



October 23, 2018

Service Request No:J1807392

Mr. Jeremy Parrish
Florida DEP
7825 Baymeadows Way, Suite 200-B
Jacksonville, FL 32256-7577

Laboratory Results for: Nassau West

Dear Mr.Parrish,

Enclosed are the results of the sample(s) submitted to our laboratory October 18, 2018
For your reference, these analyses have been assigned our service request number **J1807392**.

All analyses were performed according to our laboratory's quality assurance program. The test results meet requirements of the NELAP standards except as noted in the case narrative report. All results are intended to be considered in their entirety, and ALS Environmental is not responsible for use of less than the complete report. Results apply only to the items submitted to the laboratory for analysis and individual items (samples) analyzed, as listed in the report. In accordance to the NELAC 2003 Standard, a statement on the estimated uncertainty of measurement of any quantitative analysis will be supplied upon request.

Respectfully submitted,

ALS Group USA, Corp. dba ALS Environmental

Wendie Lodge
Project Manager

ADDRESS 9143 Philips Highway, Suite 200, Jacksonville, FL 32256
PHONE +1 904 739 2277 | FAX +1 904 739 2011
ALS Group USA, Corp.
dba ALS Environmental



Narrative Documents

ALS Environmental—Jacksonville Laboratory
9143 Philips Highway, Suite 200, Jacksonville, FL 32256
Phone (904) 739-2277 Fax (904) 739-2011
www.alsglobal.com

Client: Florida DEP
Project: Nassau West/RQ-2018-10-08-12
Sample Matrix: Water

Service Request: J1807392
Date Received: 10/18/18

CASE NARRATIVE

All analyses were performed consistent with the quality assurance program of ALS Environmental. This report contains analytical results for samples designated for Tier I data deliverables. When appropriate to the procedure, method blank results have been reported with each analytical test. Analytical procedures performed by the lab are validated in accordance with NELAC standards. Parameters that are included in the NELAC Fields of Testing but are not included in the lab's NELAC accreditation are identified in the discussion of each analytical procedure.

Sample Receipt

Two water samples were received for analysis at ALS Environmental on 10/18/18. The samples were received in good condition and consistent with the accompanying chain of custody form. Samples are refrigerated at $\leq 6^{\circ}\text{C}$ upon receipt at the lab except for aqueous samples designated for metals analyses, which are stored at room temperature.

Microbiology Analyses:

Method SM 9223 B (Ec): Samples were removed from the incubator and read back on 10/19/18 at 16:33.

Approved by Wende Lodge Date 10/23/2018

SAMPLE DETECTION SUMMARY

CLIENT ID: 19010023			Lab ID: J1807392-001			
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Analyte	Results	Flag	MDL	MRL	Units	Method
Escherichia coli	98		10	10	MPN/100m L	SM 9223 B

CLIENT ID: 19010018			Lab ID: J1807392-002			
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Analyte	Results	Flag	MDL	MRL	Units	Method
Escherichia coli	96		10	10	MPN/100m L	SM 9223 B



Sample Receipt Information

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Client: Florida DEP
Project: Nassau West/RQ-2018-10-08-12

Service Request:J1807392

SAMPLE CROSS-REFERENCE

<u>SAMPLE #</u>	<u>CLIENT SAMPLE ID</u>	<u>DATE</u>	<u>TIME</u>
J1807392-001	19010023	10/18/2018	0945
J1807392-002	19010018	10/18/2018	1035

Cooler Receipt Form

Client: FDEP Service Request #: J1807392
 Project: Nassau West Shipping paid by ALS? Yes No N/A
 Cooler received on 10/18/18 and opened on 10/18/18 by SJS
 COURIER: ALS UPS FEDEX DHL Client Other _____ Airbill # _____

- 1 Were custody seals on outside of cooler? Yes No
If yes, how many and where? #: _____ on lid other N/A
- 2 Were seals intact and signature and date correct? Yes No N/A
- 3 Were custody papers properly filled out? Yes Yes No N/A
- 4 Temperature of cooler(s) upon receipt (Should be 0°C and ≤ 6°C) 0.8°C
- 5 Thermometer ID 1124
- 6 Temperature Blank Present? Yes No
- 7 Were Ice or Ice Packs present Ice Ice Packs No
- 8 Did all bottles arrive in good condition (unbroken, etc....)? Yes No N/A
- 9 Type of packing material present
 Netting Vial Holder Bubble Wrap
 Paper Styrofoam Other N/A
- 10 Were all bottle labels complete (sample ID, preservation, etc....)? Yes No N/A
- 11 Did all bottle labels and tags agree with custody papers? Yes No N/A
- 12 Were the correct bottles used for the tests indicated? Yes No N/A
- 13 Were all of the preserved bottles received with the appropriate preservative?
 HNO3 pH<2 H2SO4 pH<2 ZnAc2/NaOH pH>9 NaOH pH>12 HCl pH<2
 Preservative additions noted below
- 14 Were all samples received within analysis holding times? Yes No N/A
- 15 Were VOA vials free of air bubbles greater than 6mm? If present, note below Yes No N/A
- 16 Where did the bottles originate? ALS Client

