



*Ft. Myers Lab02
10090 Bavaria Rd.
Fort Myers, FL 33913
TEL: (239) 590-0337 FAX: (239) 590-0536
Website: www.sanderslabs.net*

June 08, 2018

Arielle Taylor-Manges
DEP-Bureau or Labs-Biology Section
Twin Towers Lab Complex A RM 216 6515
Tallahassee, FL 32399
TEL: (850) 245-8191
FAX:

RE: DEP Fecals

Order No.: 1806147

Dear Arielle Taylor-Manges:

Sanders Laboratories, Inc received 7 sample(s) on 6/5/2018 for the analyses presented in the following report.

These pages may include, but are not limited to: Analytical Data, Chains of Custodies, Subcontracted Data and Case Narratives.

Reports are archived for a minimum of 5 years. Copies of reports are available for a fee of \$50.00. Copies will be provided within 2 weeks of the time of the request. Laboratory PQL's are available upon request.

Test results meet all the requirements of the NELAP standards, unless otherwise noted.
Nokomis Certificate # E84380 Fort Myers Certificate # E85457

A statement of estimated uncertainty of results is available upon request.
Laboratory report shall not be reproduced except in full, without the written approval of Sanders Laboratories.

Sanders Laboratories follows DEP standard operating procedures for field sampling, unless otherwise noted.

A handwritten signature in blue ink, appearing to read "Katie", with a stylized flourish extending from the end.

Katie Strothman
Laboratory Director



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Definition Only

WO#: **1806147**
Date: **6/8/2018**

Definitions:

B: Results based upon colony counts outside the acceptable range.

G: Sample value indicates that the analyte was detected at or above the method detection limit in both the sample and the associated field blank, equipment blank, or trip blank, and the blank value was greater than 10% of the associated sample value. The value in the blank shall not be subtracted from associated samples.

I: The reported value is greater than or equal to the laboratory MDL but less than the laboratory PQL.

J: Estimated Value.

J7: Excessive amounts of Sodium Sulfite used to dechlorinate the sample due to high levels of chlorine present.

K: Off scale low, actual value is known to be less than the value given.

L: Off scale high, actual value is known to be greater than the value given.

NC: Not Certified. Parameter was ran but is not covered under laboratory accredited scopes.

Q: Sample held beyond acceptable holding time.

U: The compound was analyzed for, but not detected.

V: Indicates that the analyte was detected at or above the MDL in both the sample and the associated method blank and the value of 10 times the blank value was equal to or greater than the associated sample value.

Y: The laboratory analysis was from an improperly preserved sample.

Z: Too many colonies were present for accurate counting.

Original



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Analytical Report

(continuous)

WO#: 1806147

Date Reported: 6/8/2018

CLIENT: DEP-Bureau or Labs-Biology Section

Lab Order: 1806147

Project: DEP Fecals

Lab ID: 1806147-001

Collection Date: 6/5/2018 10:00:00 AM

Client Sample ID: G3SD0067

Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG

A9223B

Analyst: TC

Escherichia Coli	39.9	1.00		MPN/100mL	1	6/5/2018 4:40:00 PM
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Lab ID: 1806147-002

Collection Date: 6/5/2018 11:10:00 AM

Client Sample ID: G3SD0095

Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG

A9223B

Analyst: TC

Escherichia Coli	111	1.00		MPN/100mL	1	6/5/2018 4:40:00 PM
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Lab ID: 1806147-003

Collection Date: 6/5/2018 11:55:00 AM

Client Sample ID: G3SD0097

Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG

A9223B

Analyst: TC

Escherichia Coli	111	1.00		MPN/100mL	1	6/5/2018 4:40:00 PM
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Qualifiers:	H	Holding times for preparation or analysis exceeded	M	Manual Integration used to determine area response
	ND	Not Detected at the Reporting Limit	PL	Permit Limit
	RL	Reporting Detection Limit	U	Samples with CalcVal < MDL
	W	Sample container temperature is out of limit as specified at testcode		



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Analytical Report

(continuous)

WO#: 1806147

Date Reported: 6/8/2018

CLIENT:	DEP-Bureau or Labs-Biology Section	Lab Order:	1806147
Project:	DEP Fecals		

Lab ID: 1806147-004 Collection Date: 6/5/2018 12:35:00 PM

Client Sample ID: G3SD0096 Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG A9223B Analyst: TC

