



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

September 10, 2007

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 August 2007

In accordance with the requirements of the BNL Potable Water System Sampling Plan and the 2007 SCDHS Minimum Monitoring Requirements for the BNL Potable Water Supply, included please find the following attachments for your records:

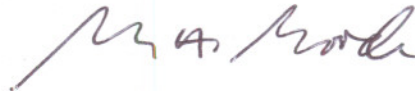
- Attachment I: BNL Potable Water Monthly Operational Data for August.
- Attachment II: August 2007 Biweekly and Third Quarter Water Quality Monitoring Data for the BNL Distribution System and Potable Water Wells.
- Attachment III: Annual and August 2007 Stage 1 Disinfectants & Disinfection Byproduct 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 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/attachments
	W. Chaloupka	w/attachments
	J. Granzen	w/attachments
	G. Goode	w/o attachments
	J. Higbie	w/attachments
	R. Lee	w/attachments
	E. Murphy	w/attachments
	P. Ponturo, SCDHS	w/o attachments
	L. Ross	w/o attachments

File: EC61ER.07

ATTACHMENT I
Brookhaven National Laboratory
Potable Water Supply
Monthly Operational Data for August 2007
for the BNL Potable Water System

Public Water System Name	Reporting Month/Year	Date Report Submitted	Source Water Type(s)
Brookhaven National Laboratory	8/07	8/31/2007	<input type="checkbox"/> Surface <input checked="" type="checkbox"/> Ground <input type="checkbox"/> GWUDI
Public Water System ID	County	Town, Village, or City	<input type="checkbox"/> Purchase with subsequent chlorination
5111891	Suffolk	Upton, New York 11973	<input type="checkbox"/> Purchase w/out subsequent chlorination

DATE	Source(s) in Use Well(s) No.:	Treated water volume (1,000 gallons/day)	Chlorination				Other Treatments / Readings				
			Gaseous		Liquid		Free chlorine residual at entry point (mg/l) (WTF-624)	Hypochlorite used/day (WTF - 624)	pH Lime Softening (WTF-624)	pH (Incoming RAW Water)	Daily Totalizer
			Cylinder weight (lbs.)	Chlorine used per day (lbs.)	Hypochlorite (gallons Hypochlorite in Tank)						
					100					743,632	
1	7+4+6	906	NA	NA	90	1.20	10	7.6	6	744,538	
2	7+4+6	998	NA	NA	80	0.65	10	7.6	6	745,536	
3	7+4+6	926	NA	NA	70	1.00	10	7.7	6.1	746,462	
4		-									
5		-									
6	7+4+6	2,526	NA	NA	45	0.90	25	7.4	6	748,988	
7	7+4+6	980	NA	NA	35	0.56	10	7.5	6	749,968	
8	7+4+6	970	NA	NA	20+130	0.70	15	7.5	6	750,938	
9	7+4+6	960	NA	NA	140	0.65	10	7.4	6	751,898	
10	7+4+6	839	NA	NA	135	1.10	5	7.5	6	752,737	
11		-									
12		-									
13	7+4+6	2,297	NA	NA	110	0.70	25	7.3	5.9	755,034	
14	7+4+6	895	NA	NA	100	0.80	10	7.3	6	755,929	
15	7+4+6	778	NA	NA	90	0.77	10	7.4	6	756,707	
16	7+4+6	73	NA	NA	90	0.61		NR	NR	756,780	
17	7+4+6	-	NA	NA	90	0.76		NR	NR	756,780	
18		-									
19		-									
20	7+4+6	13	NA	NA	90	NR	NR	NR	NR	756,793	
21	7+4+6	-	NA	NA	90	NR	NR	NR	NR	756,793	
22	7+4+6	-	NA	NA	90	NR	NR	NR	NR	756,793	
23	7+4+6	-	NA	NA	90	NR	NR	NR	NR	756,793	
24	7+4+6	-	NA	NA	90	NR	NR	NR	NR	756,793	
25		-									
26		-									
27	7+4+6	3	NA	NA	90	NR	NR	NR	NR	756,796	
28	7+4+6	2	NA	NA	90	NR	NR	NR	NR	756,798	
29	7+4+6	-	NA	NA	90	NR	NR	NR	NR	756,798	
30	7+4+6	-	NA	NA	90	NR	NR	NR	NR	756,798	
31	7+4+6	791	NA	NA	82	1.09	8	7.8	5.9	757,589	
Total		13,957	DAYS	31	1967		148	90	71.9		
AVG.		450.23			89.40909091	0.82	11.38461538	7.5	5.991666667		

Chlorine Mix Ratio = _____ quarts/gallons of _____ % chlorine added to _____ gallons of water in crock

Reported by: Lowell Ross Title: Water Systems Supervisor NYS DOH Operator Certification Number: NY0031941
 Signature: *Lowell Ross* Date: 9-6-07 Operator Grade Level 1A-SW/GUI

