Environmental Services Division

BROOKHAVEN
NATIONAL LABORATORY

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managed by Brookhaven Science Associates
for the U.S. Department of Energy

www.bnl.gov

November 8, 1999

Ms. Kathleen Newcomer
Suffolk County Department of Health Services
Drinking Water Supply Section
415 Oser Ave., Suite 3
Hauppauge, New York 11788

Dear Ms. Newcomer:

SUBJECT: Monthly Water Treatment Plant Reports
Reference: Suffolk County Minimum Monitoring Requirements for October 1999

In accordance with the requirements of the BNL Potable Water System Sampling Plan and the 1999 SCDHS Minimum Monitoring Requirements for the BNL Potable Water Supply, included please find the following attachments for your records:

Attachment I:	BNL Potable Water Monthly Operational and Bacteriological Reports for October 1999;
Attachment II:	October 1999 Biweekly Water Quality Monitoring Data for BNL Well Water Samples;
Attachment III:	1999 First Quarter Perchlorate Analyses for Well Water Samples.

All analytical results have been reviewed and have been found to be within New York State Department of Health Drinking Water Standards (NYSDOH DWS). Collection and analysis of these samples are performed in accordance with the guidelines of the SCDHS Community Water Supply Monitoring Requirements, and the BNL Potable Water System Sampling Plan. Routine monitoring samples are collected by Plant Engineering Division (PE) personnel using standard operating procedures and analyses are performed by a contractor laboratory using standard methods of analysis. All analytical results are reviewed and validated by Laboratory staff following EPA and NYSDEC guidelines. Quality assurance documentation for analyses performed is available from the Environmental Services Division (ESD) and PE Divisions. Based on this information, we believe the values contained in these reports are representative of the BNL potable water system.

Should there be any questions regarding this report or the analytical or operational data contained herein, please call either R. Lee (ESD) at (516)344-3148 or W. Chaloupka (PE) at (516)344-7136.

Sincerely,

E.A. Zimmerman
Division Manager
Environmental Services Division

EAF/RL:rt

cc: K. Brog w/o attachments
W. Chaloupka w/attachments
R. Lee w/attachments
E. Murphy w/attachments
P. Ponturo w/o attachments
L. Ross w/o attachments
R. Simeone w/attachments

EC4120.99

ATTACHMENT I

Brookhaven National Laboratory
Potable Water Supply

Monthly Bacteriological and Operational
Reports for October 1999

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : OCTOBER 1999

LOCATION: WATER TREATMENT PLANT

Source: Ground Water

Did an emergency occur in any part of the water system? yes____ no ✓

Does the system have a chlorination waiver? yes ____ no ✓

	CHLORINATION				pH	
	Treated	Liquid Sodium Hypochlorite		Free Cl2	Lime	Totalizer
Day of	Water	Wt of cyl. lbs.	Cl2 use	Residual	Sodium	Daily Totalizer
month	K Gals	60/135	per 24hrs	mg/l	Hydroxide	11764176
1	0	60/135	0	NR	NR	11764176
2	0					
3	0					
4	0	60/135	0	NR	NR	11764176
5	0	60/135	0	NR	NR	11764176
6	0	60/135	0	NR	NR	11764176
7	0	60/135	0	NR	NR	11764176
8	0	60/135	0	NR	NR	11764176
9	0					
10	0					
11	0	60/135	0	NR	NR	11764176
12	0	60/135	0	NR	NR	11764176
13	0	60/135	0	NR	NR	11764176
14	0	60/135	0	NR	NR	11764176
15	0	60/135	0	NR	NR	11764176
16	0					
17	0					
18	0	60/135	0	NR	NR	11764176
19	0	60/135	0	NR	NR	11764176
20	0	60/135	0	NR	NR	11764176
21	0	60/135	0	NR	NR	11764176
22	0	60/135	0	NR	NR	11764176
23	0					
24	0					
25	0	60/135	0	NR	NR	11764176
26	0	60/135	0	NR	NR	11764176
27	0	60/135	0	NR	NR	11764176
28	0	60/135	0	NR	NR	11764176
29	0	60/122	13	NR	NR	11764176
30	0					
31	0	60/110	12	NR	NR	11764176
TOT	0		25			
AVG	0.00		0.81	No. Days:	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes____ No ✓

If yes, check reason's below.

____ Actual number of samples fewer than required.

____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

____ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below.

____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

____ Positive E. Coli result followed by a positive total coliform repeat sample.

____ Positive total coliform result followed by a positive E. Coli repeat sample

Reported by: [signature]

Date 11-5-99

Title WATER SYSTEMS SUPERVISOR

Cert. # 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : OCTOBER 1999

LOCATION: WELL NO. 4

Source: Ground Water

Did an emergency occur in any part of the water system? yes____ no ✓

Does the system have a chlorination waiver? yes ____ no ✓

	CHLORINATION				pH	
	Treated	Liquid Sodium Hypochlorite		Free Cl2	Lime-	Totalizer
Day of	Water	Gallons	Cl2 use	Residual	Sodium	Daily Totalizer
month	K Gals	160	per 24hrs	mg/l	Hydroxide	1320378
1	350	160	0	NR	NR	1320728
2	0					
3	0					
4	0	160	0	NR	NR	1320728
5	0	160	0	NR	NR	1320728
6	0	160	0	NR	NR	1320728
7	0	160	0	NR	NR	1320728
8	2	160	0	NR	NR	1320730
9	0					
10	0					
11	0	160	0	NR	NR	1320730
12	0	160	0	NR	NR	1320730
13	0	160	0	NR	NR	1320730
14	0	160	0	NR	NR	1320730
15	0	160	0	NR	NR	1320730
16	0					
17	0					
18	0	160	0	NR	NR	1320730
19	0	160	0	NR	NR	1320730
20	0	160	0	NR	NR	1320730
21	0	160	0	NR	NR	1320730
22	0	160	0	NR	NR	1320730
23	0					
24	0					
25	0	160	0	NR	NR	1320730
26	0	160+55	0	NR	NR	1320730
27	0	215	0	NR	NR	1320730
28	0	215	0	NR	NR	1320730
29	456	212	3	NR	NR	1321186
30	0					
31	94	211	1	NR	NR	1321280
TOT	902		4			
AVG.	29.10		0.13	No. Days:	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes_____ No ✓

If yes, check reason's below.

____ Actual number of samples fewer than required.

____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

____ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below

____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

____ Positive E. Coli result followed by a positive total coliform repeat sample.

____ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: LaRosa

Date: 11-5-99

Title: WATER SYSTEMS SUPERVISOR

Cert # 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : OCTOBER 1999

LOCATION: WELL NO. 6

Source: Ground Water

Did an emergency occur in any part of the water system? yes____ no ✓

Does the system have a chlorination waiver? yes ____ no ✓

	CHLORINATION				pH	
	Treated	Liquid Sodium Hypochlorite		Free Cl2	_ Lime	Totalizer
Day of	Water	Gallons	Cl2 use	Residual	_ Sodium	Daily Totalizer
month	K Gals	103	per 24hrs	mg/l	Hydroxide	0
1	0	103	0	NR	NR	0
2	0					
3	0					
4	0	92	11	NR	NR	0
5	0	92	0	NR	NR	0
6	0	92	0	NR	NR	0
7	0	92	0	NR	NR	0
8	0	92	0	NR	NR	0
9	0					
10	0					
11	0	92	0	NR	NR	0
12	0	92	0	NR	NR	0
13	0	92	0	NR	NR	0
14	0	92	0	NR	NR	0
15	0	92	0	NR	NR	0
16	0					
17	0					
18	0	102	0	NR	NR	0
19	0	102	0	NR	NR	0
20	0		0	NR	NR	0
21	0	102	0	NR	NR	0
22	0	102	0	NR	NR	0
23	0					
24	0					
25	0	102-110	0	NR	NR	0
26	0	212	0	NR	NR	0
27	0	212	0	NR	NR	0
28	0	212	0	NR	NR	0
29	265	210	2	NR	NR	265
30	0					
31	502	195	15	NR	NR	767
TOT	767		28			0
AVG.	24 74		0 90	No Days.	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes_____ No ✓

If yes, check reason's below.

