Mr. Sharpe

QUALITY CONTROL LABORATORY REPORT

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK Grove	PMU	12 November 1980

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
Caretaker #1		Ø	
Caretaker #2		Ø	
Chowhall		Ø	
Head		Ø	
Waitrack		Ø	
Yardspigot		Ø	
Fenceline		Ø	

REMARKS

SIGNATURE	DATE
D. Paulus	13 November 1980

COPY TO

- [x] INREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [x] OAK Grove

QUALITY CONTROL LABORATORY REPORT Mr. SHARPE

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMV	30 OCTOBER 1980

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM ~~FECAL~~
CARETAKER #1		0	
CARETAKER #2		0	
CHOWHALL		0	
HEAD		0	
FENCELINE		0	102 NON-COLIFORM
YARD SPIGOT		0	
WASHRACK		0	

REMARKS

SIGNATURE Elizabeth Bty

DATE 31 OCTOBER 1980

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- ☐ WATER TREATMENT PLANT (GENERAL FOREMAN)
- ☐ BASE PREVENTIVE MEDICINE
- ☐ MCAS PREVENTIVE MEDICINE
- ☐ _____

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER Mr. Sharpe

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
Oak Grove	PMU	29 October 1980

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
Caretaker #1		Ø	
Caretaker #2		Ø	
Chowhall		Ø	
Head		Ø	
Fenceline		Ø	
Yard Spigot		Ø	
Washrack		Ø	

REMARKS

SIGNATURE Elizabeth Betz DATE 30 October 1980

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- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] _____

MR SHARPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		28 OCT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
HEAD		Φ	
YARD SPIGOT		Φ	
CHOW HALL		Φ	
CARETAKER #1		Φ	
CARETAKER #2		Φ	
FENCE LINE		Φ	
WASHRACK		Φ	

REMARKS

SIGNATURE	DATE
H. J. Burns	27 OCT 80

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- ☐ BASE PREVENTIVE MEDICINE
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QUALITY CONTROL LABORATORY REPORT

MR SHARPE

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		27 OCT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
WASHRACK		Ø	
YARD SPIGOT		Ø	
HEAD		Ø	
FENCE LINE		Ø	
CARETAKER #1		Ø	
CHOWHOUND		Ø	
CARETAKER #2		Ø	

REMARKS

SIGNATURE H. J. Burns

DATE 28 OCT 80

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QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MR. SHARPE

MCBCL 11339/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	OAK GROVE CORPSMAN	10/24/80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
FENCELINE		Ø	
HEAD		Ø	
WASHRACK		Ø	
CHOW HALL		Ø	
YARD SPIGOT		Ø	
CARETAKER #2 (FROM OUTSIDE SPIGOT)		142 NON-COLIFORM	

REMARKS

SIGNATURE [illegible] DATE 10/25/80

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QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER Mr. SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMU	23 OCTOBER 1980

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
CARETAKER #1		Ø	
CARETAKER #2		Ø	
CROWHALL		Ø	
HEAD		Ø	
FENCELINE		Ø	
YARD SAGOT		Ø	
WASHRACK		Ø	

REMARKS

SIGNATURE Elizabeth Botz

DATE 24 OCTOBER 1980

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- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] _____

Mr. SHARPE

QUALITY CONTROL LABORATORY REPORT

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMU	22 OCTOBER 1980

LOCATION	MARKED	COLIFORM	
		TOTAL	FECAL
CARETAKER #1		Ø	
CARETAKER #2		Ø	
CHOWHALL		Ø	
HEAD		Ø	
FENCELINE		Ø	
YARD SPIGOT		Ø	
WASHRACK		Ø	

REMARKS

SIGNATURE Elizabeth A. Betz

DATE 23 OCTOBER 1980

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- ☐ _____

MR SHAPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		21 OCTOBER 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
CARETAKER #1		Φ	
CHOW HALL		Φ	
HEAD		Φ	
WASH RACK		Φ	
YARD SPIGOT		Φ	
CARETAKER #2		Φ	
FENCE LINE		Φ	

REMARKS

SIGNATURE H. J. Burns

DATE 22 OCT 80

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- [ ] _____

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER MR SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		20 OCT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
FENCELINE		Φ	
CARETAKER #1		Φ	
CARETAKER #2		Φ	
YARD SPIGOT		Φ	
WASHRACK		Φ	
CHOW HALL		Φ	
HEAD		Φ	

REMARKS

SIGNATURE H J Burns DATE 21 OCT 80

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MR. SHARPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	OAK GROVE CORPSMAN	10-17-80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
HEAD SINK		Ø	
CHOWHALL SINK		Ø	
FENCELINE SPIGOT		Ø	
WASHRACK SPIGOT		Ø	
CARETAKER 1 KITCHEN		Ø	
CARETAKER 2 KITCHEN		Ø	
YARD SPIGOT		Ø	

REMARKS

NO GROWTH ON ANY PLATE.
(CONTROLS WERE NORMAL)

SIGNATURE [illegible] DATE 10-18-80

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- [ ] _____

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER Mr. SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMU	16 OCTOBER 1980

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
CARETAKER #1 KITCHEN		Ø	
CARETAKER #2 KITCHEN		Ø	
CHOWHALL SINK		Ø	
HEAD SINK		Ø	
FENCELINE SPIGOT		Ø	
YARD SPIGOT		Ø	
WASH SPIGOT		Ø	

REMARKS

SIGNATURE Elizabeth A. Betz

DATE 17 OCTOBER 1980

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- [ ] MCAS PREVENTIVE MEDICINE
- [ ] _____

QUALITY CONTROL LABORATORY REPORT Mr. Sharpe

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
Oak Grove	PMV	15 October 1980

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
Caretaker #1 Kitchen		Ø	
Caretaker #2 Kitchen		Ø	
Chowhall Sink		Ø	
Head Sink		Ø	
Fenceline Spigot		Ø	
Yard Spigot		Ø	
Washrack Spigot		Ø	

REMARKS

SIGNATURE Elizabeth A. Betz

DATE 16 October 1980

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- [ ] _____

QUALITY CONTROL LABORATORY REPORT Mr. SHARPE

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMU	14 OCTOBER 1980

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
CHOWHALL SINK		Ø	
CARETAKER #2 KITCHEN		Ø	
CARETAKER #1 KITCHEN		Ø	
HEAD SINK		Ø	
FENCELINE SPIGOT		Ø	
NEW SPIGOT BY OLD WELL		Ø	
WASHRACK SPIGOT		Ø	

REMARKS

SIGNATURE Elizabeth Betz DATE 15 OCTOBER 1980

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- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [x] BASE PREVENTIVE MEDICINE
- [x] MCAS PREVENTIVE MEDICINE
- [x] OAK GROVE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MR. SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	OAK GROVE CORPSMAN	10 OCT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
CARETAKER KITCHEN		TNTC NON-COLIFORM	
CARETAKER 2 KITCHEN		ϕ	
HEAD SINK		ϕ	
CHOW HALL SINK		ϕ	
FENCE LINE SPIGOT		ϕ	
NEW SPIGOT BY OLD WELL		2 COLIFORM 4 NON-COLIFORM	
WASHRACK		19 COLIFORM 13 NON-COLIFORM	
BULL 310		ϕ	

REMARKS

SIGNATURE Charles T. Fuke

DATE 11 Oct 80

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- [ ] BASE PREVENTIVE MEDICINE
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- [ ] _____

MR SHARPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		9 OCT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
BULL 445		Ø	
NEW SPIGOT	OLD WELL	Ø	
CHOW HALL	SINK	Ø	
FENCE LINE	SPIGOT	Ø	
HEAD	SINK	Ø	
CARETAKER #1	KITCHEN	Ø	
WASH RACK	SPIGOT	Ø	
CARETAKER #2	KITCHEN	Ø	

REMARKS

SIGNATURE H. J. Burns

DATE 10 OCT 80

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QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER MR SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		8 OCT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
FENCE LINE		Ø	
HEAD		Ø	
CARETAKER #1		Ø	
CARETAKER #2		Ø	
CHOW HALL		Ø	
NEW SPIGOT	OLD WELL	Ø	
WASH RACK		Ø	

