

October 15, 2018

Rob King
Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946

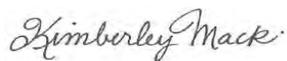
RE: Project: FE/MN 10/10
Pace Project No.: 7067458

Dear Rob King:

Enclosed are the analytical results for sample(s) received by the laboratory on October 10, 2018. The results relate only to the samples included in this report. Results reported herein conform to the most current, applicable TNI/NELAC standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Kimberley M. Mack for
Stu Murrell
stu.murrell@pacelabs.com
(631)694-3040
Project Manager

Enclosures

cc: Warren Booth, Hampton Bays Water District
John Collins, H2M Group
Stella Michaels, Hampton Bays Water District
Paul Ponturo, H2M Group



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
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CERTIFICATIONS

Project: FE/MN 10/10

Pace Project No.: 7067458

Long Island Certification IDs

575 Broad Hollow Rd, Melville, NY 11747

New York Certification #: 10478 Primary Accrediting Body

New Jersey Certification #: NY158

Pennsylvania Certification #: 68-00350

Connecticut Certification #: PH-0435

Maryland Certification #: 208

Rhode Island Certification #: LAO00340

Massachusetts Certification #: M-NY026

New Hampshire Certification #: 2987

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SAMPLE SUMMARY

Project: FE/MN 10/10

Pace Project No.: 7067458

Lab ID	Sample ID	Matrix	Date Collected	Date Received
7067458001	6 HAMPTON BAYS DR.	Drinking Water	10/10/18 10:15	10/10/18 16:30
7067458002	4 STONEY WELL CT.	Drinking Water	10/10/18 10:35	10/10/18 16:30

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SAMPLE ANALYTE COUNT

Project: FE/MN 10/10

Pace Project No.: 7067458

Lab ID	Sample ID	Method	Analysts	Analytes Reported
7067458001	6 HAMPTON BAYS DR.	EPA 200.7	JMW	2
7067458002	4 STONEY WELL CT.	EPA 200.7	JMW	2

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ANALYTICAL RESULTS

Project: FE/MN 10/10

Pace Project No.: 7067458

Sample: 6 HAMPTON BAYS DR. **Lab ID: 7067458001** Collected: 10/10/18 10:15 Received: 10/10/18 16:30 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.7 MET ICP, Drinking Water		Analytical Method: EPA 200.7							
Iron	0.048	mg/L	0.020		1		10/12/18 16:42	7439-89-6	
Manganese	<0.010	mg/L	0.010		1		10/12/18 16:42	7439-96-5	

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ANALYTICAL RESULTS

Project: FE/MN 10/10

Pace Project No.: 7067458

Sample: 4 STONEY WELL CT. **Lab ID: 7067458002** Collected: 10/10/18 10:35 Received: 10/10/18 16:30 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.7 MET ICP, Drinking Water		Analytical Method: EPA 200.7							
Iron	<0.020	mg/L	0.020		1		10/12/18 16:43	7439-89-6	
Manganese	<0.010	mg/L	0.010		1		10/12/18 16:43	7439-96-5	

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QUALITY CONTROL DATA

Project: FE/MN 10/10
Pace Project No.: 7067458

QC Batch: 86836 Analysis Method: EPA 200.7
QC Batch Method: EPA 200.7 Analysis Description: 200.7 MET No Prep Drinking Water
Associated Lab Samples: 7067458001, 7067458002

METHOD BLANK: 399540 Matrix: Drinking Water
Associated Lab Samples: 7067458001, 7067458002

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Iron	mg/L	<0.020	0.020	10/12/18 16:29	
Manganese	mg/L	<0.010	0.010	10/12/18 16:29	

LABORATORY CONTROL SAMPLE: 399541

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Iron	mg/L	2	2.0	99	85-115	
Manganese	mg/L	.25	0.25	99	85-115	

MATRIX SPIKE SAMPLE: 399544

Parameter	Units	7067393001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Iron	mg/L	<20.0 ug/L	2	2.0	99	70-130	
Manganese	mg/L	<10.0 ug/L	.25	0.25	98	70-130	

MATRIX SPIKE SAMPLE: 399546

Parameter	Units	7067395001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Iron	mg/L	<20.0 ug/L	2	2.0	98	70-130	
Manganese	mg/L	<10.0 ug/L	.25	0.24	97	70-130	

SAMPLE DUPLICATE: 399543

Parameter	Units	7067393001 Result	Dup Result	RPD	Max RPD	Qualifiers
Iron	mg/L	<20.0 ug/L	<0.020		20	
Manganese	mg/L	<10.0 ug/L	<0.010		20	

SAMPLE DUPLICATE: 399545

Parameter	Units	7067395001 Result	Dup Result	RPD	Max RPD	Qualifiers
Iron	mg/L	<20.0 ug/L	<0.020		20	
Manganese	mg/L	<10.0 ug/L	<0.010		20	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALIFIERS

Project: FE/MN 10/10

Pace Project No.: 7067458

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

SAMPLE QUALIFIERS

Sample: 7067458001

[1] WEEKS

Sample: 7067458002

[1] CURRERI

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: FE/MN 10/10

Pace Project No.: 7067458

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
7067458001	6 HAMPTON BAYS DR.	EPA 200.7	86836		
7067458002	4 STONEY WELL CT.	EPA 200.7	86836		

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WO#: 7067458



747

Sample Request Form PUBLIC WATER SUPPLIER

C/S WELL OFF LINE

Date: 10-10-18

Collected By: *W Booth* 10/10/18 WELL RUN TO SYSTEM

Accepted By: *[Signature]* 1300

Cooler Temp: 3.2 °C

YES NO VOC'S PRESERVED WITH HCl

Back At 1630

Client Info:

Name or Code: HAMPTON BAYS WATER DISTRICT

Address: P.O. BOX 1013

HAMPTON BAYS, NEW YORK 11946

(631) 728-0179

Phone #: _____

Attn: _____

Proj. # or (Name): _____

Bill To: _____

Copies To: _____

Sample Info:

Sample Types	Purpose	Origin	Treatment Types
PW - Potable Water	RO - Routine	D - Distribution	AST - Air Stripper
GW - Groundwater	RE - Resample	RW - Raw Well	GAC - Granular Activated Charcoal
SW - Surface Water	S - Special	TW - Treated Well	N - Nitrate Removal Plant
WW - Waste Water		T - Tank	FE - Iron Removal Plant
AQ - Aqueous		MW - Monitoring Well	O - Other
S - Soil		I - Influent	
		E - Effluent	

Date/Time Collected:	Sample Type	Location	Origin	Treatment Type	Purpose	Field Readings Cl ₂ pH/Temp	Analysis	Lab No.
9:05 10-10-18	GW	WELL 4-1	RW	-	RO		BACT + POC	
9:10 10-10-18	GW	WELL 4-2	RW	-	RO		BACT + POC	
10:15 10-10-18	PW	WEEKS 6 HAMPTON BAYS P.R.	D	-	S		IRON, MANG.	001
10:35 10-10-18	PW	CURRERI 4 STONEYWELL CT.	D	-	S		IRON, MANG.	002
10:35 10-10-18	PW	CURRERI 4 STONEYWELL CT	D	-	S		PFC'S	003 <i>[Signature]</i>

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Remarks:



Sample Condition Upon Receipt

WO#: 7067458
 PM: SWM Due Date: 10/18 '18
 CLIENT: HBW

Client Name: HBW Proj _____

Courier: Fed Ex UPS USPS Client Commercial Pace Other

Tracking #: _____
 Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No

Packing Material: Bubble Wrap Bubble Bags Ziploc None Other

Thermometer Used: (H09) Correction Factor: 0.0
 Cooler Temperature (°C): 3.2 Cooler Temperature Corrected (°C): 3.2

Temperature Blank Present: Yes No

Type of Ice: Wet Blue None

Samples on ice, cooling process has begun

Date/Time 5035A kits placed in freezer _____

Temp should be above freezing to 6.0°C

USDA Regulated Soil (N/A, water sample)

Date and Initials of person examining contents: CS 10/10/18

Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX, or VA (check map)? YES NO

Did samples originate from a foreign source (internationally, including Hawaii and Puerto Rico)? Yes No

If Yes to either question, fill out a Regulated Soil Checklist (F-LI-C-010) and include with SCUR/COC paperwork.

			COMMENTS:
Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		3.
Sampler Name & Signature on COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		4.
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		5.
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		7.
Sufficient Volume: (Triple volume provided for MS/MSD)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		9.
-Pace Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		11. Note if sediment is visible in the dissolved container.
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		12.
-Includes date/time/ID/Analysis Matrix SL WT OIL			
All containers needing preservation have been checked	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		13. <input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
pH paper Lot # <u>HC 857466</u>			Sample #
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH > 9 Sulfide, NAOH > 12 Cyanide)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A		Initial when completed: _____ Lot # of added preservative: _____ Date/Time preservative added: _____
Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis			
Samples checked for dechlorination:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		14. Positive for Res. Chlorine? Y N
KI starch test strips lot #			
Residual chlorine strips Lot #			
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		15.
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		16.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A		
Pace Trip Blank Lot # (if applicable): _____			

Client Notification/ Resolution: _____

Field Data Required? Y / N

Person Contacted: _____

Date/Time: _____

Comments/ Resolution: _____