____ Actual number of samples fewer than required.

____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

____ Failure to analyze repeat samples

Does an MCL violation exist? NO

If yes, check reason(s) below.

____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month

____ Positive E. Coli result followed by a positive total coliform repeat sample.

____ Positive total coliform result followed by a positive E. Coli repeat sample

Reported by: J. Rose

Date 11-5-99

Title: WATER SYSTEMS SUPERVISOR

Cert. # : 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : OCTOBER 1999

LOCATION: WELL NO. 7

Source: Ground Water

Did an emergency occur in any part of the water system? yes____ no ✓

Does the system have a chlorination waiver? yes ____ no ✓

	CHLORINATION				pH	
	Treated	Liquid Sodium Hypochlorite		Free Cl2	_ Lime	Totalizer
Day of	Water	Gallons	Cl2 use	Residual	_ Sodium	Daily Totalizer
month	K Gals	100	per 24hrs	mg/l	Hydroxide	0
1	0	98	2	NR	NR	0
2	0					
3	0					
4	0	98	0	NR	NR	0
5	0	98	0	NR	NR	0
6	0	98	0	NR	NR	0
7	0	98	0	NR	NR	0
8	13	98	0	NR	NR	13
9	0					
10	0					
11	0	98	0	NR	NR	0
12	0	98	0	NR	NR	0
13	0	98	0	NR	NR	0
14	0	98	0	NR	NR	0
15	0	98	0	NR	NR	0
16	0					
17	0					
18	0	98	0	NR	NR	0
19	0	98	0	NR	NR	0
20	0	98	0	NR	NR	0
21	0	98	0	NR	NR	0
22	0	98	0	NR	NR	0
23	0					
24	0					
25	0	98 + 110	0	NR	NR	0
26	0	208	0	NR	NR	0
27	0	208	0	NR	NR	0
28	0	208	0	NR	NR	0
29	135	205	3	NR	NR	135
30	0					
31	380	198	7	NR	NR	515
TOT	528		12			0
AVG.	17.03		0.39	No. Days:	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes____ No ✓

If yes, check reason's below.

____ Actual number of samples fewer than required.

____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

____ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below.

____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

____ Positive E. Coli result followed by a positive total coliform repeat sample.

____ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: D O Rose

Date: 11-5-99

Title: WATER SYSTEMS SUPERVISOR

Cert. # : 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : OCTOBER 1999

LOCATION: WELL NO. 10

Source: Ground Water

Did an emergency occur in any part of the water system? yes____ no ✓

Does the system have a chlorination waiver? yes ____ no ✓

	CHLORINATION				pH	
	Treated	Liquid Sodium Hypochlorite		Free Cl2	_ Lime	Totalizer
Day of	Water	Gallons	Cl2 use	Residual	_ Sodium	Daily Totalizer
month	K Gals	180	per 24hrs	mg/l	Hydroxide	727130
1	1,144	172	8	0.66	8.2	728274
2	0					
3	0					
4	3,726	150	22	0.63	8.1	732000
5	111	150	0	0.1	7.7	732111
6	2	150	0	NR	NR	732113
7	37	150	0	NR	NR	732150
8	0	150	0	NR	NR	732150
9	0					
10	0					
11	44	150	0	NR	NR	732194
12	0	150	0	NR	NR	732194
13	0	150	0	NR	NR	732194
14	0	150	0	NR	NR	732194
15	0	150	0	NR	NR	732194
16	0					
17	0					
18	0	150	0	NR	NR	732194
19	129	148	2	0 66	7.8	732323
20	8	148	0	NR	NR	732331
21	0	148	0	7.8	0 63	732331
22	3	148	0	NR	NR	732334
23	0					
24	0					
25	0	148	0	NR	NR	732334
26	0	148	0	NR	NR	732334
27	3	148	0	NR	NR	732337
28	0	148	0	NR	NR	732337
29	0	148	0	NR	NR	732337
30	0					
31	0	148	0	NR	NR	732337
TOT	5,207		32			0
AVG.	167.97		1.03	No. Days:	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes_____ No ✓

If yes, check reason's below.