Public Water System Name		Reporting Month/Year		Date Report Submitted		Source Water Type(s)				
Brookhaven National Laboratory		8/07		8/31/2007		<input type="checkbox"/> Surface <input checked="" type="checkbox"/> Ground <input type="checkbox"/> GWUDI <input type="checkbox"/> Purchase with subsequent chlorination <input type="checkbox"/> Purchase w/out subsequent chlorination				
Public Water System ID		County		Town, Village, or City						
5111891		Suffolk		Upton, New York 11973						
DATE	Source(s) in Use Well No.: 4	Treated water volume (1,000 gallons/day)	Chlorination				Other Treatments / Readings			Daily Totalizer
			Gaseous		Liquid		Free chlorine residual at entry point (mg/l)	Hypochlorite used/day		
Cylinder weight (lbs.)	Chlorine used per day (lbs.)	Hypochlorite (gallons Hypochlorite in Tank)								
					105					1,746,861
1	4	921	NA	NA	142	0.04	13			1,747,782
2	4	359	NA	NA	135	0.04	7			1,748,141
3	4	265	NA	NA	127	0.06	8			1,748,406
4		-								
5		-								
6	4	440	NA	NA	126	0.02	1			1,748,846
7	4	335	NA	NA	120	0.02	4			1,749,181
8	4	214	NA	NA	117	0.03	3			1,749,395
9	4	-	NA	NA	117	0.02				1,749,395
10	4	23	NA	NA	117	0.02				1,749,418
11		-								
12		-								
13	4	162	NA	NA	114	0.02	3			1,749,580
14	4	36	NA	NA	114	0.05				1,749,616
15	4	78	NA	NA	114	0.07				1,749,694
16	4	5	NA	NA	114	NR				1,749,699
17	4	-	NA	NA	114	NR				1,749,699
18		-								
19		-								
20	4	-	NA	NA	114	NR	NR			1,749,699
21	4	-	NA	NA	114	NR	NR			1,749,699
22	4	-	NA	NA	114	NR	NR			1,749,699
23	4	-	NA	NA	114	NR	NR			1,749,699
24	4	-	NA	NA	114	NR	NR			1,749,699
25		-								
26		-								
27	4	-	NA	NA	114	NR	NR			1,749,699
28	4	-	NA	NA	114	NR	NR			1,749,699
29	4	-	NA	NA	114	NR	NR			1,749,699
30	4	-	NA	NA	114	NR	NR			1,749,699
31	4	144	NA	NA	111	0.09	3			1,749,843
Total		2,982	DAYS	31	2708		42			
AVG.		96.19			117.7391304	0.04	5.25			

Chlorine Mix Ratio = _____ quarts/gallons of _____ % chlorine added to _____ gallons of water in crock

Reported by: Lowell Ross Title: Water Systems Supervisor NYS DOH Operator Certification Number: NY0031941

Signature: [Signature] Date: 8-6-07 Operator Grade Level 1A-SW/GUI

NEW YORK STATE DEPARTMENT OF HEALTH

Bureau of Water Supply Protection

Water Systems Operation Report

Well No. 6 - Supply to Water Treatment Facility

Public Water System Name		Reporting Month/Year		Date Report Submitted		Source Water Type(s)			
Brookhaven National Laboratory		8/07		8/31/2007		<input type="checkbox"/> Surface <input checked="" type="checkbox"/> Ground <input type="checkbox"/> GWUDI <input type="checkbox"/> Purchase with subsequent chlorination <input type="checkbox"/> Purchase w/out subsequent chlorination			
Public Water System ID		County		Town, Village, or City					
5111891		Suffolk		Upton, New York 11973					
DATE	Source(s) in Use Well No.: 6	Treated water volume (1,000 gallons/day)	Chlorination				Other Treatments / Readings		Daily Totalizer
			Gaseous		Liquid		Free chlorine residual at entry point (mg/l)	Hypochlorite used/day	
			Cylinder weight (lbs.)	Chlorine used per day (lbs.)	Hypochlorite (gallons Hypochlorite in Tank)				
					110			691,768	
1	6	288	NA	NA	102	0.04	8	692,056	
2	6	63	NA	NA	102	0.04		692,119	
3	6	-	NA	NA	102	0.06		692,119	
4		-							
5		-							
6	6	88	NA	NA	99	0.02	3	692,207	
7	6	37	NA	NA	99	0.02		692,244	
8	6	31	NA	NA	96	0.03	3	692,275	
9	6	-	NA	NA	96	0.02		692,275	
10	6	-	NA	NA	96	0.02		692,275	
11		-							
12		-							
13	6	25	NA	NA	96	0.02		692,300	
14	6	-	NA	NA	96	0.05		692,300	
15	6	43	NA	NA	96	0.07		692,343	
16	6	-	NA	NA	96	NR		692,343	
17	6	-	NA	NA	96	NR		692,343	
18		-							
19		-							
20	6	-	NA	NA	96	NR	NR	692,343	
21	6	-	NA	NA	96	NR	NR	692,343	
22	6	-	NA	NA	96	NR	NR	692,343	
23	6	-	NA	NA	96	NR	NR	692,343	
24	6	-	NA	NA	96	NR	NR	692,343	
25		-							
26		-							
27	6	-	NA	NA	96	NR	NR	692,343	
28	6	-	NA	NA	96	NR	NR	692,343	
29	6	-	NA	NA	96	NR	NR	692,343	
30	6	-	NA	NA	96	NR	NR	692,343	
31	6	-	NA	NA	96	0.09		692,343	
Total		575	DAYS	31	2232		14		
AVG.		18.55			97.04347826	0.04	3.5		