Sample ID	Reagent	Lot #	ml added	Initials Date/Time

Additional comments and/or explanation of all discrepancies noted above:

Client approval to run samples if discrepancies noted:

Date:



CHAIN OF CUSTODY/LABORATORY ANALYSIS REQUEST FORM

9143 Phillips Highway, Ste 200 • Jacksonville, FL 32256 (904) 739-2277 • 800-695-7222 x06 • FAX (904) 739-2011 PAGE _____ OF _____

SR# J1807392

CAS Contract

Project Name <i>Nassau West</i>		Project Number <i>KQ-2018-10-08-12</i>		ANALYSIS REQUESTED (Include Method Number and Container Preservative)																
Project Manager <i>J P. Lewis</i>		Email Address <i>DEP. Overflow@dep.state.fl.us</i>		PRESERVATIVE																
Company/Address <i>8800 Baymeadows Way W Suite 100 Jax FL 32256</i>				NUMBER OF CONTAINERS <i>5</i>	J1807392 Florida DEP Nassau West 											5 Preservative Key 0. NONE 1. HCL 2. HNO ₃ 3. H ₂ SO ₄ 4. NaOH 5. Zn. Acetate 6. MeOH 7. NaHSO ₄ 8. Other _____				
Phone # <i>904-256-1700</i>		FAX #																		
Sampler's Signature <i>B. Lewis</i>		Sampler's Printed Name <i>Brian Lewis</i>																		
CLIENT SAMPLE ID	LAB ID	SAMPLING DATE	TIME	MATRIX	REMARKS/ ALTERNATE DESCRIPTION															
<i>19010023</i>		<i>10/18/18</i>	<i>745</i>	<i>SW</i>																
<i>19010018</i>		<i>10/15</i>	<i>6</i>																	
SPECIAL INSTRUCTIONS/COMMENTS					TURNAROUND REQUIREMENTS ____ RUSH (SURCHARGES APPLY) ☒ STANDARD REQUESTED FAX DATE _____ REQUESTED REPORT DATE _____				REPORT REQUIREMENTS ____ I. Results Only ____ II. Results + QC Summaries (LCS, DUP, MS/MSD as required) ____ III. Results + QC and Calibration Summaries ____ IV. Data Validation Report with Raw Data ____ V. Specialized Forms / Custom Report Edata ____ Yes ____ No				INVOICE INFORMATION ____ PO # ____ BILL TO: ____							
See QAPP ☐					CUSTODY SEALS: Y N															
RELINQUISHED BY		RECEIVED BY		RELINQUISHED BY		RECEIVED BY		RELINQUISHED BY		RECEIVED BY		RELINQUISHED BY		RECEIVED BY						
Signature <i>B. Lewis</i>		Signature <i>Valerie Spears</i>		Signature		Signature		Signature		Signature		Signature		Signature						
Printed Name <i>Brian Lewis</i>		Printed Name <i>Valerie Spears</i>		Printed Name		Printed Name		Printed Name		Printed Name		Printed Name		Printed Name						
Firm <i>FDEP DEAR NEP</i>		Firm <i>ALS</i>		Firm		Firm		Firm		Firm		Firm		Firm						
Date/Time <i>10/18/18 1155</i>		Date/Time <i>10/18/18 1158</i>		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time		Date/Time						



Miscellaneous Forms

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FLORIDA DEP DATA QUALIFIERS

- B Results based upon colony counts outside the acceptable range.
- D Measurement was made in the field.
- H Value based on field kit determination; results may not be accurate.
- I The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.
- J Estimated value (one of the following reasons is discussed in the project case narrative).
1. The result may be inaccurate because the surrogate recovery limits have been exceeded.
 2. No known quality control criteria exists for the component.
 3. The reported value failed to meet the established quality control criteria for either precision or accuracy.
 4. The sample matrix interfered with the ability to make any accurate determination (e.g., primary and confirmation results show greater than 40% RPD).
 5. The data is questionable because of improper laboratory or field protocols (e.g., GC/MS Tune did not meet method criteria).
- K Off scale low. The value is less than the lowest calibration standard but greater than the method reporting limit (MRL).
- L Off scale high. The analyte is above the upper limit of the linear calibration range.
- M The MDL/MRL has been elevated because the analyte could not be accurately quantified due to matrix interference.
- N Presumptive evidence of the analyte. Confirmation was not performed.
- Q Sample held beyond the accepted holding time.
- T Value reported is less than the laboratory method detection limit. The value is reported for informational purposes only.
- U Indicates that the compound was analyzed for but not detected.
- V Indicates that the analyte was detected in both the sample and the associated method blank.
- Y The laboratory analysis was from an improperly preserved sample.
- Z Too many colonies were present (TNTC). The numeric value represents the filtration volume.



