



Massachusetts Department of Environmental Protection - Drinking Water Program

B

Bacteriological Report

PWS ID #: 2032000 PWS Name: Blackstone Water Department City/Town: Blackstone Class: COM NTNC TNC

Primary Lab MA Cert.#: M-C-T008 Primary Lab Name: Microbac Laboratories, Inc. - Dayville Subcontracted?(Y/N): N

Analysis Lab MA Cert.#: M-C-T008 Analysis Lab: Microbac Laboratories, Inc. - Dayville

Original Report Resubmitted Report Confirmation Report (1) Reason for Resubmission: Resample Reanalysis Report Correction

(2) Collection Date of Original Sample: Lab Sample Notes:

TC Method	E. Coli Method	Enterococci Method	Fecal Coliform	HPC Method
3 B (Colifert Quanti-Tray)-2004	3 B (Colifert Quanti-Tray)-2004			

Sample Type ^{1,3}	Location Code # ¹	DEP APPROVED SAMPLE SITE INFORMATION ¹				TOTAL COLIFORM RESULT ^{4,5}	E. COLI or FECAL RESULT ^{4,5}	CHLORINE RESULT ^{4,5} mg/L	HPC RESULT # cfu/ml	COLLECTION		ANALYSIS		COLLECTED BY	LAB SAMPLE ID #
		DEP Approved SAMPLE LOCATION	Well #	Street	Treated					DATE	TIME	DATE	TIME		
RW	RW-08G	Well #8 Glenside Drive				<1/100ml	<1/100ml			06/05/2023	11:00	06/05/2023	16:35	James Sullivan	D3F0432-01
RW	RW-02G	Well #2 Summer Street				<1/100ml	<1/100ml			06/05/2023	11:30	06/05/2023	16:35	James Sullivan	D3F0432-02
PT	02G	Well #2 Summer Street Treated				<1/100ml	<1/100ml			06/05/2023	11:30	06/05/2023	16:35	James Sullivan	D3F0432-03
RW	RW-07G	Well #7 Summer Street				<1/100ml	<1/100ml			06/05/2023	11:15	06/05/2023	16:35	James Sullivan	D3F0432-04
RW	RW-06G	Well #6 Elm Street				<1/100ml	<1/100ml			06/05/2023	10:40	06/05/2023	16:35	James Sullivan	D3F0432-05
RW	RW-04G	Well #4 Elm Street				<1/100ml	<1/100ml			06/05/2023	10:10	06/05/2023	16:35	James Sullivan	D3F0432-06
RW	RW-05G	Well #5 Elm Street				<1/100ml	<1/100ml			06/05/2023	10:25	06/05/2023	16:35	James Sullivan	D3F0432-07
PT	M-6	WTF Elm Street (Blended RS)				<1/100ml	<1/100ml			06/05/2023	11:55	06/05/2023	16:35	James Sullivan	D3F0432-08
RS	001	Town Barn 51 Elm Street				<1/100ml	<1/100ml			06/05/2023	08:45	06/05/2023	16:35	James Sullivan	D3F0432-09

¹ DEP Sample Type, Location Code#, and DEP Approved Sample Site Location must correspond to the sample information on your DEP Total Coliform Sampling Plan

² SWTR systems: HPC samples shall be taken at the same distribution sites and at the same time as total coliform, whenever chlorine residual is not detected at the sample site.

³ Sample Type: RS-Routine Distribution Sample, RO-Original Site Repeat, UR-Upstream Repeat, DR-Downstream Repeat, AR-Additional Repeat, RW-Raw Water, PT-Plant Tap, SS-Special Sample

⁴ Report as #100mL P (present), A (absent), or Too Numerous To Count: TNTC-(invalid) or TNCT-P (present).

⁵ Collect appropriate number of repeat samples within 24 hours of laboratory notification for coliform-positive or invalid samples. Notify DEP of any routine or repeat E. Coli or fecal positive results by the end of the business day.

Laboratory Authorized Signature and Date: *B. Wainik* 06/07/2023

DEP Review Status: Accepted Disapproved Review Comments:



Massachusetts Department of Environmental Protection - Drinking Water Program

B

Bacteriological Report

I PWS INFORMATION: Refer to your DEP Coliform Sampling Plan to help complete the PWS Information and DEP Approved Sample Site Information sections below.

PWS ID #: 2032000 PWS Name: Blackstone Water Department City/Town: Blackstone Class: COM [X] NTNC [] TNC []

II ANALYTICAL INFORMATION: Refer to your DEP approved lab certificate for proper lab MA Public Water Treatment Methods.

Primary Lab MA Cert.#: M-CT008 Primary Lab Name: Microbac Laboratories, Inc. - Dayville Subcontracted?(Y/N): N

Analysis Lab MA Cert.#: M-CT008 Analysis Lab: Microbac Laboratories, Inc. - Dayville

[X] Original Report [] Resubmitted Report [] Confirmation Report [] Reason for Resubmission: [] Resample [] Reanalysis [] Report Correction

TC Method: E. Coli Method Enterococci Method HPC Method

3 B (Coliort Quanti-Tray)-2004 3 B (Coliort Quanti-Tray)-2004

Table with columns: Sample Type, Location Code #, DEP Approved Sample Location, Total Coliform Result, E. Coli or Fecal Result, Chlorine Result, HPC Result, Collection Date, Time, Analysis Date, Time, Collected By, Lab Sample ID #.

1 DEP Sample Type, Location Code#, and DEP Approved Sample Site Location must correspond to the sample information on your DEP Total Coliform Sampling Plan. 2 SWTR systems: HPC samples shall be taken at the same distribution sites and at the same time as total coliform, whenever chlorine residual is not detected at the sample site.

Laboratory Authorized Signature and Date: [Signature] 06/15/2023

DEP Review Status: [] Accepted [] Disapproved [] Review Comments: