Anatek Labs, Inc. 1282 Alturas Drive - Moscow, ID 83843 - (208) 883-2839 - email moscow@anateklabs.com 504 E Sprague Ste. D - Spokane, WA 99202 - (509) 838-3999 - email spokane@anateklabs.com

		Pelican Point	ican Point			Work Order:		WDL0148			
		PO Box 3388				Project:		Bacteria			
		Coeur d Alene, ID 83816	peur d Alene, ID 83816			Reported:		12/6/2023 14:04			
Attn: Les		Leslie Rayner	eslie Rayner								
			Analytica	ıl Resu	lts Repo	ort					
Syster	m ID#	66800	System Name:	Pelica	an Point						
Reference Number:		er: WDL0148-01	Collect Date:	12/05	/23 13:35		DOH Sou	urce #:			
Multiple Source Nos: Date Received: Sample Location:		los:	Sample Type:	PT/F	PT/F		County:		Grant		
		12/05/23 16:15	Sample Purpos	e/Compliance Sample							
		FH PP 39									
Matrix	:	Drinking Water									
			Lab/Sam	ple Num	nber: 112-	14801					
Colifor	m Bacteria										
DOH #	Analyte	Result	Units	LRL	SDRL	Trigger	MCL	Analyzed	Analyst	Method	Qualifier
0001	Total Coliform	n Absent		1.00	1	1		12/6/23 11:5	50 SBS	SM 9223 B	
0003	E. coli	Absent		1.00	1	1		12/6/23 11:5	50 SBS	SM 9223 B	

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Client:	Pelican Point		١	Nork Order:	WDL0148
Address:	PO Box 3388		F	Project:	Bacteria
	Coeur d Alene, ID 83816		I	Reported:	12/6/2023 14:04
Attn:	Leslie Rayner				
		Analytical	Results Repo	t	
System ID#	66800	System Name:	Pelican Point		
Reference Numb	er: WDL0148-02	Collect Date:	12/05/23 12:55	DOH S	ource #:
Multiple Source N	Nos:	Sample Type:	PT/F	County	: Grant
Date Received:	12/05/23 16:15	Sample Purpose	: RC - Routine/	Compliance Sam	nple
Sample Location	: FH PP 71				
Matrix:	Drinking Water				

Lab/Sample Number: 112-14802

Coliform Bacteria

DOH #	Analyte	Result	Units	LRL	SDRL	Trigger	MCL	Analyzed	Analyst	Method	Qualifier
0001	Total Coliform	Absent		1.00	1	1		12/6/23 11:50	SBS	SM 9223 B	
0003	E. coli	Absent		1.00	1	1		12/6/23 11:50	SBS	SM 9223 B	

Authorized Signature,

Blake Sattler

Blake Sattler For Kathleen Sattler, Laboratory Manager

LRL	Lab Reporting Limit
SDRL	State Detection Reporting Limit
ND	Not Detected
MCL	EPA's Maximum Contaminant Level
Dry	Sample results reported on a dry weight basis
SAL	State Action Level

Not a certified analyte

This report shall not be reproduced except in full, without the written approval of the laboratory The results reported related only to the samples indicated.