____ Actual number of samples fewer than required.

____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

____ Failure to analyze repeat samples

Does an MCL violation exist? NO

If yes, check reason(s) below

____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

____ Positive E. Coli result followed by a positive total coliform repeat sample.

____ Positive total coliform result followed by a positive E. Coli repeat sample

Reported by: J C Rose

Date: 11-5-99

Title: WATER SYSTEMS SUPERVISOR

Cert. # 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : OCTOBER 1999

LOCATION: WELL NO. 11

Source: Ground Water

Did an emergency occur in any part of the water system? yes____ no ✓

Does the system have a chlorination waiver? yes ____ no ✓

	CHLORINATION				pH	
	Treated	Liquid Sodium Hypochlorite		Free Cl2	Lime	Totalizer
Day of	Water	Gallons	Cl2 use	Residual	Sodium	Daily Totalizer
month	K Gals	100	per 24hrs	mg/l	Hydroxide	241698
1	22	100	0	NR	NR	241720
2	0					
3	0					
4	4	100	0	NR	NR	241724
5	1,058	90	10	0.78	7.7	242782
6	1,065	73	17	0.8	8	243847
7	1,041	65	8	NR	NR	244888
8	0	65	0	NR	NR	244888
9	0					
10	0					
11	43	63	2	NR	NR	244931
12	0	63	0	NR	NR	244931
13	0	63	0	NR	NR	244931
14	0	63	0	NR	NR	244931
15	0	63	0	NR	NR	244931
16	0					
17	0					
18	0	63	0	NR	NR	244931
19	98	61	2	0.49	7.5	245029
20	9	61	0	NR	NR	245038
21	189	60	1	7.7	0.4	245227
22	164	60	0	NR	NR	245391
23	0					
24	0					
25	0	60	0	NR	NR	245391
26	203	58	2	NR	NR	245594
27	1	58	0	NR	NR	245595
28	0	58	0	NR	NR	245595
29	0	58	0	NR	NR	245595
30	0					
31	0	58	0	NR	NR	245595
TOT	3,897		42			
AVG	125.71		1.35	No. Days:	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes____ No ✓

If yes, check reason's below.

____ Actual number of samples fewer than required.

____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

____ Failure to analyze repeat samples.

Does an MCL violation exist? NO

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____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

____ Positive E. Coli result followed by a positive total coliform repeat sample.

____ Positive total coliform result followed by a positive E. Coli repeat sample

Reported by: S O Ross

Date 11-5-99

Title: WATER SYSTEMS SUPERVISOR

Cert. # : 05650

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : OCTOBER 1999

LOCATION: WELL NO. 12

Source: Ground Water

Did an emergency occur in any part of the water system? yes____ no ✓

Does the system have a chlorination waiver? yes ____ no ✓

	CHLORINATION				pH	
	Treated	Liquid Sodium Hypochlorite		Free Cl2	__ Lime	Totalizer
Day of	Water	Gallons	Cl2 use	Residual	__ Sodium	Daily Totalizer
month	K Gals	204	per 24hrs	mg/l	Hydroxide	37456
1	0	204	0	NR	NR	37456
2	0					
3	0					
4	0	204	0	NR	NR	37456
5	0	204	0	NR	NR	37456
6	4	204	0	NR	NR	37460
7	45	204	0	NR	NR	37505
8	1,099	192	12	0.75	9	38604
9	0					
10	0					
11	3,399	170	22	0 8	7.6	42003
12	1,189	160	10	0 62	7 2	43192
13	1,421	150	10	8.1	8.4	44613
14	1,432	140	10	0 53	8.8	46045
15	1,388	130	10	0.63	8.1	47433
16	0					
17	0					
18	3,953	100	30	0 55	8 5	51386
19	1,236	90	10	0 65	7.7	52622
20	1,528	75	15	0.5	7.8	54150
21	1,518	60 + 150	15	0.51	8	55668
22	1,510	195	15	0.53	7.5	57178
23	0					
24	0					
25	4,578	155	40	0.77	7 5	61756
26	1,546	140	15	0.8	8	63302
27	1,480	130	10	0.57	7.9	64782
28	1,491	125	5	0.61	8	66273
29	1,297	103	22	0.75	8	67570
30	0					
31	4,038	70	33	0.5	7.8	71608
TOT	34,152		284			
AVG.	1101.68		9.16	No Days:	31	