Chlorine Mix Ratio = _____ quarts/gallons of _____ % chlorine added to _____ gallons of water in crock

Reported by: Lowell Ross Title: Water Systems Supervisor NYS DOH Operator Certification Number: NY0031941

Signature:  Date: 9-6-07 Operator Grade Level: 1A-SW/GUI

Public Water System Name	Reporting Month/Year	Date Report Submitted	Source Water Type(s)
Brookhaven National Laboratory	8/07	8/31/2007	<input type="checkbox"/> Surface <input checked="" type="checkbox"/> Ground <input type="checkbox"/> GWUDI
Public Water System ID	County	Town, Village, or City	<input type="checkbox"/> Purchase with subsequent chlorination
5111891	Suffolk	Upton, New York 11973	<input type="checkbox"/> Purchase w/out subsequent chlorination

DATE	Source(s) in Use Well No.: 7	Treated water volume (1,000 gallons/day)	Chlorination				Other Treatments / Readings			Daily Totalizer
			Gaseous		Liquid	Free chlorine residual at entry point (mg/l)	Hypochlorite used/day			
			Cylinder weight (lbs.)	Chlorine used per day (lbs.)	Hypochlorite (gallons Hypochlorite in Tank)					
					3				2,329,897	
1	7	90	NA	NA	150	0.04	3		2,329,987	
2	7	938	NA	NA	138	0.04	12		2,330,925	
3	7	1,033	NA	NA	126	0.06	12		2,331,958	
4		-								
5		-								
6	7	2,536	NA	NA	87	0.02	39		2,334,494	
7	7	913	NA	NA	72	0.02	15		2,335,407	
8	7	974	NA	NA	57	0.03	15		2,336,381	
9	7	1,128	NA	NA	42+108	0.02	15		2,337,509	
10	7	1,010	NA	NA	139	0.02	11		2,338,519	
11		-								
12		-								
13	7	2,560	NA	NA	100	0.02	39		2,341,079	
14	7	988	NA	NA	82	0.05	18		2,342,067	
15	7	833	NA	NA	66	0.07	16		2,342,900	
16	7	17	NA	NA	66	NR			2,342,917	
17	7	-	NA	NA	66	NR	NR		2,342,917	
18		-								
19		-								
20	7	-	NA	NA	66	NR	NR		2,342,917	
21	7	-	NA	NA	66	NR	NR		2,342,917	
22	7	-	NA	NA	66	NR	NR		2,342,917	
23	7	-	NA	NA	66	NR	NR		2,342,917	
24	7	-	NA	NA	66+36=102	NR	NR		2,342,917	
25		-								
26		-								
27	7	-	NA	NA	102	NR	NR		2,342,917	
28	7	-	NA	NA	102	NR	NR		2,342,917	
29	7	-	NA	NA	102+43	NR	NR		2,342,917	
30	7	-	NA	NA	145	NR	NR		2,342,917	
31	7	734	NA	NA	135	0.09	10		2,343,651	
Total		13,754	DAYS	31	1897		205			
AVG.		443.68			94.85	0.04	17.08333333			

Chlorine Mix Ratio = _____ quarts/gallons of _____ % chlorine added to _____ gallons of water in crock

Reported by: Lowell Ross Title: Water Systems Supervisor NYS DOH Operator Certification Number: NY0031941

Signature: *Lowell Ross* Date: 7-6-07 Operator Grade Level 1A-SW/GUI

Public Water System Name	Reporting Month/Year	Date Report Submitted	Source Water Type(s)
Brookhaven National Laboratory	8/07	8/31/2007	<input type="checkbox"/> Surface <input checked="" type="checkbox"/> Ground <input type="checkbox"/> GWUDI
Public Water System ID	County	Town, Village, or City	<input type="checkbox"/> Purchase with subsequent chlorination
5111891	Suffolk	Upton, New York 11973	<input type="checkbox"/> Purchase w/out subsequent chlorination

DATE	Source(s) in Use Well No.: 10	Treated water volume (1,000 gallons/day)	Chlorination				Other Treatments / Readings			Daily Totalizer
			Gaseous		Liquid	Free chlorine residual at entry point (mg/l)	Hypochlorite used/day	pH Sodium Hypochloride		
			Cylinder weight (lbs.)	Chlorine used per day (lbs.)	Hypochlorite (gallons Hypochlorite in Tank)					
									772,460	
1	10	-	NA	NA		NR	NR	NR	772,460	
2	10	-	NA	NA		NR	NR	NR	772,460	
3	10	-	NA	NA		NR	NR	NR	772,460	
4		-								
5		-								
6	10	-	NA	NA		NR	NR	NR	772,460	
7	10	-	NA	NA		NR	NR	NR	772,460	
8	10	-	NA	NA		NR	NR	NR	772,460	
9	10	-	NA	NA		NR	NR	NR	772,460	
10	10	-	NA	NA		NR	NR	NR	772,460	
11		-								
12		-								
13	10	-	NA	NA		NR	NR	NR	772,460	
14	10	-	NA	NA		NR	NR	NR	772,460	
15	10	-	NA	NA		NR	NR	NR	772,460	
16	10	-	NA	NA		NR	NR	NR	772,460	
17	10	-	NA	NA		NR	NR	NR	772,460	
18		-								
19		-								
20	10	-	NA	NA		NR	NR	NR	772,460	
21	10	-	NA	NA		NR	NR	NR	772,460	
22	10	-	NA	NA		NR	NR	NR	772,460	
23	10	-	NA	NA		NR	NR	NR	772,460	
24	10	-	NA	NA		NR	NR	NR	772,460	
25		-								
26		-								
27	10	-	NA	NA		NR	NR	NR	772,460	
28	10	-	NA	NA		NR	NR	NR	772,460	
29	10	-	NA	NA		NR	NR	NR	772,460	
30	10	-	NA	NA		NR	NR	NR	772,460	
31	10	-	NA	NA		NR	NR	NR	772,460	
Total		-	DAYS	31						
AVG.		-								

Chlorine Mix Ratio = _____ quarts/gallons of _____ % chlorine added to _____ gallons of water in crock

Reported by: Lowell Ross Title: Water Systems Supervisor NYS DOH Operator Certification Number: NY0031941
 Signature: [Signature] Date: 7-6-07 Operator Grade Level 1A-SW/GUI

Public Water System Name	Reporting Month/Year	Date Report Submitted	Source Water Type(s)
Brookhaven National Laboratory	8/07	8/31/2007	<input type="checkbox"/> Surface <input checked="" type="checkbox"/> Ground <input type="checkbox"/> GWUDI
Public Water System ID	County	Town, Village, or City	<input type="checkbox"/> Purchase with subsequent chlorination
5111891	Suffolk	Upton, New York 11973	<input type="checkbox"/> Purchase w/out subsequent chlorination

DATE	Source(s) in Use Well No.: 11	Treated water volume (1,000 gallons/day)	Chlorination				Other Treatments / Readings			Daily Totalizer
			Gaseous		Liquid	Free chlorine residual at entry point (mg/l)	Hypochlorite used/day	pH Sodium Hypochlorite		
			Cylinder weight (lbs.)	Chlorine used per day (lbs.)	Hypochlorite (gallons Hypochlorite in Tank)					
					120				741,049	
1	11	-	NA	NA	120	NR	NR	NR	741,049	
2	11	-	NA	NA	120	NR	NR	NR	741,049	
3	11	-	NA	NA	120	NR	NR	NR	741,049	
4		-								
5		-								
6	11	-	NA	NA	120	NR	NR	NR	741,049	
7	11	-	NA	NA	120	NR	NR	NR	741,049	
8	11	-	NA	NA	120	NR	NR	NR	741,049	
9	11	-	NA	NA	120	NR	NR	NR	741,049	
10	11	-	NA	NA	120	NR	NR	NR	741,049	
11		-								
12		-								
13	11	-	NA	NA	120	NR	NR	NR	741,049	
14	11	-	NA	NA	120	NR	NR	NR	741,049	
15	11	-	NA	NA	120	NR	NR	NR	741,049	
16	11	47	NA	NA	114	NR	6	NR	741,096	
17	11	-	NA	NA	114	NR	NR	NR	741,096	
18		-								
19		-								
20	11	-	NA	NA	105	0.89	9	NR	741,096	
21	11	-	NA	NA	105	NR	NR	NR	741,096	
22	11	4	NA	NA	105	NR	NR	NR	741,100	
23	11	-	NA	NA	105	NR	NR	NR	741,100	
24	11	-	NA	NA	105	NR	NR	NR	741,100	
25		-								
26		-								
27	11	-	NA	NA	105	NR	NR	NR	741,100	
28	11	-	NA	NA	105	NR	NR	NR	741,100	
29	11	-	NA	NA	105	NR	NR	NR	741,100	
30	11	-	NA	NA	105	NR	NR	NR	741,100	
31	11	-	NA	NA	105	NR	NR	NR	741,100	
Total		51	DAYS	31	2598		15			
AVG.		1.65			112.9565217	0.89	7.5			

Chlorine Mix Ratio = _____ quarts/gallons of _____ % chlorine added to _____ gallons of water in crock

Reported by: Lowell Ross Title: Water Systems Supervisor NYS DOH Operator Certification Number: NY0031941

Signature: *Lowell Ross* Date: 9-6-07 Operator Grade Level 1A-SW/GUI

Public Water System Name	Reporting Month/Year	Date Report Submitted	Source Water Type(s)
Brookhaven National Laboratory	8/07	8/31/2007	<input type="checkbox"/> Surface <input checked="" type="checkbox"/> Ground <input type="checkbox"/> GWUDI
Public Water System ID	County	Town, Village, or City	<input type="checkbox"/> Purchase with subsequent chlorination
5111891	Suffolk	Upton, New York 11973	<input type="checkbox"/> Purchase w/out subsequent chlorination

DATE	Source(s) in Use Well No.: 12	Treated water volume (1,000 gallons/day)	Chlorination				Other Treatments / Readings			Daily Totalizer
			Gaseous		Liquid	Free chlorine residual at entry point (mg/l)	Hypochlorite used/day	pH Sodium Hypochloride		
			Cylinder weight (lbs.)	Chlorine used per day (lbs.)	Hypochlorite (gallons Hypochlorite in Tank)					
					75				843,597	
1	12	-	NA	NA	75	NR	NR	NR	843,597	
2	12	-	NA	NA	75	NR	NR	NR	843,597	
3	12	-	NA	NA	75	NR	NR	NR	843,597	
4		-								
5		-								
6	12	-	NA	NA	75	NR	NR	NR	843,597	
7	12	-	NA	NA	75	NR	NR	NR	843,597	
8	12	-	NA	NA	75	NR	NR	NR	843,597	
9	12	-	NA	NA	75	NR	NR	NR	843,597	
10	12	-	NA	NA	75	NR	NR	NR	843,597	
11		-								
12		-								
13	12	-	NA	NA	75	NR	NR	NR	843,597	
14	12	-	NA	NA	75	NR	NR	NR	843,597	
15	12	-	NA	NA	75	NR	NR	NR	843,597	
16	12	48	NA	NA	68+58	NR	7	NR	843,645	
17	12	918	NA	NA	105+45	1.00	21	7.8	844,563	
18		-								
19		-								
20	12	3,565	NA	NA	105	0.79	45	8.7	848,128	
21	12	764	NA	NA	96	1.20	11	8.6	848,892	
22	12	841	NA	NA	75	1.40	21	8.5	849,733	
23	12	835	NA	NA	69+81=150	1.00	6	7.8	850,568	
24	12	886	NA	NA	138	1.40	12	7.8	851,454	
25		-								
26		-								
27	12	3,213	NA	NA	93	0.85	45	7.4	854,667	
28	12	990	NA	NA	84	0.72	9	6.9	855,657	
29	12	961	NA	NA	69+81	0.75	15	6.9	856,618	
30	12	944	NA	NA	138	0.76	12	6.8	857,562	
31	12	72	NA	NA	135	NR	3	NR	857,634	
Total		14,037	DAYS	31	1689		207	77.2		
AVG.		452.81			88.89473684	0.99	17.25	7.72		

Chlorine Mix Ratio = _____ quarts/gallons of _____ % chlorine added to _____ gallons of water in crock

Reported by: Lowell Ross Title: Water Systems Supervisor NYS DOH Operator Certification Number: NY0031941

Signature:  Date: 9-6-07 Operator Grade Level 1A-SW/GUI

Date	Well 4.	Well 6	Well 7	Well10	Well11	Well12	Daily Total
1	921	288	90	0	0	0	1,299
2	359	63	938	0	0	0	1,360
3	265	0	1,033	0	0	0	1,298
4	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0
6	440	88	2,536	0	0	0	3,064
7	335	37	913	0	0	0	1,285
8	214	31	974	0	0	0	1,219
9	0	0	1,128	0	0	0	1,128
10	23	0	1,010	0	0	0	1,033
11	0	0	0	0	0	0	0
12	0	0	0	0	0	0	0
13	162	25	2,560	0	0	0	2,747
14	36	0	988	0	0	0	1,024
15	78	43	833	0	0	0	954
16	5	0	17	0	47	48	117
17	0	0	0	0	0	918	918
18	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0
20	0	0	0	0	0	3,565	3,565
21	0	0	0	0	0	764	764
22	0	0	0	0	4	841	845
23	0	0	0	0	0	835	835
24	0	0	0	0	0	886	886
25	0	0	0	0	0	0	0
26	0	0	0	0	0	0	0
27	0	0	0	0	0	3,213	3,213
28	0	0	0	0	0	990	990
29	0	0	0	0	0	961	961
30	0	0	0	0	0	944	944
31	144	0	734	0	0	72	950
Total	2,982	575	13,754	0	51	14,037	31,399

	Totalizer This Month	Totalizer Last Month	Total(x1,000) Gallons
Well 4	1,749,843	1,746,861	2,982
Well 6	692,343	691,768	575
Well 7	2,343,651	2,329,897	13,754
Well 10	772,460	772,460	0
Well 11	741,100	741,049	51
Well 12	857,634	843,597	14,037

AGS Water Supply Meter

645,289

645,289

0.00

Biology Building - Well 9

6,793,150

6,793,150

0.00

Microbiological Samples and Free Chlorine Residual

Sample Location	Date of Sample	Sample Type 1.Routine 2.Repeat	Total Coliform Positive	E.coli Positive	Free Chlorine Residual (mg/l)	Population Served: <u>3,500</u>
B-49 WATER TOWER 094-273	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	0.82	Number of microbiological monitoring samples required: <u>4</u>
B-640 WATER TOWER 076-408	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	0.59	Number of microbiological monitoring samples taken: <u>7</u>
B 1005 RHIC 045-12	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	0.54	Did an M&R violation occur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
B 363 APART. LAUNDRY 109-19	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	0.52	If "Yes," check reason (s) below: <input type="checkbox"/> Actual number of samples is fewer than required. <input type="checkbox"/> Did not collect/analyze repeat sample. <input type="checkbox"/> Did not collect/analyze for E. coli for positive total coliform from routine/repeat sample.
B-725 NSLS 075-602	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	0.92	Did an MCL violation occur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
B 490 BLOCK 1 ACF 084-69	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	1.07	If "Yes," check reason(s) below (see also Part 5, Table 6 for additional information). <input type="checkbox"/> For systems collecting less than 40 samples per month: two or more of the samples (routine and/or repeat) are positive for total coliform (= total coliform MCL violation). <input type="checkbox"/> For systems collecting 40 or more samples per month: more than 5% of the samples (routine and/or repeat) are positive for total coliform (= total coliform MCL violation). <input type="checkbox"/> The original sample was E.coli positive and at least 1 repeat sample was positive for total coliform (= E.coli MCL violation).
B490 BLOCK 4 MRC 084-68	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	0.62	Reminder: System must collect a minimum of five (5) routine microbiological monitoring samples during the month following a repeat sample collection. As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.
FIELD DUP.BLDG. 490 1ACF 084-69	8/3/2007	1	<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No	1.07	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Sample Collector(s): J. KULESA

Name of NYSDOH Certified Laboratory: H2M Labs 575 Broad Hollow Road; Melville, N.Y. 11747

Did any MCL violation occur? If so, please describe: No

Did an emergency or low pressure problem occur? Did source water bypass an existing treatment process in the system? If so, please explain.

No

Comments:

ATTACHMENT II

Brookhaven National Laboratory

Potable Water Supply

August 2007 Biweekly and Third Quarter 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
August 2007

Sample Location	Sample Date	pH (SU)	Temperature (Degrees F)	Conductivity (µmhos)	Alkalinity (mg/L)	Calcium (mg/L)
WTP	8/2/07	7.6	57	143	ANR	ANR
WTP	8/7/07	7.5	55	148	ANR	ANR
WTP	8/9/07	7.4	55	167	ANR	ANR
WTP	8/14/07	7.3	56	154	ANR	ANR
Well 11	8/16/07	NR	55	298	ANR	ANR
Well 12	8/16/07	NR	55	280	ANR	ANR
Well 12	8/21/07	8.6	56	240	ANR	ANR
Well 12	8/23/07	7.8	56	240	ANR	ANR
Well 12	8/28/07	6.9	67	211	ANR	ANR
Well 12	8/30/07	6.8	68	205	ANR	ANR
Bldg. 49	8/3/07	6.7	73	272	13.6	6.52
Bldg. 640	8/3/07	6.8	70	194	14.4	6.56
Bldg. 363	8/3/07	6.4	72	170	16.1	7.71

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

Federal ID 5111891

Collected : 8/3/2007 1:30:00 PM

Received : 8/3/2007 3:15:00 PM

Collected By : CLIENT

Copy : JEN

CC

Lab No. : 0708983-001B

Client ID. : 23386-001

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Point No : 094-273

Location : B-49 Water Tower

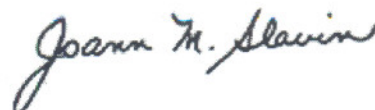
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	272		1	µmhos/cm		E120.1	08/03/2007 1:30 PM
PH (FIELD)	6.7		1	pH Units		E150.1	08/03/2007 5:00 PM
Temperature	23		1	°C		E170.1	08/03/2007
Calcium	6520		1	µg/L		E200.7	08/16/2007 9:08 AM
Alkalinity, Total (As CaCO3)	13.6		2	mg/L		M2320 B	08/10/2007 12:46 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 : 8/24/2007



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. : 0708983-002B

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Federal ID 5111891

Client ID. : 23386-002

Collected : 8/3/2007 9:36:00 AM

Point No : 076-408

Received : 8/3/2007 3:15:00 PM

Location : B-640 Water Tower

Collected By : CLIENT

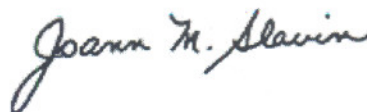
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<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	194		1	µmhos/cm		E120.1	08/03/2007 9:36 AM
PH (FIELD)	6.8		1	pH Units		E150.1	08/03/2007 5:01 PM
Temperature	21		1	°C		E170.1	08/03/2007
Calcium	6560		1	µg/L		E200.7	08/16/2007 9:23 AM
Alkalinity, Total (As CaCO3)	14.4		1	mg/L		M2320 B	08/10/2007 1:10 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 : 8/24/2007



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

Federal ID 5111891

Collected : 8/3/2007 9:03:00 AM

Received : 8/3/2007 3:15:00 PM

Collected By : CLIENT

Copy : JEN

CC

Lab No. : 0708983-007B

Client ID. : 23386-007

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

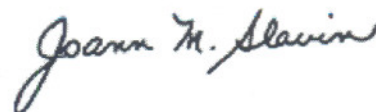
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Specific Conductance	170		1	µmhos/cm		E120.1	08/03/2007 9:03 AM
PH (FIELD)	6.4		1	pH Units		E150.1	08/03/2007 5:02 PM
Temperature	22		1	°C		E170.1	08/03/2007
Calcium	7710		1	µg/L		E200.7	08/16/2007 9:37 AM
Alkalinity, Total (As CaCO3)	16.1		1	mg/L		M2320 B	08/10/2007 1:18 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 : 8/24/2007