and the second							
Anatek I	_abs, Inc.						
504 E. Sprague Suite D 1282 Alturas Drive							
Spokane, WA 99202	Moscow, ID 83843						
509-838-3999	208-883-2839						
COLIFORM	BACTERIA ANALYSIS						
Date Sample Collected Time Sa							
COREC	Grant						
1215123 13	JAN						
Month Day Year	PM						
Type of Water System (check only one box)							
Group A Group B	Other						
Group A and Group B Systems - Provide fro	m Water Facilities Inventory (WFI):						
ID# <u>6 6 8 0</u>	<u>0 L </u>						
System Name: Pelican Point							
Contact Person: Leslie Rayner							
Day Phone: (877)755-9287	Cell Phone:						
Email: info@gemstate-water.com							
Send results to: (Print full name, address and zip or Gern State Water	ode)						
PO Box 3388							
Coeur D'Alene, idaho 83816							
	FORMATION						
Sample collected by (name): Dean R	enninger						
Specific location where sample collected: FH $PP39$	Special instructions or comments:						
Type of Sample (must check only one box o	i f#1 through #4 listed below)						
1. Routine Distribution Sample	2. Repeat Sample (after unsat. routine)						
Chlorinated: YesNo	Distribution System						
Chlorine Residual: Total Free	Source Groundwater Rule (GWR)						
3. Raw Water Source Sample	(Population of 1,000 or less)						
E. coli - GWR source sample	Unsatisfactory routine tab number:						
Fecal -Surface, GWI, some springs							
Other	Unsatisfactory routine collect date:						
S	/						
Public systems must provide source number from WIR	Chlorinated: Yes No						
	Chlorine Residual: Total Free						
4. Sample Collected for Information On	-						
Investigative Construction / R							
LAB USE ONLY DRINKING W	ATER RESULTS LAB USE ONLY						
	nd Satisfactory						
	Fecal coliform absent						
Replacement Sample Required:							
Sample too old (>30 hours)	с <u>п</u>						
	id culture						
Bacterial Density Results: Plate Count	/ml. E.coli/100ml.						
Total Coliform /100mt	Fecal Collion /100mi.						
Date and Time Received: 17/5/23	1615 Ref LAPA						
Date Analyzed:	Dute Reported:						
Sample Number (DOH number plus five digits) (SPO-112, N	08-125) Lab Use Only:						



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			D 1282 Alturas Drive					
Spokane, WA 99202		Mo	scow, ID 8	3843				
	509-838-3	999	:	208-883-2	839			
COLIFORM BACTERIA ANALYSIS								
Date Sam	ple Collected	Time Sar Collect			County			
1212	5123	CONCU			Grant			
	lay Year	12:5	5					
Type of Water System (check only one box)								
				Other				
	Group B Systems				tory (WFI):			
1D# 6	6 8	_0	0	L				
System Name	e Pelicar	n Point						
Contact Perso								
	877)755-9287		Cell Pt	ione:				
	@gemstate-w				·····			
Gem State	(Print full name, addr e Water	ess and zip co	00) (90					
PO Box 3	388				~			
Coeur D'A	lene, idaho 8	3816						
	S	AMPLE IN	FORM	ATION				
Sample collec		Dean Ro						
Specific locati	on where sample c	oliected:	Specia	instructions o	r comments:			
FA .	PPII				56			
	ple (must check on							
	e Distribution San	aple		• •	fler unsat. routine)			
	Yes No	0.12		Distribution Sys				
	sidual: Total i Source Sample	riee	Source Groundwater Rule (GWR) (Population of 1,000 or less)					
	GWR source sam	ole		Unsatisfactory	routine lab number:			
10	Surface, GWI, som							
Other			Unse	disfactory rout	ne collect date:			
S				/				
	provide source number from	WP3	Chio	rinated: Yes	No			
				rine Residual:	Total Free			
	Collected for info			• *				
	tive Cons							
LAB USE	Chily Dial Colifor	KING WA		EJUL 15	LAB USE ONLY			
-	cony rotal Collon i present	n Present an			Satisfactory			
	Fecal colliform pres			iorm absent				
	Sample Required							
Sample Sample	too old (>30 hours)			0				
	r Container	Turbic	l culture					
Bacterial Dens	ity Results: Plate (Count		/ml. E.coli	/100ml.			
Total Colifor	m	_/100ml.	Fecal Col	iliom	/100mi.			
	leceived: 2/5/2	3 161		reg.	HE LPA			
Date Analyzed Sample Number (D	: OH number plus five digit	SPO-112 MO	1	Date Reported: Lab Use Only:				
				Lab Ged Unity.	The Second Res.			
	m. + 2 /	1 1 44						