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 PointWork Order:WED0367Address:PO Box 3388Project:Bacteria

Coeur d Alene, ID 83816 Reported: 4/9/2024 12:32

Attn: Leslie Rayner

Analytical Results Report

System ID# 66800 System Name: Pelican Point

Reference Number: WED0367-01 Collect Date: 04/08/24 10:20 DOH Source #:

Multiple Source Nos: Sample Type: PT/F County: Grant

Date Received: 04/08/24 16:23 Sample Purpose: RC - Routine/Compliance Sample

Date Received: 04/08/24 16:23 Sample Location: FH PP 88

Matrix: Drinking Water

Lab/Sample Number: 112-36701

Coliform Bacteria

DOH #	Analyte	Result	Units	LRL	SDRL	Trigger	MCL	Analyzed	Analyst	Method	Qualifier
0001	Total Coliform	Absent		1.00	1	1		4/9/24 11:17	SBS	SM 9223 B	
0003	E. coli	Absent		1.00	1	1		4/9/24 11:17	SBS	SM 9223 B	

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Pelican Point Work Order: WED0367 Client: PO Box 3388 Address: Project: Bacteria

> Reported: 4/9/2024 12:32 Coeur d Alene, ID 83816

Leslie Rayner Attn:

Analytical Results Report

66800 System ID# System Name: Pelican Point

Drinking Water

Reference Number: WED0367-02 Collect Date: 04/08/24 10:45 DOH Source #:

Multiple Source Nos: Sample Type: PT/F County: Grant

Date Received: 04/08/24 16:23 Sample Purpose: RC - Routine/Compliance Sample

Sample Location: FH PP 39

Lab/Sample Number: 112-36702

Coliform Bacteria

Matrix:

DOH #	Analyte	Result	Units	LRL	SDRL	Trigger	MCL	Analyzed	Analyst	Method	Qualifier
0001	Total Coliform	Absent		1.00	1	1		4/9/24 11:17	SBS	SM 9223 B	
0003	E. coli	Absent		1.00	1	1		4/9/24 11:17	SBS	SM 9223 B	

Authorized Signature,

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**

Sample results reported on a dry weight basis Dry

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.



Anatek Labs, Inc.

_	504 E. Sprague Suite D	1282 Alturas Drive							
	Spokane, WA 99202	Moscow, ID 83843							
	509-838-3999 208-883-2839								
	COLIFORM BACTERIA ANALYSIS								
Pate Sample County									
Date Sam	pie Collected Collecte								
918124 10 95 M									
Month Day Year V V 7 D D									
Type of Water System (check only one box)									
☑ Group A ☐ Group B ☐ Other									
Group A and Group B Systems - Provide from Water Facilities Inventory (WFI):									
1D# <u>6 6 8 0 0 L</u>									
System Name	Pelican Point								
Contact Person									
	(877)755-9287	Cell Phone:							
	@gemstate-water.com : (Print full name, address and zip cod								
Gem Stat		- ,							
PO Box 3	388	.8)							
Coeur D'A	Nene, Idaho 83816								
	SAMPLE IN	FORMATION							
Sample collec		enninger							
Specific local	ion where sample collected:	Special instructions or comments:							
FH	PP 39								
Type of Sample (must check only one box of #1 through #4 listed below)									
71	pro (mout and and and	1. Routine Distribution Sample 2. Repeat Sample (after unsat. routine)							
	e Distribution Sample	Repeat Sample (after unsat. routine) Distribution System							
Routin Chlorinate Chlorine R	e Distribution Sample i: Yes No93 esidual: Total Free93	2. Repeat Sample (after unsat. routine) Distribution System Source Groundwater Rule (GWR)							
Routin Chlorinate Chlorine R Raw Wate	e Distribution Sample i: YesNo93 esiduel: TotatFree93 r Source Sample	2. Repeat Sample (after unsat. routine) Distribution System Source Groundwater Rule (GWR) (Population of 1,000 or less)							
1. Routin Chlorinater Chlorine R 3. Raw Wate E. coli-	e Distribution Sample i: Yes No 93 esiduel: Total Free 93 r Source Sample - GWR source sample	2. Repeat Sample (after unsat. routine) Distribution System Source Groundwater Rule (GWR)							
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WED0367

Due: 04/23/24

Anatek Labs, Inc. 504 E. Sprague Suite D 1282 Alturas Drive

Spokane, WA 99202 Moscow, ID 83843

A

	509-838-3999		208-883-2	339				
COLIFORM BACTERIA ANALYSIS								
Date Sam		e Sample		County				
418	3124 12	offected 52	+	Grant				
		PM						
	r System (check only one I roup A Grou		☐ Other					
		-		tory (WFI):				
	Group A and Group B Systems - Provide from Water Facilities Inventory (WFI): ID# 6 6 8 0 0 L							
System Name		int						
Contact Person	on: Leslie Rayner							
Day Phone:	(877)755-9287	Cell F	hone:					
Email: info	@gemstate-water.c	com						
Send results to Gern Stat	(Print full name, address and e Watter	zip code)						
PO Box 3	388							
Coeur D'A	liene, Idaho 83816							
	SAMPL	E INFORM	MATION					
Sample collec	ted by (name): Dear	Renni	nger					
Specific locat	ion where sample collected	i: Spec	ial instructions o	or comments:				
PH	PP 88							
	ple (must check only one I							
	e Distribution Sample	200		ifter unsat. routine)				
	: YesNo		Distribution Sys					
	esiduat: Total Free Source Sample		(Population of 1	Iwater Rule (GWR) 1,000 or less)				
	- GWR source sample		Unsatisfactory	routine lab number:				
_	Surface, GWI, some spring	as —						
Other		1	satisfactory rout	ine collect date:				
S	1 1	_						
Public systems must	provide source resolver from WFR	Chi	orinated: Yes_	No				
	•	Chi	orine Residual:	TotalFree				
4. Sample	Collected for information							
	ative Construction		Other_					
LAB USE			RESULTS	LAB USE ONLY				
	ctory Total Coliform Prese			☐ Satisfactory				
☐ E.coli present ☐ E.coli absent ☐ Fecal coliform absent								
Replacement Sample Required:								
☐ Sample	too old (>30 hours)	TNTC						
☐ Imprope	er Container	Turbid culture	•					
Bacterial Den	sity Results: Plate Count_		_/ml. E.coli_					
Total Coliform/100ml. Fecal Coliform/100ml.								
Date and Time Received: 4/8/24 1:623 Fel HV)								
Date Analyze			Date Reported:					
Sample Number (I	OOH number plus five digits) (SPO-	112, MOS-125)	Lab Use Only:	170011-14.				