PDC Laboratories, Inc.

PROFESSIONAL • DEPENDABLE • COMMITTED

August 13, 2021

John McBride
ERH Enterprises, Inc.
PO Box 337
Westville, IL 61883

RE: IL0755200

Dear John McBride:

Please find enclosed the analytical results for the **5** sample(s) the laboratory received on **8/11/21 9:00 am** and logged in under work order **EH02402**. All testing is performed according to our current TNI accreditations unless otherwise noted . This report cannot be reproduced, except in full, without the written permission of PDC Laboratories, Inc.

If you have any questions regarding your report, please contact your project manager. Quality and timely data is of the utmost importance to us.

PDC Laboratories, Inc. appreciates the opportunity to provide you with analytical expertise. We are always trying to improve our customer service and we welcome you to contact the Director of Client Services, Lisa Grant, with any feedback you have about your experience with our laboratory at 309-683-1764 or lgrant@pdclab.com.

Sincerely,

Heather Weekley

Microbiology Department Manager
(309) 683-1766
hweekley@pdclab.com

NELAP ACCREDITED TNI LABORATORY

ANALYTICAL RESULTS

Sample: EH02402-01
Name: WL47579 - WELL 1 (47579)
Site: WL47579
Facility: ERH Enterprises, Inc.
Facility #: IL0755200
Sampled: 08/10/21 15:30
Sampler: Ron Knapp

Residual Chlorine: Free = NA Total = NA
Sample Purpose: RT
Replacement Indicator: NA
Original Sample No: NA
Rejection Reason: NA
Comment: NA

Parameter	Result	Unit	Qualifier	Prepped	Analyzed	Analyst	Method
Microbiology - PIA							
Total coliform bacteria	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
E. coli	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
Opinion (Coliform)	Satisfactory			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*

Sample: EH02402-02
Name: WL47580 - WELL 2 (47580)
Site: WL47580
Facility: ERH Enterprises, Inc.
Facility #: IL0755200
Sampled: 08/10/21 15:45
Sampler: Ron Knapp

Residual Chlorine: Free = NA Total = NA
Sample Purpose: RT
Replacement Indicator: NA
Original Sample No: NA
Rejection Reason: NA
Comment: NA

Parameter	Result	Unit	Qualifier	Prepped	Analyzed	Analyst	Method
Microbiology - PIA							
Total coliform bacteria	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
E. coli	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
Opinion (Coliform)	Satisfactory			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*

Sample: EH02402-03
Name: WL01883 - WELL 3 (01883)
Site: WL01883
Facility: ERH Enterprises, Inc.
Facility #: IL0755200
Sampled: 08/10/21 16:00
Sampler: Ron Knapp

Residual Chlorine: Free = NA Total = NA
Sample Purpose: RT
Replacement Indicator: NA
Original Sample No: NA
Rejection Reason: NA
Comment: NA

Parameter	Result	Unit	Qualifier	Prepped	Analyzed	Analyst	Method
Microbiology - PIA							
Total coliform bacteria	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
E. coli	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
Opinion (Coliform)	Satisfactory			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*

ANALYTICAL RESULTS

Sample: EH02402-04
Name: TP01 - TP 01-TREATMENT PLANT
Site: TP01
Facility: ERH Enterprises, Inc.
Facility #: IL0755200
Sampled: 08/10/21 16:15
Sampler: Ron Knapp

Residual Chlorine: Free = 1.3 mg/L Total = NA
Sample Purpose: RT
Replacement Indicator: NA
Original Sample No: NA
Rejection Reason: NA
Comment: NA

Parameter	Result	Unit	Qualifier	Prepped	Analyzed	Analyst	Method
Microbiology - PIA							
Total coliform bacteria	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
E. coli	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
Opinion (Coliform)	Satisfactory			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*

Sample: EH02402-05
Name: 10004-03 - 115 COMANCHE TR-ALT
Site: 10004-03
Facility: ERH Enterprises, Inc.
Facility #: IL0755200
Sampled: 08/10/21 16:23
Sampler: Ron Knapp

Residual Chlorine: Free = 0.86 mg/L Total = NA
Sample Purpose: RT
Replacement Indicator: NA
Original Sample No: NA
Rejection Reason: NA
Comment: NA

Parameter	Result	Unit	Qualifier	Prepped	Analyzed	Analyst	Method
Microbiology - PIA							
Total coliform bacteria	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
E. coli	Absent			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*
Opinion (Coliform)	Satisfactory			08/11/21 11:40	08/12/21 08:50	SDW	SM 9223B*

NOTES

Specific method revisions used for analysis are available upon request.

Certifications

CHI - McHenry, IL
TNI Accreditation for Drinking Water, Wastewater, Fields of Testing through IL EPA Lab No. 100279
Illinois Department of Public Health Bacteriological Analysis in Drinking Water Approved Laboratory Registry No. 17556

PIA - Peoria, IL
TNI Accreditation for Drinking Water, Wastewater, Hazardous and Solid Wastes Fields of Testing through IL EPA Lab No. 100230
Illinois Department of Public Health Bacteriological Analysis in Drinking Water Approved Laboratory Registry No. 17553
Drinking Water Certifications: Iowa (240); Kansas (E-10338); Missouri (870)
Wastewater Certifications: Arkansas (88-0677); Iowa (240); Kansas (E-10338)
Hazardous/Solid Waste Certifications: Arkansas (88-0677); Iowa (240); Kansas (E-10338)

SPIL - Springfield, IL
TNI Accreditation for Drinking Water, Wastewater, Hazardous and Solid Waste Fields of Testing through IL EPA Lab No. 100323

SPMO - Springfield, MO
USEPA DMR-QA Program

STL - St. Louis, MO
TNI Accreditation for Wastewater, Hazardous and Solid Wastes Fields of Testing through KS Lab No. E-10389
TNI Accreditation for Wastewater, Hazardous, and Solid Waste Analysis through IL EPA No. 200080
Illinois Department of Public Health Bacteriological Analysis in Drinking Water Approved Laboratory Registry No. 171050
Missouri Department of Natural Resources
Microbiological Laboratory Service for Drinking Water

* Not a TNI accredited analyte

Heather Weekley

Certified by: Heather Weekley, Microbiology Department Manager

PDC Laboratories, Inc.

Phone: (800) 752-6651
Fax: (309) 692-9689
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Bacteria Chain of Custody Record

1. Public Water Supply Name: Lake Ingraham
2. Facility Number: 0755200
3. Surface Supply: ☐ Yes ☒ No
4. Report to:
Name: ERH Enterprise Email:
Address: Box 337
City: Westville State: IL Zip: 61883
5. Contact for Unsatisfactory Results:
Name: John McBride
Phone: 217-267-2331
6. Sampler Collector:
(Printed): Ron Knapp
Sampler's Signature: Ron Knapp
7. Date Collected: 8/10/21

Lab Use Only
Login #: EH02402 # of samples: 05
Logged by: DGW Date: 8/11/21

8. Sample Purpose:
☒ Routine - Presence/Absence (P/A)
☐ Boil Order (P/A)
☐ New Construction (P/A) No.:
☐ Repair/Maintenance (P/A)
☐ Other Reason: Check Sample
(circle one) P/A MF Q-Tray

☐ Repeat (failed sample) ☐ Replacement (expired, broken, etc.)
Original Sample No.:
Original Collection Date:

9. Bacteriological Samples

Bottle #	Sample Site # or Name (Address – Repeat Samples Only)	Sample Type R\D\F	Time Collected	Residual Chlorine Free	Residual Chlorine Total
10042	well #1	R	3:30 p.m.	N/A	
10043	well #2	R	3:45 p.m.	N/A	
10044	well #3	R	4:00 p.m.	N/A	
10045	tap #1 well house	F	4:15 p.m.	1.3	
10046	10004-03	D	4:23 p.m.	.86	

*Lab Use Only

*Colonies Read	*Total Coliform	*Fecal/ E. coli	*Opinion	*Laboratory Sample #

SAMPLES MUST REACH LAB WITHIN 24 HOURS AFTER COLLECTION (and be set within 30 hours)

Lab Use – IEPA Reporting Only

Person Notified: Start Date/Time Lab Cert (circle): IL17553(PIA) IL17556(CHI)
Date/Time Notified: Analysis Date/Time IL17592(SPIL) IL171050(STL) MO1050(STL)
Method (Circle): SM9223B (Colilert / Colilert – 18 / Colisure) | SM9222B | Other:

Relinquished By (Signature)	Date / Time	Received By (Signature)	Date / Time
Ron Knapp	8/11/21 10:30 a.m.		
Relinquished By (Signature)	Date / Time	Received By (Signature)	Date / Time
Relinquished By (Signature)	Date / Time	Received By (Signature)	Date 08/11/21 Time 0900

Kathryn Gray

COMMENTS (LAB USE ONLY)

NO ICE REQUIRED
PROPER BOTTLES RECEIVED IN GOOD CONDITION (Y OR N)
BOTTLES FILLED WITH ADEQUATE VOLUME (Y OR N)
SAMPLES RECEIVED WITHIN HOLD TIME(S) (Y OR N)
DATE AND TIME TAKEN FROM SAMPLE BOTTLE