Jacksonville Lab ID # for State Certifications¹

Agency	Number	Expiration Date
Department of Defense	66206	6/30/2020
Florida Department of Health	E82502	6/30/2019
Georgia Department of Natural Resources	958	6/30/2019
Kentucky Division of Waste Management	123042	6/30/2019
Louisiana Department of Environmental Quality	02086	6/30/2019
Maine Department of Health and Human Services	2017003	2/3/2019
North Carolina Department of Environment and Natural Resources	527	12/31/2018
South Carolina Department of Health and Environmental Control	96021001	6/30/2018
Texas Commission on Environmental Quality	T104704197-18-10	5/31/2019
Virginia Environmental Accreditation Program	460191	12/14/2018

¹ Analyses were performed according to our laboratory's NELAP-approved quality assurance program and any applicable state or agency requirements. The test results meet requirements of the current NELAP/TNI standards or state or agency requirements, where applicable, except as noted in the laboratory case narrative provided. For a specific list of accredited analytes, refer to <http://www.alsglobal.com/en/Our-Services/Life-Sciences/Environmental/Downloads/North-America-Downloads>



ACRONYMS

ASTM	American Society for Testing and Materials
A2LA	American Association for Laboratory Accreditation
CARB	California Air Resources Board
CAS Number	Chemical Abstract Service registry Number
CFC	Chlorofluorocarbon
CFU	Colony-Forming Unit
DEC	Department of Environmental Conservation
DEQ	Department of Environmental Quality
DHS	Department of Health Services
DOE	Department of Ecology
DOH	Department of Health
EPA	U. S. Environmental Protection Agency
ELAP	Environmental Laboratory Accreditation Program
GC	Gas Chromatography
GC/MS	Gas Chromatography/Mass Spectrometry
LUFT	Leaking Underground Fuel Tank
M	Modified
MCL	Maximum Contaminant Level is the highest permissible concentration of a substance allowed in drinking water as established by the USEPA.
MDL	Method Detection Limit
MPN	Most Probable Number
MRL	Method Reporting Limit
NA	Not Applicable
NC	Not Calculated
NCASI	National Council of the Paper Industry for Air and Stream Improvement
ND	Not Detected
NIOSH	National Institute for Occupational Safety and Health
PQL	Practical Quantitation Limit
RCRA	Resource Conservation and Recovery Act
SIM	Selected Ion Monitoring
TPH	Total Petroleum Hydrocarbons
tr	Trace level is the concentration of an analyte that is less than the PQL but greater than or equal to the MDL.

ALS Group USA, Corp.

dba ALS Environmental

Analyst Summary report

Client: Florida DEP
Project: Nassau West/RQ-2018-10-08-12

Service Request: J1807392

Sample Name: 19010023
Lab Code: J1807392-001
Sample Matrix: Water

Date Collected: 10/18/18
Date Received: 10/18/18

Analysis Method
SM 9223 B

Extracted/Digested By

Analyzed By
ALANE

Sample Name: 19010018
Lab Code: J1807392-002
Sample Matrix: Water

Date Collected: 10/18/18
Date Received: 10/18/18

Analysis Method
SM 9223 B

Extracted/Digested By

Analyzed By
ALANE



Sample Results

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Microbiology

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dba ALS Environmental

Analytical Report

Client: Florida DEP
Project: Nassau West/RQ-2018-10-08-12
Sample Matrix: Water
Sample Name: 19010023
Lab Code: J1807392-001

Service Request: J1807392
Date Collected: 10/18/18 09:45
Date Received: 10/18/18 11:58
Basis: NA

General Chemistry Parameters

Analyte Name	Analysis Method	Result	Units	MRL	Dil.	Date Analyzed	Q
Escherichia coli	SM 9223 B	98	MPN/100mL	10	10	10/18/18 15:44	

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dba ALS Environmental

Analytical Report

Client: Florida DEP
Project: Nassau West/RQ-2018-10-08-12
Sample Matrix: Water
Sample Name: 19010018
Lab Code: J1807392-002

Service Request: J1807392
Date Collected: 10/18/18 10:35
Date Received: 10/18/18 11:58
Basis: NA

General Chemistry Parameters

Analyte Name	Analysis Method	Result	Units	MRL	Dil.	Date Analyzed	Q
Escherichia coli	SM 9223 B	96	MPN/100mL	10	10	10/18/18 15:44	



QC Summary Forms

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dba ALS Environmental

Analytical Report

Client: Florida DEP
Project: Nassau West/RQ-2018-10-08-12
Sample Matrix: Water
Sample Name: Method Blank
Lab Code: J1807392-MB

Service Request: J1807392
Date Collected: NA
Date Received: NA
Basis: NA

General Chemistry Parameters

Analyte Name	Analysis Method	Result	Units	MRL	Dil.	Date Analyzed	Q
Escherichia coli	SM 9223 B	1.0 U	MPN/100mL	1.0	1	10/18/18 15:44	