Population Served 3,500

Number of routine samples 4

(Must collect a minimum of 5 routine samples the month following a repeat sample collection)

Number of actual routine samples 7

Does a M&AR violation exist? yes_____ No ✓

If yes, check reason's below.

____ Actual number of samples fewer than required.

____ Failure to analyze for E. Coli if there was a positive result for total coliform from routine, repeat of high turbidity sample.

____ Failure to analyze repeat samples.

Does an MCL violation exist? NO

If yes, check reason(s) below.

____ Two or more positive total coliform samples for systems collecting 40 or more samples (routine, repeat or hiturb) per month.

____ Positive E. Coli result followed by a positive total coliform repeat sample

____ Positive total coliform result followed by a positive E. Coli repeat sample.

Reported by: JO Ross

Date: 11-8-99

Title WATER SYSTEMS SUPERVISOR

Cert. # 05650

11/4/99
Pump Data

MONTHLY GALLONAGE REPORT
OCT99.XLS

Date	Well 4	Well 6	Well 7	Well10	Well11	Well12	Daily Total
1	350	0	0	1,144	22	0	1,516
2	0	0	0	0	0	0	0
3	0	0	0	0	0	0	0
4	0	0	0	3,726	4	0	3,730
5	0	0	0	111	1,058	0	1,169
6	0	0	0	2	1,065	4	1,071
7	0	0	0	37	1,041	45	1,123
8	2	0	13	0	0	1,099	1,114
9	0	0	0	0	0	0	0
10	0	0	0	0	0	0	0
11	0	0	0	44	43	3,399	3,486
12	0	0	0	0	0	1,189	1,189
13	0	0	0	0	0	1,421	1,421
14	0	0	0	0	0	1,432	1,432
15	0	0	0	0	0	1,388	1,388
16	0	0	0	0	0	0	0
17	0	0	0	0	0	0	0
18	0	0	0	0	0	3,953	3,953
19	0	0	0	129	98	1,236	1,463
20	0	0	0	8	9	1,528	1,545
21	0	0	0	0	189	1,518	1,707
22	0	0	0	3	164	1,510	1,677
23	0	0	0	0	0	0	0
24	0	0	0	0	0	0	0
25	0	0	0	0	0	4,578	4,578
26	0	0	0	0	203	1,546	1,749
27	0	0	0	3	1	1,480	1,484
28	0	0	0	0	0	1,491	1,491
29	456	265	135	0	0	1,297	2,153
30	0	0	0	0	0	0	0
31	94	502	380	0	0	4,038	5,014
Total	902	767	528	5,207	3,897	34,152	45,453
			Totalizer		Totalizer		Total(x1,000)
			This Month		Last Month		Gallons
		Well 4	1,321,280		1,320,378		902
		Well 6	767		0		767
		Well 7	515		0		515
		Well 10	732,337		727,130		5,207
		Well 11	245,595		241,698		3,897
		Well 12	71,608		37,456		34,152
AGS Water Supply Meter			56,155		55,778		377.00
Medical Reactor - Well 105			54,740,010		51,674,710		3065.30
Biology Building - Well 9			5,390,840		5,346,440		44.40

12M LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9930572

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... DISTRIBUTION

DATE COLLECTED. 10/07/99
TIME COLLECTED. 0610 HRS.
DATE RECEIVED.. 10/07/99
COLLECTED BY... RL99
FED-ID..... 5111891

POINT NO:
LOCATION: B-49 WATER TOWER

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
TOTAL COLIFORM BACT.	negative	-----	negative
E. COLI.	absent	-----	absent
CHLORINE RESIDUAL	0.8	mg/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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ORIGINAL

S 0054

H2M LABS, INC.

