



*GTS Lab
1915 N. Shiloh Dr.
Fayetteville, AR 72704
TEL: (479) 521-1256 FAX: (479) 521-6232
Website: www.gtsconsulting.net*

September 04, 2019

Rick Sayre
City of Bethel Heights
530 Sunrise Dr.
Bethel Heights, AR 72764
TEL: (479) 601-5932
FAX:

RE: Drip Field samples

Order No.: 1908133

Dear Rick Sayre:

GTS Lab received 5 sample(s) on 8/30/2019 for the analyses presented in the following report.

There were no problems with the analytical events associated with this report unless noted in the Case Narrative. Analytical results designated with a "*" or "X" qualifier exceed permit limits provided to the lab for the indicated analytes.

Quality control data is within laboratory defined or method specified acceptance limits except if noted.

If you have any questions regarding these tests results, please feel free to call.

Sincerely,

A handwritten signature in black ink that reads "Richard Brown". The signature is written in a cursive, flowing style.

Richard Brown
Analytical Laboratory Director
1915 N. Shiloh Dr.
Fayetteville, AR 72704



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Analytical Report

(Continuous)

WO#: **1908133**

Date Reported: **9/4/2019**

CLIENT: City of Bethel Heights **Collection Date:** 8/30/2019 9:48:00 AM
Project: Drip Field samples
Lab ID: 1908133-001 **Matrix:** AQUEOUS
Client Sample ID Phase 1

Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	22,860	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18
Fecal Coliform	141,600	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18

CLIENT: City of Bethel Heights **Collection Date:** 8/30/2019 9:57:00 AM
Project: Drip Field samples
Lab ID: 1908133-002 **Matrix:** AQUEOUS
Client Sample ID Phase 2

Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	7,540	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18
Fecal Coliform	12,740	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18

Qualifiers:

* Value exceeds Permit Level for analyte	B Analyte detected in the associated Method Blank
DF Dilution Factor	H Holding times for preparation or analysis exceeded
J Analyte detected below quantitation limits	ND Not Detected at the Reporting Limit
RL Reporting Detection Limit	S Spike Recovery outside accepted recovery limits

Original



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Analytical Report

(Continuous)

WO#: **1908133**

Date Reported: **9/4/2019**

CLIENT: City of Bethel Heights **Collection Date:** 8/30/2019 10:00:00 AM
Project: Drip Field samples
Lab ID: 1908133-003 **Matrix:** AQUEOUS
Client Sample ID Phase 3

Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	6,970	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18
Fecal Coliform	2,880	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18

CLIENT: City of Bethel Heights **Collection Date:** 8/30/2019 10:20:00 AM
Project: Drip Field samples
Lab ID: 1908133-004 **Matrix:** AQUEOUS
Client Sample ID Phase 4A

Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	410	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18
Fecal Coliform	5,560	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18

Qualifiers:

* Value exceeds Permit Level for analyte	B Analyte detected in the associated Method Blank
DF Dilution Factor	H Holding times for preparation or analysis exceeded
J Analyte detected below quantitation limits	ND Not Detected at the Reporting Limit
RL Reporting Detection Limit	S Spike Recovery outside accepted recovery limits

Original



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Analytical Report

(Continuous)

WO#: **1908133**

Date Reported: **9/4/2019**

CLIENT: City of Bethel Heights

Collection Date: 8/30/2019 10:28:00 AM

Project: Drip Field samples

Lab ID: 1908133-005

Matrix: AQUEOUS

Client Sample ID Phase 4B



Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	1,750	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18
Fecal Coliform	10,060	100		MPN/100mL	100	08/30/19 15:30	08/31/19 11:02	Colilert-18

Qualifiers:

*	Value exceeds Permit Level for analyte	B	Analyte detected in the associated Method Blank
DF	Dilution Factor	H	Holding times for preparation or analysis exceeded
J	Analyte detected below quantitation limits	ND	Not Detected at the Reporting Limit
RL	Reporting Detection Limit	S	Spike Recovery outside accepted recovery limits

Original

CHAIN OF CUSTODY

Client Name/Address City of Bethel Heights 901 S. Lincoln St. Bethel Heights, AR 72764				Project Description <h2 style="text-align: center;">Drip Irrigation System</h2>				Billing Information City of Bethel Heights 530 Sunrise Dr. Bethel Heights, AR 72764				Field Test Information																										
												Test	1st Result	2nd Result	Analyst	Time																						
												pH:																										
												Temp:																										
												DO:																										
Res.Cl:																																						
Client Project Manager/Contact Rick Sayre				Project/Site Location (City/State) _____				<input type="checkbox"/> RUSH-Additional Charges Apply <input type="checkbox"/> Special Detection Limit(s) Date Results Needed _____				Method of Shipment <input type="checkbox"/> Fed Ex <input type="checkbox"/> UPS <input type="checkbox"/> Courier <input type="checkbox"/> Client Drop Off Other _____				Matrix Key																						
								WW - Wastewater GW - Groundwater DW - Drinking Water S - Soil/Solid O - Oil P - Product M - Misc																														
								Project Manager Phone # (479)601-5932				Project Manager Email rsayer@bethelheightsark.org				Site/Facility ID# Permit 4725-WR-5				Purchase Order Number _____				Project Number _____														
 www.gtsconsulting.net				1915 N. Shiloh Drive Fayetteville, AR 72704 Phone (479) 521-7645 Fax (479) 521-6232				Unless noted, all containers per Table II of 40 CFR Part 136.				Matrix (Refer to Key)	Preservative (Refer to Key)	(G)rab or (C)omposite	fecal coliform, E. coli								Preservative Key															
																							A Cool < 10C Na2S2O3 (Micro Only) B Cool <=6C C H2SO4 Ph<2 D None Required E NaOH pH>10 F HNO3 pH<2 G HCL pH<2 H H3PO4 pH<2 I Cool <=6C Na2S2O3															
																							START DATE				START TIME				STOP DATE				STOP TIME			
																							Sample Identification								Required Analysis				Laboratory Sample Number			
For Laboratory Use Only												Sampled by (Name - Print) Andrew Stephens				Start Flow Reading		Final Flow Reading		Units		Instantaneous or Total Flow Reading																
Ice			Custody Seals			Lab Comments						Relinquished by: (SIGNATURE) 				Date Time		Received by: (SIGNATURE)		Date Time																		
Y / N			Y / N													Date Time		Received by: (SIGNATURE)		Date Time																		
Blank / Cooler Temp																Date Time		Received by: (SIGNATURE)		Date Time																		
																Date Time		Received by: (SIGNATURE)		Date Time																		