Escherichia Coli	77.6	1.00		MPN/100mL	1	6/5/2018 4:40:00 PM
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Lab ID: 1806147-005 Collection Date: 6/5/2018 1:05:00 PM

Client Sample ID: G3SD0011 Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG A9223B Analyst: TC

Escherichia Coli	72.3	1.00		MPN/100mL	1	6/5/2018 4:40:00 PM
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Lab ID: 1806147-006 Collection Date: 6/5/2018 1:50:00 PM

Client Sample ID: G3SD0104 Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG A9223B Analyst: TC

Escherichia Coli	980	1.00		MPN/100mL	1	6/5/2018 4:40:00 PM
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Qualifiers:	H	Holding times for preparation or analysis exceeded	M	Manual Integration used to determine area response
	ND	Not Detected at the Reporting Limit	PL	Permit Limit
	RL	Reporting Detection Limit	U	Samples with CalcVal < MDL
	W	Sample container temperature is out of limit as specified at testcode		



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Analytical Report

(continuous)

WO#: 1806147

Date Reported: 6/8/2018

CLIENT: DEP-Bureau or Labs-Biology Section

Lab Order: 1806147

Project: DEP Fecals

Lab ID: 1806147-007

Collection Date: 6/5/2018 2:20:00 PM

Client Sample ID: G3SD0131

Matrix: AQUEOUS

Analyses	Result	MDL	Qual	Units	DF	Date Analyzed
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TOTAL COLIFORM MMO-MUG

A9223B

Analyst: TC

Escherichia Coli	146	1.00		MPN/100mL	1	6/5/2018 4:40:00 PM
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Qualifiers:	H	Holding times for preparation or analysis exceeded	M	Manual Integration used to determine area response
	ND	Not Detected at the Reporting Limit	PL	Permit Limit
	RL	Reporting Detection Limit	U	Samples with CalcVal < MDL
	W	Sample container temperature is out of limit as specified at testcode		



CHAIN OF CUSTODY RECORD

Project #
(Lab Use Only)

1806147

Report To: dep-Overflowmicro@dep.state.fl.us

Project Name: PEACE RIVER

Project Location: CHARLOTTE, DESOTO CO.

Customer Type: FL DEP S ROL

Kit #: Client Containers

Requested Due Date:

ent FDEP
 Address 2600 Blair Stone Rd.
 Tallahassee, FL 32399
 Phone 850-245-8085

Bill to: Carina Tull

P.O. # Lab #039

Preservative: HCL = H, HNO₃ = N, Na₂S₂O₃ = ST
 H₂SO₄ = S, NaOH = SH, NH₄Cl = NH

Sampled By (PRINT)

MARYANN DUGAN

Sampler Signature

Maryann Dugan

Sample ID # (Lab Use Only)	Analysis Requested												Sample ID # (Lab Use Only)
	SM9223B	E Coli											
Sample Description	Date	Time	Type	H	O	S							
G3SD0067 - PRAIRIE CREEK @ WASHINGTON LOOP	6/5/18	1000	G12B		X								1A
G3SD0095 - MYRTLE SLOUGH @ CULVERT PINE ISLAND	6/5/18	1110	G12B		X								2A
G3SD0097 - MYRTLE SLOUGH @ 31	6/5/18	1155	G12B		X								3A
G3SD0096 - HOG BAY @ CR 763	6/5/18	1235	G12B		X								4A
G3SD0011 - HAWTHORNE CREEK @ REYNOLDS ST	6/5/18	1305	G12B		X								5A
G3SD0104 - PEACE RIVER RUNOFF TO PEACE RIVER	6/5/18	1350	G12B		X								6A
G3SD0131 - BOBCT CREEK IN PRESERVE EAST	6/5/18	1420	G12B		X								7A

File Lot #	Relinquished By/Affiliation	Date	Time	Accepted By/Affiliation	Date	Time
RQ-2018-06-11-36	Maryann Dugan	6/5/18			6/5/18	1605
Samples Are Ambient Water	Client Initial: FL DEP S ROL					
E. Coli by Quanti Tray	Samples On Ice					
	Yes No					

1050 Endeavor Ct, Nokomis, FL 34275-3623 (941) 488-8103 fax(941) 484-6774

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Form #: RCF -02 Approved by: KS 7/11/2016

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