REMARKS

WASH RACK : TNTC NON-COLIFORM

SIGNATURE K J Burns DATE 9 OCT 80

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- ☐ MCAS PREVENTIVE MEDICINE
- ☐ _____

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MR SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		7 OCTOBER 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
CHOW HALL		Φ	
CARETAKER #1		Φ	
CARETAKER #2		Φ	
NEW SPIGOT	OLD WELL	Φ	
FENCE LINE		Φ	
HEAD		Φ	
WASHRACK		Φ	

REMARKS

NEW SPIGOT OLD WELL = TNTC NON-COLIFORM
FENCE LINE = " " "
HEAD = " " "
WASH RACK = " " "

SIGNATURE H J Burns DATE 8 OCT 80

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- ☐ _____

MR SHARPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		6 OCTOBER 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
HEAD	SPIGOT	Ø	
CAMP SITE	SPIGOT	Ø	
MESS HALL	SPIGOT	Ø	
FENCE LINE	SPIGOT	Ø	
WASHRACK	SPIGOT	Ø	
CARETAKER KITCHEN #1	SPIGOT	Ø	
CARETAKER BATHROOM #2	SINK	Ø	
NEW SPIGOT	OLD WELL	Ø	
HYDRANT		Ø	

REMARKS

HYDRANT = 150 NON-COLIFORM

SAMPLES TAKEN AFTER SUPER-CHLORINATION OVER WEEKEND.

SIGNATURE H. J. Burke | DATE 7 OCT 80

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- [ ] MCAS PREVENTIVE MEDICINE
- [ ] _____

OAK GROVE

HEAD	SPIGOT	✓
CAMP SITE	SPIGOT	✓
MESS HALL	SPIGOT	✓
FENCE LINE	SPIGOT	✓
WASHRACK	SPIGOT	✓
CARETAKER'S TURN	SPIGOT	✓
CARETAKER'S BATHROOM	SINK	✓
NEW SPIGOT	WELL	✓
HYDRANT		✓

HYDRANT = LISS NON-CARTON

SAMPLES TAKEN AFTER SUBSTANTIATION
OVER WEEKEND

MR SHARPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		1 OCT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
FENCE FAUCET		Φ	Φ
FENCE HYDRANT		Φ	Φ
MOOSE HEAD		Φ	Φ
CARETAKER #1		Φ	Φ
CARETAKER #2		Φ	Φ
MOOSE HEAD		Φ	Φ
FAUCET BENT LINE		Φ	Φ
MOOSE VEN WASH PAD		Φ	Φ
FAUCET OLD WELL HOUSE		Φ	Φ
MOOSE GATHEY		Φ	Φ

REMARKS

FENCE HYDRANT = 3600 NON-COLI-FORM
CARETAKER #1 = 3300 " " "
CARETAKER #2 = TNTC " " "
FAUCET BENT LINE = TNTC " " "
VEN WASH PAD = TNTC " " "
FAUCET OLD WELL HOUSE = TNTC " " "

SIGNATURE H J Burns

DATE 2 OCT 80

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- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
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QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MR SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		30 SEPT 80

LOCATION	MARKED	COLIFORM TOTAL MPN	COLIFORM TOTAL MCC
FENCE LINE FAUCET #2		Φ	Φ
CARETAKER WELL		Φ	Φ
MOOSE GALLEY		Φ	Φ
FENCE LINE HYDRANT		7	4
VEH WASH. PAD		Φ	Φ
OLD WELL HOUSE		Φ	Φ
MOOSE HEAD		Φ	Φ

ALL SAMPLES RAN AT (1ML) DILUTIONS

REMARKS

FENCE LINE FAUCET :	300 NON-COLIFORM	300	NON-COLIFORM
CARETAKER WELL #2 :	600 " "	1200	" "
MOOSE GALLEY :	TNTC " "	TNTC	" "
FENCE LINE HYDRANT :	2600 " "	2600	" "
VEH WASH. PAD :	OVERGROWN	OVERGROWN	
OLD WELL HOUSE :	TNTC	TNTC	
MOOSE HEAD :	TNTC	TNTC	

SIGNATURE H. J. Burns

DATE 1 OCT 80

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- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] _____

Thanks Ed W

→ I passed to Mr Elder

O. Julian

29 Sept 80

Fred Hill with State Health Dept will be calling later today -

He will give us the results of lab tests on Jones Co. Water supply.

He stated that Jones County was Not obligated to have a chlorine residual; ONLY to provide Acceptable water at meter. He seriously doubts that Jones Co. could maintain any significant chlorine residual without installing a chlorinator somewhere in system.

He also advised us to replace old questionable lines, make other repairs, and superchlorinate the system for no less than 48 hours. He commented that this "could" cause badly corroded galvanized pipe to start leaking.

Donny

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER MR SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE		29 SEPT 80

LOCATION	MARKED	COLIFORM TOTAL MAH	COLIFORM TOTAL MCC	COLIFORM FECAL MAH	COLIFORM FECAL MCC
MOOSE HEAD		OVERGROWN	OVERGROWN	Φ	Φ
FAUCET OLD WELL HOUSE		OVERGROWN	OVERGROWN	Φ	Φ
MOOSE GALLEY		OVERGROWN	OVERGROWN	Φ	Φ
FENCE HYDRANT		Φ	Φ	Φ	Φ
FENCE FAUCET		Φ	1	Φ	Φ
CARETAKER WELL #1		OVERGROWN	OVERGROWN	16	Φ
CARETAKER WELL #2		-Φ	OVERGROWN		
ALL SAMPLES RAN AT 25 ML DILUTIONS.					

REMARKS

FENCE HYDRANT = 160 240 NON-COLIFORM
FENCE FAUCET = 120 140 " "
CARETAKER WELL #2 = 680 — " "

NOTE: OVERGROWN OR CONFLUENT GROWTH IMPOSSIBLE TO DIFFERENTIATE BETWEEN COLIFORM + NON-COLIFORM.

SIGNATURE H. J. Burns DATE 30 SEPT 80

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- [ ] _____

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MR SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMW	26 SEPTEMBER 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM [redacted]
HEAD	SPIGOT	Ø	F.A.C Ø
FENCE LINE	SPIGOT	1	F.A.C. Ø
SPIGOT IN YARD	SPIGOT	1	F.A.C. Ø
CARETAKER #2	SPIGOT	Ø	F.A.C Ø

REMARKS

HEAD = 26000 NON-COLIFORM COLONIES
FENCE LINE = 320 NON-COLIFORM COLONIES
SPIGOT IN YARD = 9000 NON-COLIFORM COLONIES

SIGNATURE H. J. Burke

DATE 27 SEPTEMBER 80

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- [ ] _____

Mr. SHARPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	OAK GROVE CORPSMAN	24 Sept 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
BULL 310	FAC 3.0 pH 8.2	OVERGROWN NON-COLIFORM	
BULL 443	FAC 3.0 pH 8.2	11 COLIFORM *	
FENCE LINE SPIGOT	Ø FAC 8.2 pH	410 NON-COLIFORM	
CARETAKER #2 SPIGOT	Ø FAC 8.2 pH	40 COLIFORM *	
HEAD	Ø FAC 8.2 pH	26600 NON-COLIFORM	

REMARKS

* PLUS NUMEROUS NON-COLIFORM COLONIES.

BULLS ARE 100 ml ALIQUOTS.

OTHER SAMPLES ARE 10, 1, AND 0.1 ml ALIQUOTS

SIGNATURE [signature] DATE 25 Sept 80

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Mr. SHARPE

QUALITY CONTROL LABORATORY REPORT

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMU	23 SEPTEMBER 1980

LOCATION	MARKED	COLIFORM TOTAL	~~FECAL~~
BULL 310 SPIGOT	3.0 FAC 8.2 pH TEMP 80	0	
BULL 245 SPIGOT	3.0 FAC 8.2 pH TEMP 80	0	
HYDRANT @ FENCE SPIGOT	∅FAC 8.2 pH TEMP 80	20	
FENCE LINE SPIGOT	∅FAC 8.2 pH TEMP 80	10	
HEAD SPIGOT	∅FAC 8.2 pH TEMP 80	0	270,000 NON-COLIFORM

REMARKS

DILUTIONS WERE MADE ON THE HYDRANT, FENCE LINE, AND HEAD SAMPLES. THEY WERE 50 mL, 10 mL, 1.0 mL, 0.1 mL.

SIGNATURE Elizabeth A. Bty

DATE 24 SEPTEMBER 1980

COPY TO

- [ ] INREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] _____

Sample Point			
OK	Head	Clear	TNTC - Non Coliform
on ground	Spigot at Campsite	Clear	No sample
OK	Mess hall	Clear	Clear
out door	Fence line	Clear	TNTC Non Coliform
out door	wash rack	Clear	TNTC Non Coliform
OK	Caretaker 1 (inside trailer)	clear	Clear
OK	Caretaker 2 (inside trailer)	Clear	Clear
	Spigot at Moos well	Clear	TNTC Non Coliform
out door	hydrant	150 Non Coliform	No sample

= Poor Points to sample accurately due to possible contamination

floor plan =

plastic sample
A circular
cut sub
plate
paper
washing machine

ENVIRONMENTAL HEALTH/SANITATION INSPECTION REPORT

5ND NRMC CLNC 6240/1 (11/76)

FROM: Commanding Officer, Naval Regional Medical Center, Camp Lejeune, N.C.

TO: C.O., H&S Battalion, 2nd FSSG, FMFLANT, Camp Lejeune, N.C.

REF: (a) Base Order P6240.4

1. In accordance with reference (a) an environmental health/sanitation inspection of Oak Grove (MOOSE) Potable Water Distribution System was conducted on 23 Sep 1980 (2100) by JOHN MCCLOSKEY, EHT. Findings and recommended corrective action are as follows.

AN * INDICATES THAT THE FINDING HAS BEEN PREVIOUSLY REPORTED.

FINDINGS	RECOMMENDED CORRECTIVE ACTION
Recent bacteriological analyses of samples taken from the newly installed drinking water system have, consistently, shown the presence of significant numbers and types of micro-organisms. Superchlorination of the system has been accomplished on three occasions but subsequently, the growth of organisms in samples has persisted. A survey of the system was conducted on this date. The following discrepancies, recommendations and comments are offered:	
a. Reportedly, the fire hydrant at the fence line leaks when the water is turned on to fill water trailers. Water has been noted to break ground and pool at the base of the hydrant. The Facility's tiein with the County system is at this point. Appropriate maintenance requests should be submitted.	
b. An in-line chlorinator should be installed near the water source on the Facility to provide a safeguard against contaminants which may enter the system in the future. Maintenance of a free available residual throughout the system is optimum.	
c. Although the leaking fire hydrant may account for some contaminants it is not, necessarily the only source. Layered, protected pockets of bacteria in those sections of water line which were not replaced is a possibility. There may be leaks in the old lines which have not been detected.. Consideration should be given to replacement of all water lines in the system.	
d. The MOOSE Head should be repaired/replaced. One problem which may contribute to contamination of the water lines is submerged and leaking ballcocks in commode tanks. These cross connections should be eliminated. Other problems in connection with the Head are as follows:	
1- There is standing water on the ground outside a door. Reportedly, this is drainage from the shower.	
2- The shower walls are molded. The walls and deck are in a state of disrepair.	
3- Deck areas around commodes are in a state of disrepair.	
4- Two urinals were clogged.	
5- The septic tank system was overflowing. Sewage was pooling on the ground. An effective and safe drainfield should be established. Ground contaminated by sewage should be covered with, at least, two inches of compacted earth.	
The OIC, MOOSE and the NCOIC of the Caretaker Facility have been notified, verbally, to chlorinate or boil water from the System as an interim safeguard.	

2. The overall sanitary condition was found to be: water should be disinfected prior to consumption

Copy to: OIC, MOOSE OAK GROVE
S-4 OFF, MCAS (H), NEW RIVER
Base Maint Off
Health Support Office (Bldg 59)

APPROVED:

B. Kalisch ENS, MSC USNR

B. KALISCH ENS,MSC,USNR

Chief, Occupational and Preventive Medicine Service

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S-4 OFF, MCAS (H), NEW RIVER
Base Maint Off
Health Support Office (Bldg 59)

APPROVED:

B. KALISCH LCDR MSC USNR

Chief, Occupational and Preventive Medicine Service

OPNAV 5216/144 (REV. 6-70)
S/N 0107-LF-778-8099

DEPARTMENT OF THE NAVY

Memorandum

DATE: 22 September 1980

FROM: Ms. Betz, Q. C. Lab

TO: Mr. Sharpe, Ecologist

SUBJ: Oak Grove

ENCL: (1) Table of Bacteria Test Results since 10 September 1980
(2) Map of Oak Grove

On 10 September 1980, Oak Grove was connected to the Jones County Water System, at the end of their line. We have been running Bac't samples on Oak Grove for PMU for several years. So when the new Water Source was connected PMU wanted to check the Bacterial Quality of the Water. Enclosure (1) is a table of the results.

There has been no residual chorine present, in the lines, during any sampling, except during the two afternoon samples, which were taken after superchlorination of the lines by our water plant.

EAB

22 September 1980

Mel Bell, C. E. Lab

Mr. Sharpe, Ecologist

Oak Grove

ENCL: (1) Table of Bacteria Test Results since 10 September 1980
(2) Map of Oak Grove

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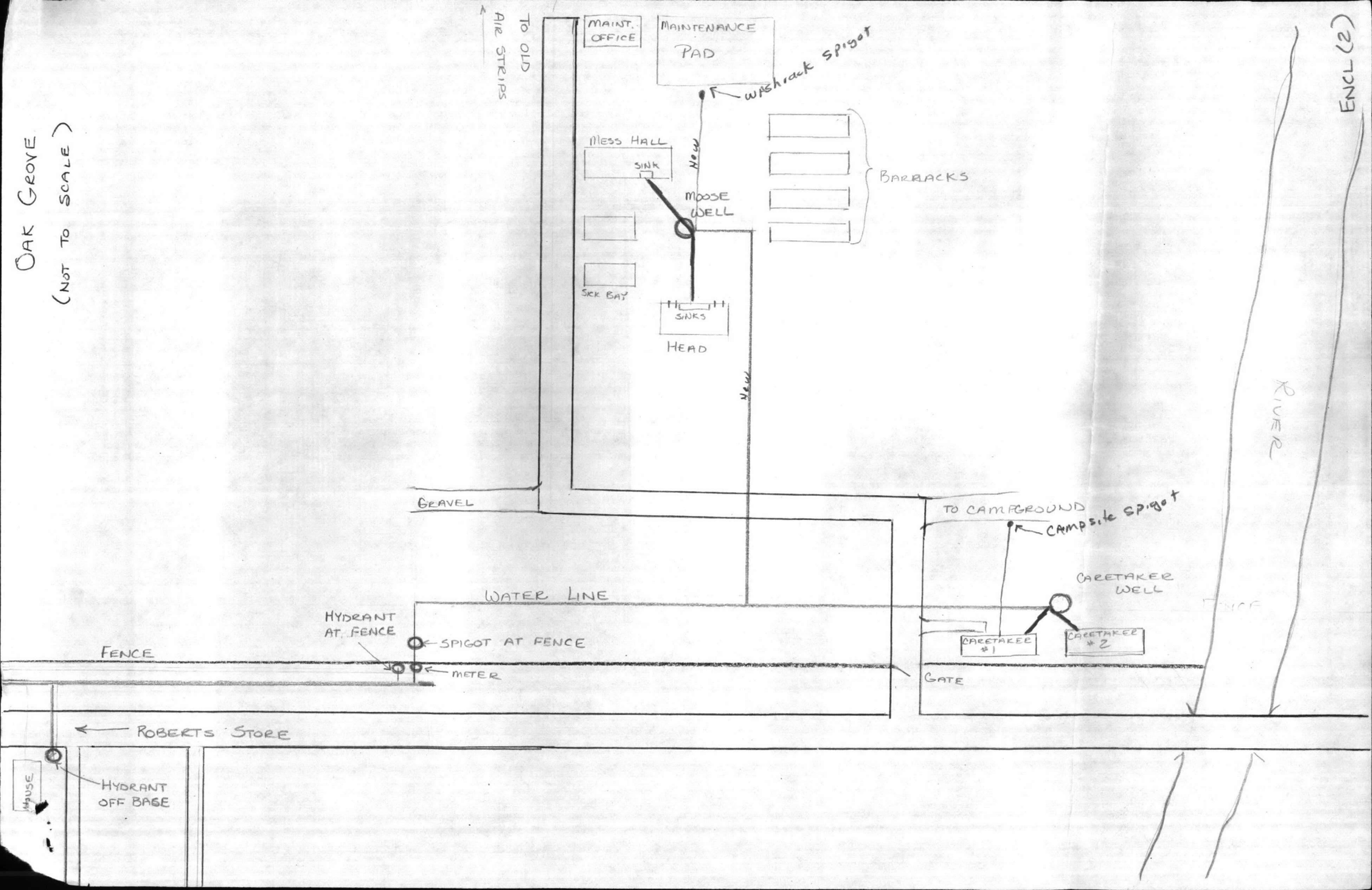
TABLE OF BACTERIA TEST RESULTS

SAMPLE POINT	DATE: 10 SEPT TOTAL	10 SEPT NON	MORNING 12 SEPT TOTAL	MORNING 12 SEPT NON	AFTERNOON 12 SEPT TOTAL	AFTERNOON 12 SEPT NON	15 SEPT TOTAL	15 SEPT NON	16 SEPT TOTAL	16 SEPT NON	17 SEPT TOTAL	17 SEPT NON	MORNING 18 SEPT TOTAL	MORNING 18 SEPT NON	AFTERNOON 18 SEPT TOTAL	AFTERNOON 18 SEPT NON	19 SEPT TOTAL	19 SEPT NON
CARETAKER #1								*					0					
CARETAKER #2			0		0			100		*		*	0		0			*
HEAD SINK	11	*		*	0			*		*		205,000		15300			1	30
MESS HALL SINK		*		*	0			*		*	30			17400		548		110
SPIGOT @ FENCE	2											500		170				46
HYDRANT @ FENCE															8	*		
HYDRANT OFF BASE																448		
HOUSE OFF BASE													0					
BROWNS STORE																	0	
DILUTIONS	100 ML		100 ML		100 ML		100 ML		50, 10, 1.0		10, 1.0, 0.1		10, 1.0, 0.1		50			

* OVERGROWN

ENCL (1)


OAK GROVE
(NOT TO SCALE)
TO OLD AIR STRIPS
MAINT. OFFICE
MAINTENANCE PAD
WASHRACK SPIGOT
MESS HALL
SINK
NEW
MOOSE WELL
BARRACKS
SICK BAY
SINKS
HEAD
NEW
GRAVEL
TO CAMPGROUND
CAMPSITE SPIGOT
CARETAKER WELL
WATER LINE
HYDRANT AT FENCE
SPIGOT AT FENCE
FENCE
METER
CARETAKER #1
CARETAKER #2
GATE
RIVER
FENCE
ROBERTS STORE
HOUSE
HYDRANT OFF BASE
ENCL (2)

OPNAV 5216/144 (REV. 6-70)
S/N 0107-LF-778-8099
DEPARTMENT OF THE NAVY

Memorandum

DATE: 6 November 1990

FROM: Ms. Betz, Q. C. Lab.

TO: Mr. Sharpe, Ecologist

SUBJ: Oak Grove

1. The 31October sample showed the possibility of the water getting worse again. However, the next sample, on 4 November, showed no non-coliform anywhere. There was one coliform in the fenceline sample. One is not considered a positive, it takes five colonies for the sample to be a positive sample. The one colony could have been do to the face that the spigot is outside and or that the spigot is located in a poor drainage area and it rained alot up there over the weekend.

2. PMU is still allowing the water to be used. However they are keeping a close eye on the situation. Mr. McCloskey went up to Oak Grove this mornigg to check on it. It is still just being sampled once a week. The next sample comes in on 12 November and the next report will be ready on 13 November.

Betz

9 November 1990

Mr. Peter. C. G. Kab.

Mr. Sharpe, Ecologist

Oak Grove

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OPNAV 5216/144 (REV. 6-70)
S/N 0107-LF-778-8099

DEPARTMENT OF THE NAVY

Memorandum

DATE: 21 October 1980

FROM: Ms. Betz, Q. C. Lab

TO: Mr. Sharpe, Ecologist

SUBJ: PMU's Stand on Oak Grove

1. Presently, According to Mr. McCloskey, PMU has not recommended anything or taken any action. Nor have they given official permission to drink the water. Mr. McCloskey is in the process of preparing his recommendation to the CO of PMU. However, he admits that they are probably drinking the water.

2. Mr. McCloskey has contacted the county to determine whether they have made some changes in their system that might help explain the results on Oak Grove. He is trying to find some satisfactory explanation of the non-coliform and coliform that appeared after 6 October(End of the Superchlorination over the weekend). Mr. McCloskey is hoping to find that Jones Connty has recently disinfected their aerator (as was suggested to the County by Fred Hill) and or has started maintaining a constant pressure which would reduce any effects caused by possilbe leaks in the lines. Also, he feels that the increased usage of water for vehicle maintenance, due to the installation of the more convenient spigot at the maintenance pad (the washrack spigot) at Oak Grove, could help to explain why the water is staying clear.

3. Mr. McCloskey feels that he will probably just recommend use of the water as is, since he admits PMU would be hard pressed to suggest anything else, if the samples keep staying clear. Also, as long as the samples stay clear, he will recommend to the Captain that sampling should be reduced to perhaps once a week, like we run the Water Treatment Plants.

4. I have Mr. McCloskey to let me know what he finally recommends and what action PMU will take. The Ensign was not available to question.

SINCE CONNECTED TO JONES COUNTY

OAK GROVE

	DATE	CARETAKER #1	CARETAKER #2	MESS HALL	HEAD	* FENCELINE	* YARD	* WASHRACK	FIRE * HYDRANT	ROBERTS STORE	* CAMPSITE	MISC.
	10 SEP	CONNECTED										
	10 SEP			+	11 COLI + NON	2 COLI						
	11 SEP	NO SAMPLE										
AM	12 SEP		Ø	+	+							
PM	12 SEP		Ø	Ø	Ø							☆
	13-14	WEEKEND - NO SAMPLES										
	15 SEP	+	100 NON	+	+							
	16 SEP		+	+	+							1.0 ML DILUTIONS
	17 SEP		+	30 COLI	+	500 NON						"
AM	18 SEP		Ø	17400 NON	15300 NON	170 NON				Ø		"
PM	18 SEP		Ø	548 NON					8 COLI + NON			☆
	19 SEP		+	110 NON	1 COLI 30 NON	46 NON				Ø		
	20-21	WEEKEND - NO SAMPLES										
	22 SEP		+	+	+	1 COLI 40 NON				Ø		DILUTIONS
	23 SEP				270,000 NON	10 COLI			20 COLI			"
	24 SEP		40 COLI		266600 NON	410 NON						"
	25 SEP	NO SAMPLE										
	26 SEP		Ø		26000 NON	1 COLI 320 NON	1 COLI 9000 NON					
	27-28	WEEKEND - NO SAMPLES										
	29 SEP	16 FECAL +	680 NON +	+	+	120 NON 140 NON, 1 COLI	+		160 NON 240 NON			MAH MCC
	30 SEP		600 NON 1200 NON	TNTC NON	TNTC NON TNTC NON	300 NON	TNTC NON TNTC NON	+ NON + NON	7 COLI 2600 NON 9 COLI 2600 NON			MAH MCC
	1 OCT	3300 NON	TNTC NON			TNTC NON	TNTC NON	TNTC NON	3600 NON			MAH MCC
	3-6 OCT	SUPERCHLORINATION										
PM	6 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø	150 NON		Ø	☆
	7 OCT	Ø	Ø	Ø	TNTC NON	TNTC NON	TNTC NON	TNTC NON				
	8 OCT	Ø	Ø	Ø	Ø	Ø	Ø	TNTC NON				
	9 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
	10 OCT	TNTC NON	Ø	Ø	Ø	Ø	2 COLI 4 NON	19 COLI 13 NON				
	11-13	WEEKEND - NO SAMPLES - HOLIDAY										
	14 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
	15 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
	16 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
	17 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
	18-19	WEEKEND - NO SAMPLE										
	20 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
	21 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
	22 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				

* OUTSIDE SPIGOT + OVERGROWN ☆ RIGHT AFTER CHLORINATION

SINCE CONNECTED TO JONES COUNTY

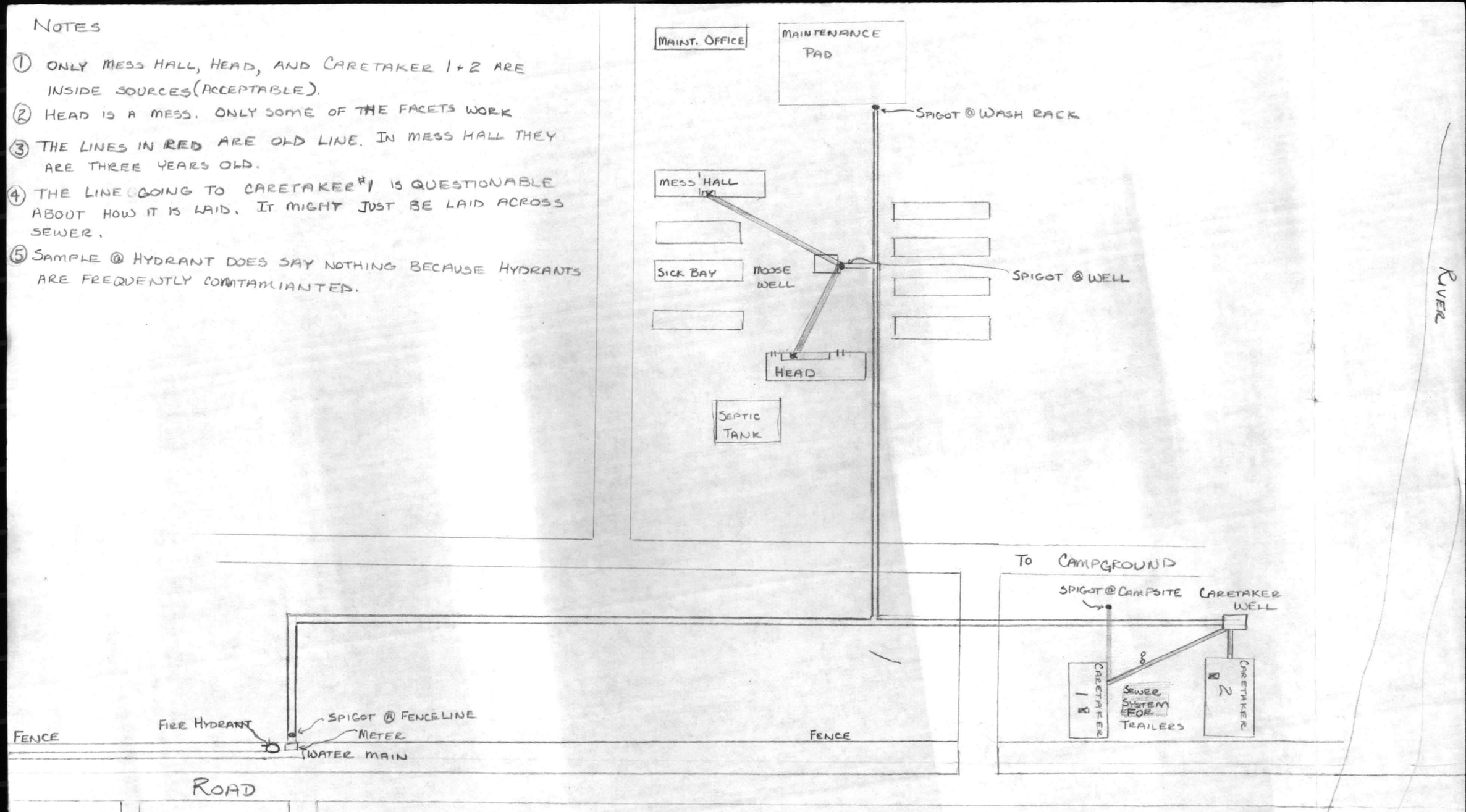
OAK GROVE

DATE	CARETAKER #1	CARETAKER #2	MESS HALL	HEAD	* FENCELINE	* YARD	* WASHRACK	FIRE * HYDRANT	ROBERT'S STORE	* CAMPSITE	MISC.
23 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
24 OCT	Ø	* 142 NON	Ø	Ø	Ø	Ø	Ø				
25-26	WEEKEND - NO SAMPLE										
27 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
28 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
29 OCT	Ø	Ø	Ø	Ø	Ø	Ø	Ø				
30 OCT	Ø	Ø	Ø	Ø	102 NON	Ø	Ø				RAINED
31 OCT	15 NON	Ø	2 NON	Ø	7 NON	19 NON	Ø				
1-2	WEEKEND - NO SAMPLE										
	NOVEMBER STARTS ONCE/WEEK SAMPLING										
4 NOV	Ø	Ø	Ø	Ø	1 COLI	Ø	Ø				
12 NOV											

* OUTSIDE SPIGOT + OVERGROWN ☆ RIGHT AFTER CHLORINATION

NOTES

1. ONLY MESS HALL, HEAD, AND CARETAKER 1 + 2 ARE INSIDE SOURCES (ACCEPTABLE).
2. HEAD IS A MESS. ONLY SOME OF THE FACETS WORK
3. THE LINES IN RED ARE OLD LINE. IN MESS HALL THEY ARE THREE YEARS OLD.
4. THE LINE GOING TO CARETAKER #1 IS QUESTIONABLE ABOUT HOW IT IS LAID. IT MIGHT JUST BE LAID ACROSS SEWER.
5. SAMPLE @ HYDRANT DOES SAY NOTHING BECAUSE HYDRANTS ARE FREQUENTLY CONTAMIANTED.



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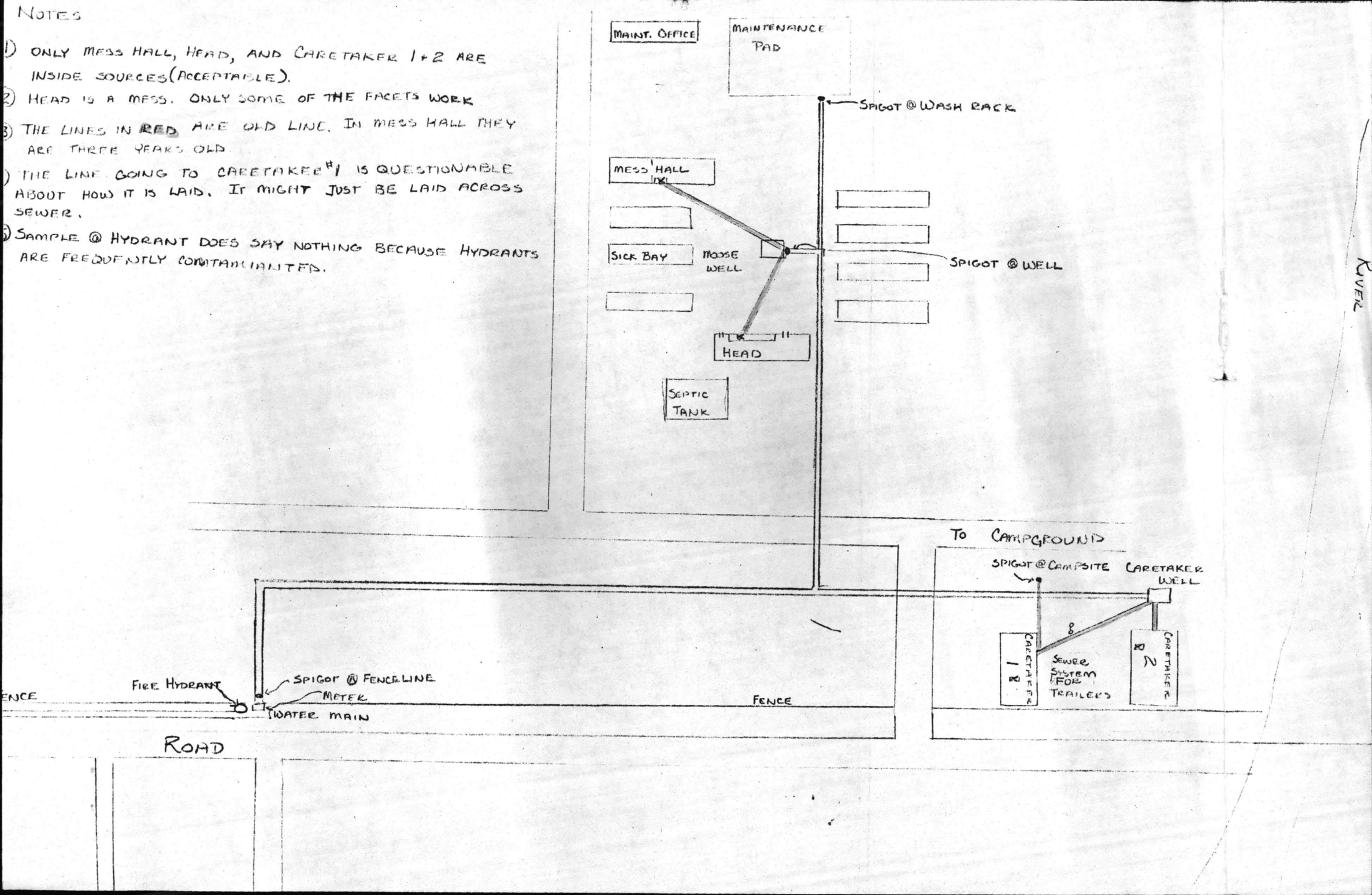

JONES Co. WATER
M

STATE OF NORTH CAROLINA

JAMES B. HUNT, JR.
GOVERNOR

SARAH T. MORROW, M.D., M.P.H.
SECRETARY

DEPARTMENT OF HUMAN RESOURCES

Division of Health Services

HUGH H. TILSON, M.D.
DIRECTOR

EASTERN REGIONAL OFFICE
404 ST. ANDREWS STREET
GREENVILLE, N.C. 27834
Telephone 756-1343

October 7, 1980

Horace Phillips, Chairman
Jones County Board of Commissioners
Jones County Courthouse
Trenton, NC 28585

Dear Mr. Phillips:

On September 24, 1980, we visited the Jones County water system in an effort to verify the bacterial quality of water being provided. During this visit, several samples were collected by Mr. Ray L. Church of the Division of Health Services and myself for analysis by the N.C. Division of Health Services Laboratory. The results of these, copies of which are enclosed, indicate that, although the water does meet the bacteriological quality standards prescribed by the Safe Drinking Water Act, the potential for contamination within the distribution system does exist. Additional samples have been collected in an effort to isolate the source of the problem.

Our preliminary suggestion is to disinfect each well, along with the aerator, holding tank, and filter, with a strong chlorine solution for a period of not less than twenty-four hours. This should reduce or eliminate the density of the bacteria in the water delivered to the distribution system. Additional steps may be necessary and will be determined based on the results of the bacteriological samples. Any corrective action, including system disinfection, will be discussed and decided with the cooperation of the County.

As part of our investigation, we visited the water treatment plant near Trenton. Please be advised that the area within a 100-foot radius of any public water supply well must be severely restricted in order to prevent any contamination of the well. Vehicle storage and maintenance, including washing, is prohibited within this area.

The new well and storage facility under construction will relieve some of the load on the existing plant, thereby extending its service life.

Since start-up, the Trenton plant has changed its chlorination system from hypochlorite to liquified gas. While the intent and purpose is normally beneficial, certain safety precautions must be observed and complied with.

These were discussed with Mr. Lee Hawkins during this visit and are summarized as follows:

1. Scales should be provided to determine the loss of weight, or daily use, from the chlorine cylinder.

2. A respiratory device, preferably with full face shield and self-contained air tanks, must be available near the chlorine storage area.

3. All chlorine gas storage, piping and feed equipment should be enclosed in a separate room with floor level exhaust fan. Solution lines only should be in the main plant area.

4. The chlorine and solution lines should be designed for use with high pressure or chemical feed systems.

If you have any questions regarding these comments and suggestions, please do not hesitate to contact our office.

Sincerely,

J. Fred Hill, III
Water Plant Consultant
Water Supply Branch
Environmental Health Section

/bgb

cc: C. E. Rundgren
M. P. Bell
Lee Hawkins

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones Co Water
County: Jones
Location of Sampling Point (Address where sample was collected): Roberts Store (US17)
Collected By: Hill DATE: 9/24/80 TIME: 1205 AM PM
TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☑
Report To: Name: Fred Hill TELEPHONE NUMBER: 756 1343
Address: 404 St Andrews St Ero
City: Greenville NC Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.
ALL INFORMATION REQUESTED MUST BE GIVEN.
OWNER

529097
LAB. NO.
DATE/TIME RECEIVED
SEP 25 8 18 AM '80

REPORTED
SEP 29 1980

WATER SYSTEM I.D. NUMBER
04-52-020

Standard Plate Count per 1 ml
110,000.
Please CK total plate count & MF tech

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
✓		

TYPE OF SUPPLY: COMMUNITY ☑ NON COMMUNITY ☐
Confluent growth by Membrane Filter.

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones County Water
County: Jones

Location of Sampling Point (Address where sample was collected): @ WTP outside

Collected By: JFH DATE: 9/24/80 TIME: 1100 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☑

Report To: Name: J Fred Hill III TELEPHONE NUMBER: 756 1343

Address: 404 St Andrews St EPO

City: Greenville NC Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

529698

LAB. NO.
DATE/TIME RECEIVED
SEP 25 8 13 AM '80

REPORTED
SEP 29 1980

WATER SYSTEM I.D. NUMBER
04-52-020

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
☑	☐	

TYPE OF SUPPLY: COMMUNITY ☑ NON COMMUNITY ☐

Confluent growth by Membrane Filter. PLEASE CK: TOTAL Plate Count & MF TECH

Standard Plate Count per 1 ml 40.

Cl2 1.3 mg/l

DO NOT WRITE ABOVE HEAVY LINE

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones County Water
County: Jones

Location of Sampling Point (Address where sample was collected): Dr. Bender Residence

Collected By: H DATE: 9/24/80 TIME: 1215 AM [PM]

TYPE OF SAMPLE: REGULAR MONTHLY [ ] CHECK [ ] SPECIAL [✓]

Report To: Name: Fred Hill TELEPHONE NUMBER:

Address: 404 St Andrews St ERD

City: Greenville NC Zip: 27834

DHS Form 1295
Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

529095

LAB. NO.
DATE/TIME
RECEIVED

SEP 25 8 18 AM '80

REPORTED
SEP 29 1980

WATER SYSTEM I.D. NUMBER
04-52-020

Please ck total plate counts
Standard Plate Count
E MF Tech 16,000.

DO NOT WRITE ABOVE HEAVY LINE

Mildred A. Kerbaugh, Director

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
✓		

TYPE OF SUPPLY: COMMUNITY [✓] NON COMMUNITY [ ]

Confluent growth by membrane filter analysis.

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones Co Water

County: Jones

Location of Sampling Point (Address where sample was collected): Oak Grove Marine Meter

Collected By: H DATE: 9/24/80 TIME: 1145 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☑

Report To: Name: Fred Hill TELEPHONE NUMBER: 756-7343

Address: 404 S Andrews St ERD

City: Greenville NC Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

529096

LAB. NO.
DATE/TIME
RECEIVED

SEP 25 8 16 AM '80

REPORTED
SEP 29 1980

WATER SYSTEM I.D. NUMBER
04-52-020

pH 9.5
Standard Plate Count per 1 ml 170,000.
Cl2 none

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found ☑ Present ☐ MPN

TYPE OF SUPPLY: COMMUNITY ☑ NON COMMUNITY ☐

Confluent growth by Membrane filter.
Please ck Total Plate Count & M-F Tech.

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones Co Water
County: Jones

Location of Sampling Point (Address where sample was collected): Je. High School

Collected By: Lee Hawkins DATE: 10-1-80 TIME: 3:40 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒

Report To: Name: Fred Hill TELEPHONE NUMBER:

Address: 404 St Andrews (End) St.

City: Greenville NC Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

5 9 0 7 1

LAB. NO.
DATE/TIME
RECEIVED

OCT 2 7 [illegible]

REPORTED

OCT 6 1980

WATER SYSTEM I.D. NUMBER: 04-52-020

Please ck

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
✓	✓	

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

COLIFORMS PER 100 ML
(MEMBRANE FILTER METHOD)

MF & TPC

SPC – 11 colonies per 1.0 ml taken from non-ideal plate

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: JONES Co. WATER

County: JONES

Location of Sampling Point (Address where sample was collected): Cut 1.10 9 SE (Tree Nro.)

Collected By: Lee Hawkins DATE: 10-1-80 TIME: 4:00 AM [X] PM

TYPE OF SAMPLE: REGULAR MONTHLY [ ] CHECK [ ] SPECIAL [X]

Report To: Name: FRED HILL TELEPHONE NUMBER

Address: 404 ST ANDREWS ST (ERD)

City: GREENVILLE Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

529972

LAB. NO.
DATE/TIME
RECEIVED

OCT 2 7 53 AM '80

REPORTED
OCT 6 1980

WATER SYSTEM I.D. NUMBER
04-52-020

PLEASE CK

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
[X]	[ ]	

TYPE OF SUPPLY: COMMUNITY [X] NON COMMUNITY [ ]

0 COLIFORMS PER 100 ML (MEMBRANE FILTER METHOD)

SPC - 27 colonies per 1.0 ml taken from non-ideal plate

MF

TPC

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones Co Water
County: Jones
Location of Sampling Point (Address where sample was collected): Olivices Crossroads Piney Grove Church
Collected By: Lee Hawkins DATE: 10-1-80 TIME: 3:50 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒

Report To: Name: Fred Hill TELEPHONE NUMBER: EPD
Address: 404 St Andrews St
City: Greenville N.C. Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.
ALL INFORMATION REQUESTED MUST BE GIVEN.
OWNER

529974
LAB. NO.
DATE/TIME RECEIVED
OCT 2 7 54 AM '80

REPORTED
OCT 6 1980

WATER SYSTEM I.D. NUMBER
04-52-020

PLEASE CK
Pseudomonas - 5 tubes
DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
☒	☐	

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

0 COLIFORMS PER 100 ml
(MEMBRANE FILTER METHOD)

SPC - 152,000 colonies per 1.0 ml
M F
&
TPC

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones Co Water

County: Jones

Location of Sampling Point (Address where sample was collected): Hargetts Store

Collected By: Lee Hawkins DATE: 10-1-80 TIME: 2:45 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒

Report To: Name: J Fred Hill TELEPHONE NUMBER

Address: 404 St Andrews St Ext

City: Greenville NC Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

529973

LAB. NO.
DATE/TIME
RECEIVED

OCT 2 7 53 AM '80

REPORTED

OCT 6 1980

WATER SYSTEM I.D. NUMBER

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found ☑ Present ☐ MPN

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

0 COLIFORMS PER 100 ml

(MEMBRANE FILTER METHOD)

Please ck MF & TPC

SPC - 28 colonies per 1.0 ml non ideal plate

DO NOT WRITE ABOVE HEAVY LINE

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: JONES Co WATER

County: JONES

Location of Sampling Point (Address where sample was collected): SASSERS Mill RAY DARRELL BARNES

Collected By: Lee Hawkins DATE: 10-1-80 TIME: 3:15 AM/PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒

Report To: Name: FRED HILL TELEPHONE NUMBER:

Address: 404 St Andrews St Ext.

City: Greenville Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

529975

LAB. NO.
DATE/TIME
RECEIVED

OCT 27 54 AM '80

REPORTED OCT 6 1980

WATER SYSTEM I.D. NUMBER 04-52-020

Please ck Pseudomonas present in 2 tubes

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
☐	☐	

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

0 COLIFORMS PER 100 ml (MEMBRANE FILTER METHOD)

SPC - 570 colonies per 1.0 ml

MF & TPC

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: JONES Co WATER

County: JONES

Location of Sampling Point (Address where sample was collected): WISE FORK FIRE DEPT

Collected By: Lee Hawkins DATE: 10-1-80 TIME: 3:00 AM/PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒

Report To: Name: Fred Hill TELEPHONE NUMBER: ERP

Address: 404 ST Andrews ST

City: Greenville N.C. Zip: 27834

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

DHS Form 1295 Rev. 7/79 Lab.

529976

LAB. NO.
DATE/TIME
RECEIVED

OCT 2 7 54 AM '80

REPORTED
OCT 6 1980

WATER SYSTEM I.D. NUMBER

PLEASE CK

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found ☑ Present ☐ MPN

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

0 COLIFORMS PER 100 ML SPC –
(MEMBRANE FILTER METHOD)

MF & TPC 360 colonies per 1.0 ml

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones Co Water
County: Jones
Location of Sampling Point (Address where sample was collected): Filter effluent
Collected By: 9/30/80 DATE: Hill TIME: 1120 AM PM
TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒
Report To: Name: J Fred Hill TELEPHONE NUMBER
Address: 404 St Andrews St Ero
City: Greenville NC Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.
ALL INFORMATION REQUESTED MUST BE GIVEN.
OWNER

529831
LAB. NO.
DATE/TIME RECEIVED
Oct. 1 8 00 AM '80

REPORTED OCT 6 1980

WATER SYSTEM I.D. NUMBER
04-52-020

Please check TPC & MF

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	(5)
BGB	1	2	3	(4)	5
		4	0		

COLIFORM BACTERIA

Not Found ☐ Present ☑ MPN 16

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

membrane filter
TNTC @ 0.1 ml
SPC = 9300 colonies per 1.0 ml

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System Jones Co Water

County Jones

Location of Sampling Point (Address where sample was collected) Before filter Plant

Collected By Lee Hawkins DATE 10-1-80 TIME 2:30 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☐

Report To: Name Fred Hill TELEPHONE NUMBER 830

Address 414 St Andrews St

City Greenville NC Zip 27834

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

DHS Form 1295 Rev. 7/79 Lab.

529977

LAB. NO.
DATE/TIME
RECEIVED

OCT 27 54 AM '80

REPORTED

OCT 6 1980

WATER SYSTEM I.D. NUMBER

04-52-020

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found ☑ Present ☐ MPN

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

0 COLIFORMS PER 100 ML (MEMBRANE FILTER METHOD)

SPC – 430 Colonies per 1 ml

MF & TPC

PLEASE C/K

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System Jones Co Water

County Jones

Location of Sampling Point (Address where sample was collected) Well No 1, at Plant

Collected By H DATE 9/30/80 TIME 1125 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒

Report To: Name J Fred Hill TELEPHONE NUMBER

Address 404 St Andrews St ERD

City Greenville NC Zip 27834

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

DHS Form 1295 Rev. 7/79 Lab.

529633

LAB. NO.
DATE/TIME RECEIVED
Oct 1
8 09 AM '80

REPORTED OCT 6 1980

WATER SYSTEM I.D. NUMBER 04-52-020

Please ck TPC & MF

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found ☒ Present ☐ MPN

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

0 COLIFORMS PER 100 ML (MEMBRANE FILTER METHOD)

SPC - 7700 colonies per 1 ml

Mildred A. Kerbaugh, Director

State Laboratory of Public Health
Division of Health Services, N.C. Dept. of Human Resources
P.O. Box 28047 – 306 N. Wilmington St., Raleigh, N.C. 27611

DRINKING WATER DESCRIPTION BLANK – FILLED IN BY SENDER
COLIFORM ANALYSIS – – PUBLIC WATER SYSTEM

Name of System: Jones Co Water

County: Jones

Location of Sampling Point (Address where sample was collected): Well No 2

Collected By: Hill DATE: 9/30/80 TIME: 1140 AM PM

TYPE OF SAMPLE: REGULAR MONTHLY ☐ CHECK ☐ SPECIAL ☒

Report To: Name: J Fred Hill TELEPHONE NUMBER: 756-1348

Address: 404 St Andrews St Ext

City: Greenville NC Zip: 27834

DHS Form 1295 Rev. 7/79 Lab.

ALL INFORMATION REQUESTED MUST BE GIVEN.

OWNER

529832

LAB. NO.
DATE/TIME RECEIVED
Oct. 1 8 00 AM '80

REPORTED
OCT 6 1980

WATER SYSTEM I.D. NUMBER
04-52-020

Please ck

DO NOT WRITE ABOVE HEAVY LINE

BACTERIOLOGIC ANALYSIS

Media	Positive Tubes				
LTB	1	2	3	4	5
BGB	1	2	3	4	5

COLIFORM BACTERIA

Not Found	Present	MPN
✓		

TYPE OF SUPPLY: COMMUNITY ☒ NON COMMUNITY ☐

0 COLIFORMS PER 100 ML.

MF Tech (MEMBRANE FILTER METHOD)

Total Plate Count SPC = 420 colonies / 1.0 ml

Mildred A. Kerbaugh, Director

Fred,

Here is some extra ~~info~~ data on the membrane results. Nothing showed coliform, but there were at least 5 types of colonies. We haven't found out what any of them are yet, but we'll try to call you Tues or Wed after noon if we find out. Maybe ~~the~~ this will help show which type of contamination shows up where + if there is more than 1 source.

Numbers correspond to lab numbers. These are for ~~last~~ first 7 only. Thank you for your business.

Rebecca

Colony type ~~Colony type~~	lab # 71	72	73	74	75	76	77
purple raised					1 plate +	1 plate +	+++
dk red	+			+	+	+	+
bright red	+			+		+	+
mucoid red	+						
spread out purple				+	+	+	

NATURAL RESOURCES AND ENVIRONMENTAL AFFAIRS DIVISION
BASE MAINTENANCE DEPARTMENT
MARINE CORPS BASE
CAMP LEJEUNE, NORTH CAROLINA 28542

23 Sept 80

From: Director, NREA Division
To: Danny
Subj:

1. What is the situation at Oak Grove? Mr Rouse M+R indicated Bact. count is back up.

Rehain

Fire Hydrant Leaks

Chlorine levels –

OPNAV 5216/144 (REV. 6-70)
S/N 0107-LF-778-8099

DEPARTMENT OF THE NAVY

Memorandum

DATE: 17 September 1980

FROM: Ms. Betz, Q. C. Lab

TO: Mr. Sharpe, Ecologist

SUBJ: Oak Grove's New Water System

1. Oak Grove hooked up their new water system last week. On 10 September PMU collected 2 samples from their new system and we ran them. One sample was at the spigot installed at the fence right were the system comes aboard the Base. The other was at the sink in the Mess Hall. The results were as follows:

Sample	Total Coliform/100ml	F.A.C.	Temp.	pH
Spigot	2	0	78	8.2
Sink	Overgrown	0	78	8.2

The morning of 12 September three samples were taken and run. That afternoon they superchlorinated the lines again and the same three samples were run. The results are as follows:

Sample	Morning Coliform	Afternoon Coliform
Caretaker Well #2	Overgrown	0
Head(Sink)	Overgrown	0
Mess Hall	Overgrown	0

On Monday, 15 September, 4 samples were taken. They were as follows:

Sample	Coliform/100ml
Head(Sink)	Overgrown
Caretaker Well #1	Overgrown
Mess Hall	Overgrown
Caretaker Well #2	100 non-coliform

On Tuesday, 16 September, 3 samples were taken and three dilutions were run in an effort to determine just how many coliform were in the samples, if any. The results were as follows:

Caretaker Well #2	All three dilutions(25ml, 10ml,1.0ml) were overgrown
Mess Hall	" " " " " " " "
Head(Spigot)	" " " " " " " "

On Today's sample, which includes one taken at the spigot at the fence, we are making dilutions down to 0.1ml and also running Fecal Coliform samples.

2. PMU has advised personnel at Oak Grove not to drink the water from the system.

3. This is being bought to the attention of the AC/S of Facilities. A Major(I was unable to remember his name) from the ~~AC/S~~ 2d FSSG G-4 office called this mornign inquiring about Qak Grove. Miller

Elizabeth A. Betz

65 TOTAL

58 work there - Live else where.

Gunny/wife 3 kids } MCAS

Sgt/wife (Kids ??)

(35)

17 September 1980

Ms. Beta, C. C. Lab

Mr. Sharpe, Ecologist

Oak Grove's New Water System

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W.O.

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MR SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMW	19 SEP 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM [redacted]
FENCE LINE	SPIGOT	Ø	46 NON-COLI-FORM
HEAD	SPIGOT	1	30 NON-COLI-FORM
MESS HALL	SPIGOT	Ø	110 NON-COLIFORM
ROBERTS STORE #2	SPIGOT	Ø	
CARETAKER WELL	SPIGOT	OVERGROWN	

REMARKS

SIGNATURE H. J. Burns

DATE 20 SEPT 80

COPY TO

- ☐ INREAD
- ☐ UTILITIES DIRECTOR
- ☐ WATER TREATMENT PLANT (GENERAL FOREMAN)
- ☐ BASE PREVENTIVE MEDICINE
- ☐ MCAS PREVENTIVE MEDICINE
- ☐ _____

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

Mr. SHARPE

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE SPECIAL	QUALITY CONTROL LAB	9-18-80 (AFTERNOON)

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
HYDRANT AT FENCE		8 (A)	
HYDRANT OFF BASE		448 NON-COLIFORM	
CARETAKER TRAILER #2		ϕ	
MESS HALL SINK		548 NON-COLIFORM	

REMARKS

(A) OVERGROWN WITH NON-COLIFORM

SAMPLES COLLECTED AFTER SUPERCHLORINATION OF OAK GROVE LINES.

SIGNATURE [illegible] DATE 9-19-80

COPY TO

- [x] INREAD
- [ ] UTILITIES DIRECTOR
- [x] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [x] OAK GROVE

MR SHARPC

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMW	22 SEPT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
ROBERTS STORE		Φ	—
HEAD	SPIGOT	OVERGROWN	
FENCE LINE	SPIGOT	1	40 NON-COLIFORM
MESS HALL #2	SPIGOT	OVERGROWN	
CARETAKER WELL	SPIGOT	OVERGROWN	

REMARKS

SIGNATURE	DATE
M. J. Burns	23 SEPT 80

COPY TO

MR SHARPE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
OAK GROVE	PMU	22 SEPT 80

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
ROBERTS STORE		Φ	—
HEAD	SPIGOT	OVERGROWN	
FENCE LINE	SPIGOT	1	40 NON-COLIFORM
MESS HALL #2	SPIGOT	OVERGROWN	
CARETAKER WELL	SPIGOT	OVERGROWN	

REMARKS

SIGNATURE	DATE
W. J. Burns	23 SEPT 80

COPY TO

- [ ] INREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] _____