Laboratory Manager

ATTACHMENT III

Brookhaven National Laboratory

Potable Water Supply

Annual and August 2007 Stage 1 Disinfectants & Disinfection Byproduct Rule

Monitoring Data and Bacteriological Analyses for the BNL Distribution System

Attachment III

**August 2007 Stage 1 Disinfectants & Disinfection Byproduct Rule Monitoring Data
Table II - Maximum Residual Disinfectant Level (MRDL) Compliance**

Location	Total Residual Chlorine (mg/L)											
	Sept. 06	Oct. 06	Nov. 06	Dec. 06	Jan. 07	Feb. 07	Mar. 07	Apr. 07	May 07	June 07	July 07	Aug. 07
Bldg. 49 Water Tower	0.5	0.8	0.6	1	0.7	0.7	0.6	0.6	0.9	0.8	0.6	0.8
Bldg. 640 Water Tower	0.5	1.4	0.5	0.5	0.3	0.6	0.6	0.6	0.8	0.5	0.5	0.6
Bldg. 363 Apt. Laundry	0.5	0.5	0.5	0.5	0.3	0.5	0.3	0.5	0.3	0.6	0.4	0.5
Bldg. 1005 RHIC	0.6	0.6	0.6	0.7	0.3	0.7	0.6	0.6	0.9	0.5	0.5	0.5
Bldg. 930 LINAC	0.6	NS	1.0	NS	0.3	NS	0.8	NS	1.5	NS	0.4	NS
Bldg. 725 NSLS	NS	0.5	NS	0.3	NS	0.8	NS	0.8	NS	0.8	NS	0.9
Bldg. 490 Outpatient Clinic	0.5	NS	0.7	NS	0.5	NS	0.7	NS	0.5	NS	0.9	NS
Bldg. 490 Block 11	0.6	NS	0.5	NS	0.4	NS	0.3	NS	0.5	NS	0.6	NS
Bldg. 490 Block 1 ACF	NS	0.5	NS	0.3	NS	0.4	NS	0.5	NS	0.6	NS	1.1
Bldg. 490 Block 4 MRC	NS	0.6	NS	0.4	NS	0.6	NS	0.5	NS	0.7	NS	0.6
Monthly Average	0.5	0.7	0.6	0.5	0.4	0.6	0.6	0.6	0.8	0.6	0.6	0.7

NA - Not Applicable

NS- Not Scheduled for sampling

Running Annual Average (mg/L) 0.6 (Total Residual Chlorine)
MRDL (mg/L) 4.0

2007 Annual Total Trihalomethane (TTHM) and Five Haloacetic Acid (HAA5) Compliance

2007 Annual TTHM Result (mg/L) 0.01
MCL (mg/L) 0.08

2007 Annual HAA5 Result (mg/L) 0.002
MCL (mg/L) 0.06

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. : 0708983-007D

Sample Information...

Type : Potable Water
Origin : Distribution
Routine

Federal ID 5111891

Client ID. : 23386-007

Collected : 8/3/2007 9:03:00 AM

Point No : 109-19

Received : 8/3/2007 3:15:00 PM

Location : B-363 Apt.Laundry

Collected By : CLIENT

Copy : JEN

CC

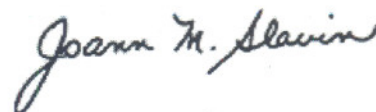
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Chloroform	2.5		1	ug/L	50	E502.2	08/15/2007 12:17 PM
Bromodichloromethane	3.4		1	ug/L	50	E502.2	08/15/2007 12:17 PM
Dibromochloromethane	3.2		1	ug/L	50	E502.2	08/15/2007 12:17 PM
Bromoform	1.0		1	ug/L	50	E502.2	08/15/2007 12:17 PM
Total Trihalomethanes	10.1		1	ug/L	80	E502.2	08/15/2007 12:17 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 : 8/24/2007



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. : 0708983-007E

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

Federal ID 5111891

Client ID. : 23386-007

Collected : 8/3/2007 9:03:00 AM

Point No : 109-19

Received : 8/3/2007 3:15:00 PM

Location : B-363 Apt.Laundry

Collected By : CLIENT

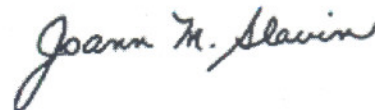
Copy : JEN

CC

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Method Number	Analyzed
Chloroacetic acid	< 2.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Chloroacetic acid	< 2.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Bromoacetic acid	< 1.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Bromoacetic acid	< 1.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Dichloroacetic acid	1.6		1	µg/L		E552.2	08/11/2007 6:06 PM
Dichloroacetic acid	1.3		1	µg/L		E552.2	08/11/2007 6:06 PM
Trichloroacetic acid	< 1.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Trichloroacetic acid	< 1.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Dibromoacetic acid	< 2.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Dibromoacetic acid	< 2.0		1	µg/L		E552.2	08/11/2007 6:06 PM
Total Haloacetic Acid	< 2.0		1	µg/L	60	E552.2	08/11/2007 6:06 PM
Total Haloacetic Acid	< 2.0		1	µg/L	60	E552.2	08/11/2007 6:06 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 : 8/24/2007



Laboratory Manager

H2M LABS, INC.575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID# 10478

Brookhaven National Lab.-BNLM

70 Bell Ave.

Upton, NY 11973

Attn To : Bob Lee

Federal ID 5111891

Collected : 8/3/07 1:30:00 PM

Received : 8/3/07 3:15:00 PM

Collected By : CLIENT

Copy : ORIGINAL

CC

LABORATORY RESULTS

Lab No. : 0708983-001A

Client ID. : 23386-001

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

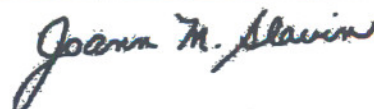
Point No : 094-273

Location : B-49 Water Tower

<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	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	0.8		1	mg/L		M4500-Cl G	08/03/2007

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

Date Reported : 8/24/07



H2M LABS, INC.

