



Bacteriological Report

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 NTNC TNC

ANALYTICAL INFORMATION Refer to your MASSDEP State Laboratory for information on acceptable MA Certs and certified 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**

Original Report Resubmitted Report Confirmation Report (1) Reason for Resubmission: Resample Reanalysis Report Correction (2) Collection Date of Original Sample:

Coliform Method	E. Coli Method	Enterococci Method	Fecal Coliform	HPG Method	Lab Sample Notes
SM 9223 B (Colliert Quanti-Tray)-2004	SM 9223 B (Colliert Quanti-Tray)-2004				

DEP APPROVED SAMPLE SITE INFORMATION			TOTAL COLIFORM RESULT	ENTEROCOCCI RESULT	UNDOUBTEDLY FECALE RESULT	HPG RESULT	POSITION	ANALYSIS	COLLECTOR	LAB		
Sample Type	Location Code#	DEP Approved Sample Location					DATE	TIME				
RW	RW-08G	Well #8 Glenside Drive	<1/100ml	<1/100ml			10/06/2025	08:17	10/06/2025	18:39	Bruce Bernier	D5J0737-01
RW	RW-02G	Well #2 Summer Street	2/100ml	<1/100ml			10/06/2025	07:57	10/06/2025	18:39	Bruce Bernier	D5J0737-02
PT	02G	Well #2 Summer Street Treated	<1/100ml	<1/100ml			10/06/2025	07:57	10/06/2025	18:39	Bruce Bernier	D5J0737-03
RW	RW-07G	Well #7 Summer Street	<1/100ml	<1/100ml			10/06/2025	08:07	10/06/2025	18:39	Bruce Bernier	D5J0737-04
RW	RW-06G	Well #6 Elm Street	1/100ml	<1/100ml			10/06/2025	07:47	10/06/2025	18:39	Bruce Bernier	D5J0737-05
RW	RW-04G	Well #4 Elm Street	<1/100ml	<1/100ml			10/06/2025	07:30	10/06/2025	18:39	Bruce Bernier	D5J0737-06
RW	RW-05G	Well #5 Elm Street	<1/100ml	<1/100ml			10/06/2025	07:40	10/06/2025	18:39	Bruce Bernier	D5J0737-07
PT	MULT 6	WTF Elm Street (Blended RS)	<1/100ml	<1/100ml			10/06/2025	08:30	10/06/2025	18:39	Bruce Bernier	D5J0737-08
RW	RW-09G	Well #9 Glenside Drive	<1/100ml	<1/100ml			10/06/2025	08:17	10/06/2025	18:39	Bruce Bernier	D5J0737-09

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: HPG 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-I (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. Wain* 10/08/2025

DEP Review Status: Accepted Disapproved Review Comments:

