



Date of Report: 05/17/2022

Team Skookum

Skookum Water Company

P O Box 361

Tehachapi, CA 93581

Client Project: 2746 Donna Sue

BCL Project: Drinking Water - Kern County

BCL Work Order: 2211178

Invoice ID: B449039

Enclosed are the results of analyses for samples received by the laboratory on 5/12/2022. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

A handwritten signature in black ink, appearing to read "Ragen Schallock", written over a horizontal line.

Contact Person: Ragen Schallock
Client Service Rep

A handwritten signature in black ink, written over a horizontal line.

Authorized Signature

Certifications: CA ELAP #1186; NV #CA00014; OR ELAP #4032-001; AK UST101

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Executive Summary - MCL Exceedances

Constituent	Result	PQL	MCL	Units	Method	Lab Quals
No exceedances found						



Analytical Chain of Custody Form

Page 1 of 2

Comments: Report to Kern County

Sample #	Description	Date Sampled		Time Sampled	Nitrate (as N)	Turnaround for work days*	Sample Matrix		System PWS Code	Notes / C12 Residual
		Date	Time				Soil	Other		
2	Well 01	5/11/22	16:15		X		<input checked="" type="checkbox"/> Sludge <input type="checkbox"/> Drinking Water <input type="checkbox"/> Ground Water <input type="checkbox"/> Waste Water	2746-001		
<div style="border: 1px solid black; padding: 5px; display: inline-block;"> SHORT HOLDING TIME Cr⁶⁺ NO₂ OP SS DC Cl₂ BOD MBAS COT </div>										
CHK BY: <u> </u> DISTRIBUTION: <u> </u> SUB OUT: <u> </u>										

Analysis Requested:

Global ID (Needed for EDF)	
1. Acquired By	<u> </u>
2. Acquired Date	<u>5/12/22 17:55</u>
3. Acquired Time	<u> </u>
1. Received By	<u> </u>
2. Received Date	<u>5/12/22 08:15</u>
3. Received Time	<u> </u>

Billing: Same as above EDF Required? Geotracker Yes No

Client: Send Copy to State of CA? (EDT) Yes No

Address: City: State: Zip:

Attn: PO #:

BC Laboratories, Inc. - 4100 Atlas Ct. - Bakersfield, CA 93308 - 661.327.4911 - Fax: 661.327.1918 - www.bdabls.com

PLEASE MAKE A COPY FOR OUR FILES

BC LABORATORIES INC.		COOLER RECEIPT FORM		Page <u>1</u> Of <u>1</u>						
Submission #: <u>22-11178</u>										
SHIPPING INFORMATION Fed Ex <input type="checkbox"/> UPS <input type="checkbox"/> GSO / GLS <input type="checkbox"/> Hand Delivery <input checked="" type="checkbox"/> BC Lab Field Service <input type="checkbox"/> Other <input type="checkbox"/> (Specify) _____			SHIPPING CONTAINER Ice Chest <input checked="" type="checkbox"/> None <input type="checkbox"/> Box <input type="checkbox"/> Other <input type="checkbox"/> (Specify) _____		FREE LIQUID YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> W / S					
Refrigerant: Ice <input checked="" type="checkbox"/> Blue Ice <input type="checkbox"/> None <input type="checkbox"/> Other <input type="checkbox"/> Comments: _____										
Custody Seals Ice Chest <input type="checkbox"/> Containers <input type="checkbox"/> None <input checked="" type="checkbox"/> Comments: _____ <small>Intact? Yes <input type="checkbox"/> No <input type="checkbox"/> Intact? Yes <input type="checkbox"/> No <input type="checkbox"/></small>										
All samples received? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> All samples containers intact? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Description(s) match COC? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>										
COC Received <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		Emissivity: <u>0.97</u> Container: <u>PE</u> Thermometer ID: <u>337</u> Temperature: (A) <u>2.0</u> °C / (C) <u>1.9</u> °C		Date/Time <u>5-12-22</u> Analyst Init <u>SMH 8:15</u>						
SAMPLE CONTAINERS	SAMPLE NUMBERS									
	1	2	3	4	5	6	7	8	9	10
QT PE UNPRES										
4oz / 8oz / (16oz) PE UNPRES	A									
2oz Cr ⁶										
QT INORGANIC CHEMICAL METALS										
INORGANIC CHEMICAL METALS 4oz / 8oz / 16oz										
PT CYANIDE										
PT NITROGEN FORMS										
PT TOTAL SULFIDE										
2oz. NITRATE / NITRITE										
PT TOTAL ORGANIC CARBON										
PT CHEMICAL OXYGEN DEMAND										
PIA PHENOLICS										
40ml VOA VIAL TRAVEL BLANK										
40ml VOA VIAL										
QT EPA 1664B										
PT ODOR										
RADIOLOGICAL										
BACTERIOLOGICAL										
40 ml VOA VIAL- 504										
QT EPA 508/608.1/8081A										
QT EPA 515.1/8151A										
QT EPA 525.2										
QT EPA 525.2 TRAVEL BLANK										
40ml EPA 547										
40ml EPA 531.1										
8oz EPA 548.1										
QT EPA 549.2										
QT EPA 8015M										
QT EPA 8276C										
8oz / 16oz / 32oz AMBER										
8oz / 16oz / 32oz JAR										
SOIL SLEEVE										
PCB VIAL										
PLASTIC BAG										
TEDLAR BAG										
FERROUS IRON										
ENCORE										
SMART KIT										
SUMMA CANISTER										

Comments: _____
 Sample Numbering Completed By: CAB Date/Time: 5/12/22 0830 Rev 22 04/13/21
 A = Actual / C = Corrected

[S:\WP\Des\Word\PerfectLAB_DOCS\FOR\WIS\SAVRE\rev 21]



Skookum Water Company
P O Box 361
Tehachapi, CA 93581

Reported: 05/17/2022 12:20
Project: Drinking Water - Kern County
Project Number: 2746 Donna Sue
Project Manager: Team Skookum

Laboratory / Client Sample Cross Reference

Laboratory	Client Sample Information		
2211178-01	COC Number:	---	Receive Date: 05/12/2022 08:15
	Project Number:	---	Sampling Date: 05/11/2022 16:15
	Sampling Location:	---	Sample Depth: ---
	Sampling Point:	Well 01	Lab Matrix: Water
	Sampled By:	Langin	Sample Type: Water

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 P O Box 361
 Tehachapi, CA 93581

Reported: 05/17/2022 12:20
Project: Drinking Water - Kern County
Project Number: 2746 Donna Sue
Project Manager: Team Skookum

BCL Sample ID: 2211178-01 **Client Sample Name:** Well 01, 5/11/2022 4:15:00PM, Langin

Constituent	Method	Result	Units	Dilution	PQL	DW-MCL	Prep Date	Run Date/Time	Lab Quals
Inorganics									
Nitrate as N	EPA-300.0	1.6	mg/L	1	0.10	10	05/12/22	05/12/22 16:35	

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Notes And Definitions

MDL Method Detection Limit
ND Analyte Not Detected
PQL Practical Quantitation Limit
DW-MCL = MCLs for Title 22 Drinking Water