

BACTERIOLOGICAL REPORT ON WATER SAMPLES

Sweetwater County Health Department

205 East Railroad Avenue

Green River, Wyoming 82935

872-6316 • 352-6709

CO 04 CITY _____ TEST REQUEST: TOTAL COLIFORM OTHER

TYPE SUPPLY 2
1. PUBLIC 4. SWIMMING POOL 7. SCHOOL 10. OTHER
2. PRIVATE 5. U.S. GOVT 8. MISC.
3. SEMI-PRIVATE 6. STATE GOVT. 9. BUFFER

ACCOUNT'S NAME & ADDRESS

50 SUMMIT DRIVE
PINEDALE WY 82941

*** IMPORTANT ***

LABORATORY HOURS
Mon. & Tues. 9-5 ; Wed. 9-3 only

Sampling Date 2/22/2002
MO./DAY/YR.

E.P.A. #

CHLORINE RESIDUAL

Pinedale

FOR LABORATORY ONLY

TIME/DATE RECEIVED 7/23/02 10:45 AM

SAMPLE CONDITION: GOOD LEAKED INSUFFICIENT OLD

SAMPLE ID# 21660 REPEAT REF. # _____

FINAL ANALYSIS: NOT TESTED TNTC

CONFLUENT GROWTH SEDIMENT

Satisfactory Unsatisfactory Resample

Replacement required

MF

LB 24 HR _____ 48 HR _____ BGB _____

P/A 24 HR _____ 48 HR _____

E.C. 24 HR _____

H.P.C.

REMARKS: _____

ML
ANALYST

The EPA may place additional time restrictions on certain samples. Some samples may be too old to test.