

29 HAZEN DR CONCORD NH 03302 Phone: (603) 271-2994 Fax:

ANALYTICAL RESULTS

Batch ID/Form: B400349 - TOTAL COLIFORM RULE						Submitting Lab ID	: 3000		
PWS ID/Name: 1193030 - DEER MEADOWS - HOPKINTON						Report Date	01/25/2024		
Collector: DAVE	ctor: DAVE PRICE		Phone: 603-746-3600			Collect Date: 01/23/2024 10:05:00			
Lab Sample ID: Sample Location ID: Description:	B400349001 001 LOT 10	Matrix: WATER Sample Type: ROUTINE-SAMPLE			Compliance Period	Received: 01/23/2024 10:45:00 Compliance Period: JAN 2024 Receipt Temp.: 7 C			
Analyte	Results	Units	RDL	DF	Prepared Date	Analysis Date	Analyte Code	Analyst	Qual.
Analytical Method:	9223B	Analyzing Lab: 3000-NEW HAMPSHIRE DHHS PUBLIC HEALTH LABORATORIES							
ESCHERICHIA COLI	ABSENT	P-A/100ML			01/23/2024 13:46:00	01/24/2024 09:49:00	2525		
TOTAL COLIFORMS	ABSENT	P-A/100ML			01/23/2024 13:46:00	01/24/2024 09:49:00	2500		

This report is derived from the original 'Report of Laboratory Analysis' and is not intended as a replacement.