3)	8.3		1	mg/L		M2320 B	03/08/2006 12:35 PM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM

70 Bell Ave.

Upton, NY 11973

Attn To : Bob Lee

Lab No. : 0603131-010

Sample Information...

Type : Potable Water

Origin: Raw Well

Federal ID : 5111891

Client ID. : 21965-010

Collected : 3/3/2006 1:27:00 PM

Point No: 092-03

Received : 3/3/2006 3:35:00 PM

Location: Well #7 Raw

Collected By CLIENT

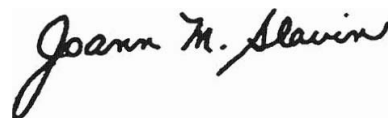
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	109		1	µmhos/cm		E120.1	03/03/2006
PH (FIELD)	6.0		1	pH Units		E150.1	03/03/2006 5:01 PM
Temperature	12		1	°C		E170.1	03/03/2006
Calcium	5890		1	µg/L		E200.7	03/21/2006 11:00 AM
Alkalinity, Total (As CaCO3)	11.1		1	mg/L		M2320 B	03/08/2006 9:10 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A27

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040, FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-011

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID : 5111891

Client ID. : 21965-011

Collected : 3/3/2006 11:22:00 AM Point No: 055-09
Received : 3/3/2006 3:35:00 PM Location: Well #10 Raw
Collected By CLIENT

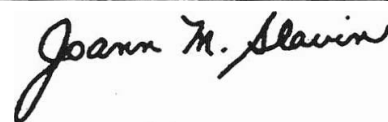
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	150		1	µmhos/cm		E120.1	03/03/2006
PH (FIELD)	6.6		1	pH Units		E150.1	03/03/2006 5:02 PM
Temperature	13		1	°C		E170.1	03/03/2006
Calcium	5920		1	µg/L		E200.7	03/21/2006 11:07 AM
Alkalinity, Total (As CaCO3)	19.5		1	mg/L		M2320 B	03/08/2006 9:15 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A28

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM

70 Bell Ave.

Upton, NY 11973

Attn To : Bob Lee

Lab No. : 0603131-012

Sample Information...

Type : Potable Water

Origin: Raw Well

Federal ID : 5111891

Client ID. : 21965-012

Collected : 3/3/2006 1:10:00 PM

Point No: 056-19

Received : 3/3/2006 3:35:00 PM

Location: Well #11 Raw

Collected By CLIENT

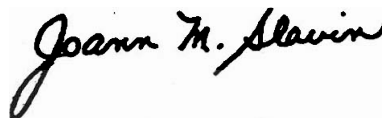
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	90.0		1	µmhos/cm		E120.1	03/03/2006
PH (FIELD)	6.3		1	pH Units		E150.1	03/03/2006 5:03 PM
Temperature	12		1	°C		E170.1	03/03/2006
Calcium	4580	B	1	µg/L		E200.7	03/21/2006 11:14 AM
Alkalinity, Total (As CaCO3)	12.6		1	mg/L		M2320 B	03/08/2006 9:20 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A29

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-013

Sample Information...
Type : Potable Water
Origin: Raw Well

Federal ID : 5111891

Client ID. : 21965-013

Collected : 3/3/2006 1:00:00 PM Point No: 056-20
Received : 3/3/2006 3:35:00 PM Location: Well #12 Raw

Collected By CLIENT

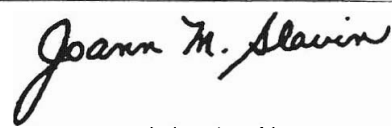
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	118		1	µmhos/cm		E120.1	03/03/2006
PH (FIELD)	6.2		1	pH Units		E150.1	03/03/2006 5:04 PM
Temperature	13		1	°C		E170.1	03/03/2006
Calcium	6650		1	µg/L		E200.7	03/21/2006 11:21 AM
Alkalinity, Total (As CaCO3)	16.0		1	mg/L		M2320 B	03/08/2006 9:25 AM

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A30

ATTACHMENT III

Brookhaven National Laboratory

Potable Water Supply

March 2006 Stage 1 Disinfectants & Disinfection Byproduct Rule

Monitoring Data and Bacteriological Analyses for the BNL Distribution System

Attachment III

**March 2006 Stage 1 Disinfectants & Disinfection Byproduct Rule Monitoring Data
Table II - Maximum Residual Disinfectant Level (MRDL) Compliance**

Location	Total Residual Chlorine (mg/L)											
	Apr. 05	May 05	June 05	July 05	Aug. 05	Sept. 05	Oct. 05	Nov. 05	Dec. 05	Jan. 06	Feb. 06	Mar. 06
Bldg. 49 Water Tower	0.7	0.9	0.9	0.7	0.9	0.5	0.7	0.9	0.9	1.0	0.8	1.2
Bldg. 640 Water Tower	0.8	0.9	1.5	0.5	0.8	0.7	1.2	0.4	0.4	0.9	0.7	0.9
Bldg. 363 Apt. Laundry	0.7	0.7	0.7	0.6	0.5	0.3	0.6	1.0	0.3	0.5	0.5	0.3
Bldg. 1005 RHIC	0.7	1.0	1.2	0.5	0.8	0.7	0.5	0.6	0.7	0.8	0.7	0.6
Bldg. 930 LINAC	NS	0.8	NS	0.8	NS	0.8	NS	0.8	NS	0.9	NS	0.8
Bldg. 725 NSLS	1	NS	1.3	NS	0.8	NS	0.8	NS	0.4	NS	0.8	NS
Bldg. 490 Outpatient Clinic	NS	1.0	NS	0.5	NS	0.6	NS	0.5	NS	0.7	NS	0.9
Bldg. 490 Block 11	NS	0.3	NS	0.5	NS	0.3	NS	0.9	NS	0.5	NS	0.8
Bldg. 490 Block 1 ACF	0.3	NS	0.6	NS	0.7	NS	0.5	NS	0.8	NS	0.6	NS
Bldg. 490 Block 4 MRC	0.8	NS	1.1	NS	0.7	NS	1.0	NS	0.4	NS	0.5	NS
Monthly Average	0.7	0.8	1.0	0.6	0.7	0.6	0.8	0.7	0.6	0.8	0.7	0.8

NA - Not Applicable

NS- Not Scheduled for sampling

Running Annual Average (mg/L) 0.7 (Total Residual Chlorine)
MRDL (mg/L) 4.0

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436. NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-001

Sample Information...
Type : Potable Water
Origin: Distribution

Federal ID : 5111891

Client ID. : 21965-001

Collected : 3/3/2006 9:10:00 AM

Point No: 094-273

Received : 3/3/2006 3:35:00 PM

Location: B-49 Water Tower

Collected By CLIENT

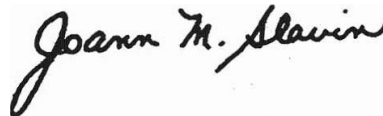
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	03/04/2006 12:00 PM
E_Coliform	Absent		1		Absent	M9223	03/04/2006 12:00 PM
Total Residual Chlorine	1.2		1	mg/L		M4500-Cl G	03/03/2006

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040, FAX: (631) 420-8436 NYSDOHID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-002

Sample Information...
Type : Potable Water
Origin: Distribution

Federal ID : 5111891

Client ID. : 21965-002

Collected : 3/3/2006 9:20:00 AM Point No: 076-408

Received : 3/3/2006 3:35:00 PM Location: B-640 Water Tower

Collected By CLIENT

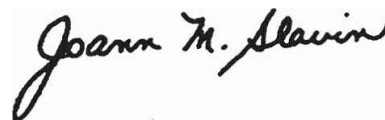
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	03/04/2006 12:00 PM
E_Coliform	Absent		1		Absent	M9223	03/04/2006 12:00 PM
Total Residual Chlorine	0.9		1	mg/L		M4500-Cl G	03/03/2006

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A19

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOHID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-004

Sample Information...
Type : Potable Water
Origin: Distribution

Federal ID : 5111891

Client ID. : 21965-004

Collected : 3/3/2006 8:57:00 AM

Point No: 109-19

Received : 3/3/2006 3:35:00 PM

Location: B-363 Apt.Laundry

Collected By CLIENT


Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	03/04/2006 12:00 PM
E_Coliform	Absent		1		Absent	M9223	03/04/2006 12:00 PM
Total Residual Chlorine	0.3		1	mg/L		M4500-Cl G	03/03/2006

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A21

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-003

Sample Information...
Type : Potable Water
Origin: Distribution

Federal ID : 5111891

Client ID. : 21965-003

Collected : 3/3/2006 12:39:00 PM Point No: 045-12
Received : 3/3/2006 3:35:00 PM Location: B-1005 RHIC

Collected By CLIENT

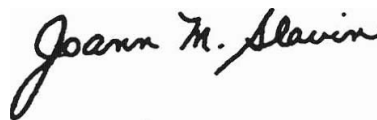
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	03/04/2006 12:00 PM
E_Coliform	Absent		1		Absent	M9223	03/04/2006 12:00 PM
Total Residual Chlorine	0.6		1	mg/L		M4500-Cl G	03/03/2006

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A20

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM

70 Bell Ave.

Upton, NY 11973

Attn To : Bob Lee

Lab No. : 0603131-005

Sample Information...

Type : Potable Water

Origin: Distribution

Federal ID : 5111891

Client ID. : 21965-005

Collected : 3/3/2006 10:49:00 AM Point No: 054-187

Received : 3/3/2006 3:35:00 PM Location: B-930 LINAC

Collected By CLIENT

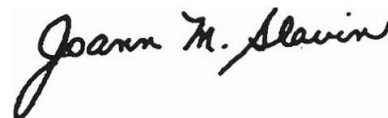
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	03/04/2006 12:00 PM
E_Coliform	Absent		1		Absent	M9223	03/04/2006 12:00 PM
Total Residual Chlorine	0.8		1	mg/L		M4500-CI G	03/03/2006

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-006

Sample Information...
Type : Potable Water
Origin: Distribution

Federal ID : 5111891

Client ID. : 21965-006

Collected : 3/3/2006 1:17:00 PM

Point No: 084-70

Received : 3/3/2006 3:35:00 PM

Location: B-490 Outpatient Clinic

Collected By CLIENT

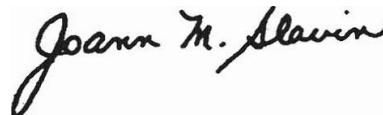
Copy : Original

CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	03/04/2006 12:00 PM
E_Coliform	Absent		1		Absent	M9223	03/04/2006 12:00 PM
Total Residual Chlorine	0.9		1	mg/L		M4500-CI G	03/03/2006

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s).
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee

Lab No. : 0603131-007

Sample Information...
Type : Potable Water
Origin: Distribution

Federal ID : 5111891

Client ID. : 21965-007

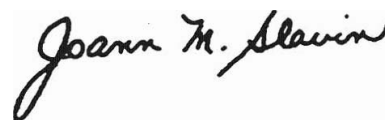
Collected : 3/3/2006 1:21:00 PM Point No: 084-67
Received : 3/3/2006 3:35:00 PM Location: B-490 Block 11
Collected By CLIENT

Copy : Original
CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1		Negative	M9223	03/04/2006 12:00 PM
E_Coliform	Absent		1		Absent	M9223	03/04/2006 12:00 PM
Total Residual Chlorine	0.8		1	mg/L		M4500-Cl G	03/03/2006

Result(s) reported meet(s) Regulatory Limit(s).
Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted
D.F. = Dilution Factor

Date Reported : 3/24/2006



Laboratory Manager

BNLM173 A24