

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

Client: Pelican Point
Address: PO Box 3388
Coeur d Alene, ID 83816
Attn: Gem State Water

Work Order: WEA0044
Project: DBP
Reported: 1/16/2024 14:30

Analytical Results Report

System ID# 66800 System Name: Pelican Point
Reference Number: WEA0044-01 Collect Date: 01/02/24 11:10 DOH Source #: Grant
Multiple Source Nos: Sample Type: After County: Grant
Date Received: 01/02/24 15:50 Sample Purpose: RC - Routine/Compliance Sample
Sample Location: PP01
Matrix: Drinking Water

Lab/Sample Number: 125-04401

Haloacetic Acid (HAA5)

DOH #	Analyte	Result	Units	LRL	SDRL	Trigger	MCL	Analyzed	Analyst	Method	Qualifier
0411	MCAA	ND	ug/L	2.00	2			1/11/24 1:03	TAZ	SM 6251 B	
0412	DCAA	ND	ug/L	1.00	1			1/11/24 1:03	TAZ	SM 6251 B	
0413	TCAA	ND	ug/L	1.00	1			1/11/24 1:03	TAZ	SM 6251 B	
0414	MBAA	ND	ug/L	1.00	1			1/11/24 1:03	TAZ	SM 6251 B	
0415	DBAA	1.04	ug/L	1.00	1			1/11/24 1:03	TAZ	SM 6251 B	
0416	Total HAA5	1.04	ug/L	1.00	0		60	1/11/24 1:03	TAZ	SM 6251 B	

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Analytical Results Report

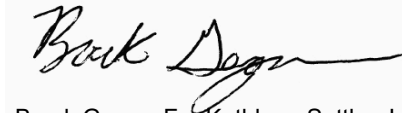
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Matrix: Drinking Water

Lab/Sample Number: 112-04401

Volatile Organic Compounds

DOH #	Analyte	Result	Units	LRL	SDRL	Trigger	MCL	Analyzed	Analyst	Method	Qualifier
0027	Chloroform	ND	ug/L	0.200	0.5			1/3/24 16:21	AAI	EPA 524.2	
0028	Bromodichloromethane	ND	ug/L	0.500	0.5			1/3/24 16:21	AAI	EPA 524.2	
0029	Dibromochloromethane	1.33	ug/L	0.500	0.5			1/3/24 16:21	AAI	EPA 524.2	
0030	Bromoform	3.39	ug/L	0.500	0.5			1/3/24 16:21	AAI	EPA 524.2	
0031	Total Trihalomethane	4.72	ug/L	0.200	0		80	1/3/24 16:21	AAI	EPA 524.2	

Authorized Signature,



Brock Gerger 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.

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Certifications

Code	Description	Facility	Number
W WA DOE	Washington Department of Ecology	Anatek-Spokane, WA	C585
DOE WA	Washington Department of Ecology	Anatek-Moscow, ID	C595

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Quality Control Data

Semivolatiles

Analyte	Result	Qual	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit
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Batch: BEA0127 - HAA 6251

Blank (BEA0127-BLK1)

Prepared: 1/5/2024 Analyzed: 1/10/2024

Monochloroacetic acid	ND		2.00	ug/L						
Monobromoacetic acid	ND		1.00	ug/L						
Dichloroacetic acid	ND		1.00	ug/L						
Trichloroacetic acid	ND		1.00	ug/L						
Bromochloroacetic acid (BCAA)	ND		1.00	ug/L						
Dibromoacetic acid	ND		1.00	ug/L						
Total HAA5	ND		1.00	ug/L						

LCS (BEA0127-BS1)

Prepared: 1/5/2024 Analyzed: 1/10/2024

Monochloroacetic acid	8.57		2.00	ug/L	10.0		85.7	70-130		
Monobromoacetic acid	8.27		1.00	ug/L	10.0		82.7	70-130		
Dichloroacetic acid	11.0		1.00	ug/L	10.0		110	70-130		
Trichloroacetic acid	11.1		1.00	ug/L	10.0		111	70-130		
Bromochloroacetic acid (BCAA)	11.5		1.00	ug/L	10.0		115	70-130		
Dibromoacetic acid	11.0		1.00	ug/L	10.0		110	70-130		
Total HAA5	49.9		1.00	ug/L				70-130		

Duplicate (BEA0127-DUP1)

Source: WDL0927-01

Prepared: 1/5/2024 Analyzed: 1/11/2024

Monochloroacetic acid	ND		2.01	ug/L		ND				20
Monobromoacetic acid	ND		1.00	ug/L		ND				20
Dichloroacetic acid	ND		1.00	ug/L		ND				20
Trichloroacetic acid	ND		1.00	ug/L		ND				20
Bromochloroacetic acid (BCAA)	1.75		1.00	ug/L		1.55			12.2	20
Dibromoacetic acid	3.51		1.00	ug/L		3.19			9.73	20
Total HAA5	3.51		1.00	ug/L		3.19			9.73	20

Matrix Spike (BEA0127-MS1)

Source: WDL0929-01

Prepared: 1/5/2024 Analyzed: 1/11/2024

Monochloroacetic acid	8.69		1.97	ug/L	9.84	ND	88.4	70-130		
Monobromoacetic acid	9.60		0.984	ug/L	9.84	ND	97.6	70-130		
Dichloroacetic acid	10.2		0.984	ug/L	9.84	ND	104	70-130		
Trichloroacetic acid	11.1		0.984	ug/L	9.84	ND	112	70-130		
Bromochloroacetic acid (BCAA)	11.0		0.984	ug/L	9.84	1.60	95.5	70-130		
Dibromoacetic acid	10.0		0.984	ug/L	9.84	3.23	69.0	70-130		
Total HAA5	49.6		0.984	ug/L		3.23		70-130		

Quality Control Data

Volatiles

Analyte	Result	Qual	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit
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Batch: BEA0045 - W VOC

Blank (BEA0045-BLK1)

Prepared & Analyzed: 1/3/2024

Chloroform	ND		0.200	ug/L						
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Quality Control Data (Continued)

Volatiles (Continued)

Analyte	Result	Qual	Reporting Limit	Units	Spike Level	Source Result	%REC	%REC Limits	RPD	RPD Limit
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Batch: BEA0045 - W VOC (Continued)

Blank (BEA0045-BLK1)

Prepared & Analyzed: 1/3/2024

Bromodichloromethane	ND		0.500	ug/L						
Dibromochloromethane	ND		0.500	ug/L						
Bromoform	ND		0.500	ug/L						
Total Trihalomethane	ND		0.200	ug/L						
<hr/>										
<i>Surrogate: Toluene-d8</i>			<i>5.07</i>	<i>ug/L</i>	<i>5.00</i>		<i>101</i>	<i>70-130</i>		

LCS (BEA0045-BS1)

Prepared & Analyzed: 1/3/2024

Chloroform	5.31		0.200	ug/L	5.00		106	70-130		
Bromodichloromethane	5.61		0.500	ug/L	5.00		112	70-130		
Dibromochloromethane	5.41		0.500	ug/L	5.00		108	70-130		
Bromoform	4.87		0.500	ug/L	5.00		97.4	70-130		
<hr/>										
<i>Surrogate: Toluene-d8</i>			<i>5.17</i>	<i>ug/L</i>	<i>5.00</i>		<i>103</i>	<i>70-130</i>		



Washington Chain of Custody - Drinking Water A

WATER SYSTEM Pelican Point

SEND REPORT TO Info@gemstate-water.com

ADDRESS _____

CITY STATE ZIP _____

Water System # 66800L

Phone Number 577 755 9897

E-Mail _____

County _____

Sample Type	Sample Purpose
<input type="checkbox"/> Before (B)	<input checked="" type="checkbox"/> Compliance (C)
<input type="checkbox"/> After (A)	<input type="checkbox"/> Investigative (I)
<input type="checkbox"/> Unknown (U)	<input type="checkbox"/> Other Purpose (B)

Date & Time Collected 1/2/24 11:10

Sampler Name: Cole Ruyter

Sampler Signature: [Signature]

Payment due with samples unless credit has been established

Sample Location (required)

DOH Source # (Check one and fill in where necessary)

Single Well Source Number: _____

Flowing Distribution (92)

Composite Sampling (95) List source #'s _____

Blended Sample (96) List source #'s _____

Receiving Check List

Received Intact No Headspace

Labels & Chains Agree Temp: 10.5 D16-11

Ice/Ice-Packs Present: _____

Custody Seals Present: _____

Preservatives: _____

Check Desired Analyses

IOCs	VOCs & DBPs	SOCs	PFC/PFAS	Other (specify):
<input type="checkbox"/> Lead	<input type="checkbox"/> VOC (VOC1)	<input type="checkbox"/> Phase II SOC	<input type="checkbox"/> PFAS by EPA 533	
<input type="checkbox"/> Copper	<input checked="" type="checkbox"/> TTHM	<input type="checkbox"/> Semivolatiles (PEST1)		
<input type="checkbox"/> Arsenic	<input checked="" type="checkbox"/> HAA5	<input type="checkbox"/> Herbicides (HERB1)		
<input type="checkbox"/> Nitrate	<input type="checkbox"/> TOC	<input type="checkbox"/> Carbamates (INSECT1)		
<input type="checkbox"/> Nitrite	<input type="checkbox"/> Alkalinity	<input checked="" type="checkbox"/> Pesticides (PEST1)		
<input type="checkbox"/> WA Complete IOC	RADs	<input type="checkbox"/> EDB		
<input type="checkbox"/> Asbestos	<input type="checkbox"/> Gross Alpha	<input type="checkbox"/> Phase V SOC		
	<input type="checkbox"/> Gross Beta	<input type="checkbox"/> Diquat		
	<input type="checkbox"/> RAD 226	<input type="checkbox"/> Endothall		
	<input type="checkbox"/> RAD 228	<input type="checkbox"/> Glyphosate		
	<input type="checkbox"/> Uranium	<input type="checkbox"/> Dioxin		

Customer Signature [Signature]

Shipping/Delivery Date _____

Received By [Signature]

Date/Time Rec'd 1/2/24 1550

Samples submitted to Anatek Labs may be subcontracted to other accredited labs if necessary. This message serves as notice of this possibility. Subcontracted analyses will be clearly noted on the analytical report.



Haley & Aldrich, Inc.
505 W. Riverside,
Suite 205,
Spokane WA, 99212

CHAIN OF CUSTODY RECORD

WEA0034



Due: 01/17/24

H&A FILE NO. 0203227-002 LABORATORY Anatek DELIVERY DATE _____
 PROJECT NAME Outside Technical Support ADDRESS 504 E Sprague Ave # D, Spokane, WA 99202 TURNAROUND TIME _____
 H&A CONTACT wmcdonald@haleyaldrich.com CONTACT _____ PROJECT MANAGER _____

Sample No.	Date	Time	Depth	Type	E. Coli SM9221F	Analysis Requested										Number of Containers	Comments (special instructions, precautions, additional method numbers, etc.)		
Outfall 003	1/2/24	14:00		H ₂ O	X													1	Laboratory to use applicable DEP CAM methods, unless otherwise directed. Invoice to: AccountsPayable@haleyaldrich.com

Sampled and Relinquished by	Received by	LIQUID	Sampling Comments
Sign <i>[Signature]</i> Print <u>Chad M.</u> Firm <u>H&A</u> Date <u>1/2/24</u> Time <u>15:15</u>	Sign <i>[Signature]</i> Print <u>Brook Geiger</u> Firm <u>Anatek</u> Date <u>1-2-24</u> Time <u>15:15</u>	VOA Vial Amber Glass Plastic Bottle Preservative Volume	
Relinquished by	Received by	SOLID	Evidence samples were tampered with? YES NO
Sign _____ Print _____ Firm _____ Date _____ Time _____	Sign _____ Print _____ Firm _____ Date _____ Time _____	VOA Vial Amber Glass Clear Glass Preservative Volume	If YES, please explain in section below.
Relinquished by	Received by	PRESERVATION KEY	
Sign _____ Print _____ Firm _____ Date _____ Time _____	Sign _____ Print _____ Firm _____ Date _____ Time _____	A Sample chilled C NaOH E H ₂ SO ₄ G Methanol B Sample filtered D HNO ₃ F HCL H Water/NaHSO ₄ (circle)	

Presumptive Certainty Data Package (Laboratory to use applicable DEP CAM methods)

If Presumptive Certainty Data Package is needed, initial all sections:

_____ The required minimum field QC samples, as designated in BWSC CAM-VII have been or will be collected, as appropriate, to meet the requirements of Presumptive Certainty.

_____ Matrix Spike (MS) samples for MCP Metals and/or Cyanide are included and identified herein.

_____ This Chain of Custody Record (specify) _____ includes _____ does not include samples defined as Drinking Water Samples.

_____ If this Chain of Custody Record identifies samples defined as Drinking Water Samples, Trip Blanks and Field Duplicates are included and identified and analysis of TICs are required, as appropriate. Laboratory should (specify if applicable) _____ analyze

Required Reporting Limits and Data Quality Objectives

RC-S1 S1 GW1
 RC-S2 S2 GW2
 RC-GW1 S3 GW3
 RC-GW2