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

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

LABORATORY RESULTS

Lab No. : 0708983-002A

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Federal ID 5111891

Client ID. : 23386-002

Collected : 8/3/07 9:36:00 AM

Point No : 076-408

Received : 8/3/07 3:15:00 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	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	0.6		1	mg/L		M4500-Cl G	08/03/2007

Result(s) reported meet(s) Regulatory Limit(s).

Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

D.F. = Dilution Factor

Date Reported : 8/24/07



H2M LABS, INC.

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

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

LABORATORY RESULTS

Lab No. : 0708983-007A

Sample Information...

Type : Potable Water
 Origin : Distribution
 Routine

Federal ID 5111891

Client ID : 23386-007

Collected : 8/3/07 9:03:00 AM

Point No : 109-19

Received : 8/3/07 3:15:00 PM

Location : B-363 Apt.Laundry

Collected By : CLIENT

Copy : ORIGINAL

CC

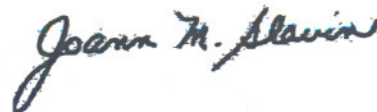
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-Cl G	08/03/2007

Result(s) reported meet(s) Regulatory Limit(s).

Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

D.F. = Dilution Factor

Date Reported : 8/24/07



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. : **0708983-003A**

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

Federal ID 5111891

Client ID. : 23386-003

Collected : 8/3/07 9:24:00 AM

Point No : 045-12

Received : 8/3/07 3:15:00 PM

Location : B-1005 RHIC

Collected By : CLIENT

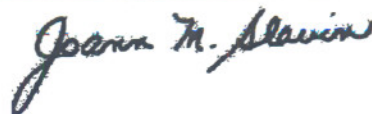
Copy : ORIGINAL

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<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	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	0.5		1	mg/L		M4500-Cl G	08/03/2007

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

Date Reported : 8/24/07



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. : 0708983-004A

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Federal ID 5111891

Client ID. : 23386-004

Collected : 8/3/07 10:50:00 AM

Point No : 075-602

Received : 8/3/07 3:15:00 PM

Location : B-725 NSLS

Collected By : CLIENT

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Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Method Number	Analyzed
Total Coliform	Negative		1	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	0.9		1	mg/L		M4500-Cl G	08/03/2007

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

Date Reported : 8/24/07



Laboratory Manager

H2M LABS, INC.

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

Brookhaven National Lab.-BNLM

70 Bell Ave.

Upton, NY 11973

Attn To : Bob Lee

Federal ID 5111891

Collected : 8/3/07 11:25:00 AM

Received : 8/3/07 3:15:00 PM

Collected By : CLIENT

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LABORATORY RESULTS

Lab No. : 0708983-005A

Sample Information...

Type : Potable Water

Origin : Distribution

Routine

Client ID. : 23386-005

Point No : 084-69

Location : B-490 Block 1 ACF

<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	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	1.1		1	mg/L		M4500-Cl G	08/03/2007

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

Date Reported : 8/24/07

Joann M. Slavin

Laboratory Manager

H2M LABS, INC.575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478Brookhaven National Lab.-BNLM
70 Bell Ave.
Upton, NY 11973
Attn To : Bob Lee**LABORATORY RESULTS**

Lab No. : 0708983-006A

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

Federal ID 5111891

Client ID. : 23386-006

Collected : 8/3/07 11:15:00 AM

Point No : 084-68

Received : 8/3/07 3:15:00 PM

Location : B-490 Block 4 MRC

Collected By : CLIENT

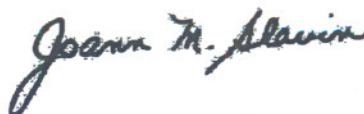
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<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Limit</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	Negative		1	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	0.6		1	mg/L		M4500-Cl G	08/03/2007

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

Date Reported : 8/24/07



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. : 0708983-008A

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

Federal ID 5111891

Client ID. : 23386-008

Collected : 8/3/07 11:25:00 AM

Point No : 084-69

Received : 8/3/07 3:15:00 PM

Location : B-490 Block 1 ACF

Collected By : CLIENT

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<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	N/A	Negative	M9223	08/04/2007 11:30 AM
E_Coliform	Absent		1	N/A	Absent	M9223	08/04/2007 11:30 AM
Total Residual Chlorine	1.1		1	mg/L		M4500-Cl G	08/03/2007

Result(s) reported meet(s) Regulatory Limit(s).

Result(s) flagged with * Exceed Regulatory Limit(s). Limit noted.

D.F. = Dilution Factor

Date Reported : 8/24/07