575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9930573

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... DISTRIBUTION

DATE COLLECTED. 10/07/99
TIME COLLECTED. 0705 HRS.
DATE RECEIVED.. 10/07/99
COLLECTED BY... RL99
FED-ID..... 5111891

POINT NO:
LOCATION: B-363 APT. LAUNDRY

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
TOTAL COLIFORM BACT.	negative	-----	negative
E. COLI.	absent	-----	absent
CHLORINE RESIDUAL	0.3	mg/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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ORIGINAL

H2M LABS, INC.

575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9930574

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... DISTRIBUTION

DATE COLLECTED. 10/07/99
TIME COLLECTED. 0835 HRS.
DATE RECEIVED.. 10/07/99
COLLECTED BY... RL99
FED-ID..... 5111891

POINT NO:
LOCATION: B-490-BLOCK-1 ACF
REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
TOTAL COLIFORM BACT.	negative	-----	negative
E. COLI.	absent	-----	absent
CHLORINE RESIDUAL	0.3	mg/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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J M Alavin LABORATORY DIRECTOR

ORIGINAL

H2M LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3 : FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9930575

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... DISTRIBUTION

DATE COLLECTED. 10/07/99
TIME COLLECTED. 0830 HRS.
DATE RECEIVED.. 10/07/99
COLLECTED BY... RL99
FED-ID..... 5111891

POINT NO:
LOCATION: B-490-BLOCK-4-MRC

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
TOTAL COLIFORM BACT.	negative	-----	negative
E. COLI.	absent	-----	absent
CHLORINE RESIDUAL	0.2	mg/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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ORIGINAL

S 0057

12M LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9930576

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... DISTRIBUTION

DATE COLLECTED. 10/07/99
TIME COLLECTED. 0630 HRS.
DATE RECEIVED.. 10/07/99
COLLECTED BY... RL99
FED-ID..... 5111891

POINT NO:
LOCATION: B-640 WATER TOWER

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
TOTAL COLIFORM BACT.	negative	-----	negative
E. COLI.	absent	-----	absent
CHLORINE RESIDUAL	0.9	mg/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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LABORATORY DIRECTOR

ORIGINAL

H2M LABS, INC.

575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9930577

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... DISTRIBUTION

DATE COLLECTED. 10/07/99
TIME COLLECTED. 0715 HRS.
DATE RECEIVED.. 10/07/99
COLLECTED BY... RL99
FED-ID..... 5111891

POINT NO:
LOCATION: B-725 NSLS

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
TOTAL COLIFORM BACT.	negative	-----	negative
E. COLI.	absent	-----	absent
CHLORINE RESIDUAL	1.0	mg/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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S 0059

2M LABS, INC.

575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9930578

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... DISTRIBUTION

DATE COLLECTED. 10/07/99
TIME COLLECTED. 0650 HRS.
DATE RECEIVED.. 10/07/99
COLLECTED BY... RL99
FED-ID..... 5111891

POINT NO:
LOCATION: B-1005 RHIC

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
TOTAL COLIFORM BACT.	negative	-----	negative
E. COLI.	absent	-----	absent
CHLORINE RESIDUAL	0.6	mg/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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ORIGINAL

S 0060

ATTACHMENT II

Brookhaven National Laboratory
Potable Water Supply

October 1999 Biweekly Water Quality Monitoring Data for BNL Well Water Samples;

Attachment II
Table 1
Summary of Water Quality Analyses
for the BNL Potable Water System
October 1999

