



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

September 11, 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.: 1909029

Dear Rick Sayre:

GTS Lab received 4 sample(s) on 9/6/2019 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#: **1909029**

Date Reported: **9/11/2019**

**CLIENT:** City of Bethel Heights **Collection Date:** 9/6/2019 1:50:00 PM  
**Project:** Drip Field samples  
**Lab ID:** 1909029-001 **Matrix:** AQUEOUS  
**Client Sample ID** Phase 1

Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	1,340	100		MPN/100mL	100	09/06/19 16:43	09/07/19 10:45	Colilert-18
Fecal Coliform	7,330	100		MPN/100mL	100	09/06/19 16:43	09/07/19 10:45	Colilert-18

**CLIENT:** City of Bethel Heights **Collection Date:** 9/6/2019 1:53:00 PM  
**Project:** Drip Field samples  
**Lab ID:** 1909029-002 **Matrix:** AQUEOUS  
**Client Sample ID** Phase 2

Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	3,790	100		MPN/100mL	100	09/06/19 16:43	09/07/19 10:45	Colilert-18
Fecal Coliform	20,460	100		MPN/100mL	100	09/06/19 16:43	09/07/19 10:45	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#: **1909029**

Date Reported: **9/11/2019**

**CLIENT:** City of Bethel Heights **Collection Date:** 9/6/2019 1:57:00 PM  
**Project:** Drip Field samples  
**Lab ID:** 1909029-003 **Matrix:** AQUEOUS  
**Client Sample ID** Phase 3

Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	7,520	100		MPN/100mL	100	09/06/19 16:43	09/07/19 10:45	Colilert-18
Fecal Coliform	16,640	100		MPN/100mL	100	09/06/19 16:43	09/07/19 10:45	Colilert-18

**CLIENT:** City of Bethel Heights **Collection Date:** 9/6/2019 2:15:00 PM  
**Project:** Drip Field samples  
**Lab ID:** 1909029-004 **Matrix:** AQUEOUS  
**Client Sample ID** Phase 4B


Analyses	Result	RL	Qual	Units	DF	Prep Date	Analysis Date	Method
E. coli	97	10		MPN/100mL	10	09/06/19 16:43	09/07/19 10:45	Colilert-18
Fecal Coliform	121	10		MPN/100mL	10	09/06/19 16:43	09/07/19 10:45	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:					
Client Project Manager/Contact <b>Rick Sayre</b>				Project/Site Location (City/State)				RUSH-Additional Charges Apply Special Detection Limit(s) Date Results Needed				Method of Shipment					
												Fed Ex		UPS			
												Courier		Client Drop Off			
												Other					
 <p style="text-align: center;">www.gtsconsulting.net</p>				1915 N. Shiloh Drive Fayetteville, AR 72704 Phone (479) 521-7645 Fax (479) 521-6232				Matrix (Refer to Key) Preservative (Refer to Key) (G)rab or (C)omposite fecal coliform, E. coli				Matrix Key					
												WW - Wastewater		GW - Groundwater			
												DW - Drinking Water		S - Soil/Solid			
												P - Product		M - Misc			
Project Manager Phone # <b>(479)601-5932</b>				Project Manager Email rsayer@bethelheightsark.org				Site/Facility ID# <b>Permit 4725-WR-5</b>				Purchase Order Number					
												Project Number					
												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					
		9-6-19	13:50	Phase 1	GW	A	G	X							1909029-001A		
		9-6-19	13:53	Phase 2	GW	A	G	X							1909029-002A		
		9-6-19	13:57	Phase 3	GW	A	G	X							1909029-003A		
		DRY	14:15	Phase 4A	GW	A	G	X									
		9-6-19	14:15	Phase 4B	GW	A	G	X							1909029-004A		
For Laboratory Use Only					Sampled by (Name - Print)				Start Flow Reading		Final Flow Reading		Units		Instantaneous or Total Flow Reading		
Ice		Custody Seals		Lab Comments Andrew Stephens													
Y/N		Y/N						Relinquished by: (SIGNATURE)		Date Time		Received by: (SIGNATURE)		Date Time			
								Relinquished by: (SIGNATURE)		Date Time		Received by: (SIGNATURE)		Date Time			
								Relinquished by: (SIGNATURE)		Date Time		Received by: (SIGNATURE)		Date Time			
Blank / Cooler Temp																	
3.8°C																	