Sample Location	Sample Date	pH	Temp. Degree F	Conductivity	Alkalinity	Calcium
Well 10	10/5/99	7.7	56	160 umhos	NR	NR
Well 10	10/14/99	7.5	56	195 umhos	NR	NR
Well 10	10/19/99	7.8	56	166 umhos	NR	NR
Well 10	10/21/99	7.8	56	158 umhos	NR	NR
Well 10	10/26/99	NR	56	219 umhos	NR	NR
Well 11	10/5/99	7.7	56	206 umhos	NR	NR
Well 11	10/14/99	7.5	56	229 umhos	NR	NR
Well 11	10/19/99	7.5	54	201 umhos	NR	NR
Well 11	10/21/99	7.7	55	NR	NR	NR
Well 11	10/26/99	NR	56	192 umhos	NR	NR
Well 12	10/5/99	7.5	56	198 umhos	NR	NR
Well 12	10/12/99	7.2	56	147 umhos	NR	NR
Well 12	10/14/99	8.8	56	169 umhos	NR	NR
Well 12	10/19/99	7.7	56	160 umhos	NR	NR
Well 12	10/21/99	8.0	65	NR	NR	NR
Well 12	10/26/99	8.0	53	155 umhos	NR	NR
Well 12	10/28/99	8.0	56	158 umhos	NR	NR

NR - Analysis Not Required or Not Reported.
WTP: Water Treatment Plant.
Note: **1.** Field parameters are only conducted for facilities that are in operation on the day of measurement.

ATTACHMENT III

Brookhaven National Laboratory
Potable Water Supply

1999 First Quarter Perchlorate Analyses for Well Water Samples

H2M LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9903226

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... WELL
WELL TYPE. RAW

DATE COLLECTED. 02/04/99
TIME COLLECTED. 0800 HRS.
DATE RECEIVED.. 02/04/99
COLLECTED BY... JA99
FED-ID..... 5111891

POINT NO:
LOCATION: WELL 4

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
PERCHLORATE(SEE ATTACHED)	<4.0	ug/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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DATE ISSUED

J M Slavin LABORATORY DIRECTOR

ORIGINAL

H2M LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)69 -3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9903227

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... WELL
WELL TYPE. RAW

DATE COLLECTED. 02/04/99
TIME COLLECTED. 0820 HRS.
DATE RECEIVED.. 02/04/99
COLLECTED BY... JA99
FED-ID..... 5111891

POINT NO:
LOCATION: WELL 6

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
PERCHLORATE(SEE ATTACHED)	<4.0	ug/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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J M Alavian
LABORATORY DIRECTOR

ORIGINAL

H2M LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9903228

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... WELL
WELL TYPE. RAW

DATE COLLECTED. 02/04/99
TIME COLLECTED. 0930 HRS.
DATE RECEIVED.. 02/04/99
COLLECTED BY... JA99
FED-ID..... 5111891

POINT NO:
LOCATION: WELL 10

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
PERCHLORATE(SEE ATTACHED)	<4.0	ug/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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ORIGINAL

HZM LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9903229

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... WELL
WELL TYPE. RAW

DATE COLLECTED. 02/04/99
TIME COLLECTED. 0900 HRS.
DATE RECEIVED.. 02/04/99
COLLECTED BY... JA99
FED-ID..... 5111891

POINT NO:
LOCATION: WELL 11

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
PERCHLORATE(SEE ATTACHED)	<4.0	ug/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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ORIGINAL

H2M LABS, INC.
575 Broad Hollow Road, Melville, N.Y. 11747
(516)694-3040 FAX:(516)420-8436 NYSDOH ID# 10478

LAB NO: 9903230

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973

TYPE..... POTABLE WATER
ROUTINE
ORIGIN.... WELL
WELL TYPE. RAW

DATE COLLECTED. 02/04/99
TIME COLLECTED. 0910 HRS.
DATE RECEIVED.. 02/04/99
COLLECTED BY... JA99
FED-ID..... 5111891

POINT NO:
LOCATION: WELL 12

REMARKS:

PARAMETER (S)	RESULTS	UNITS	LIMIT
PERCHLORATE(SEE ATTACHED)	<4.0	ug/l	

- Result(s) Reported meet(s) NEW YORK STATE/USEPA limits for potable water.

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