R. KER

Environmental Services Division

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

www.bnl.gov

October 6, 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 September 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 September 1999;
Attachment II:	September 1999 Biweekly Water Quality Monitoring Data for BNL 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, CEP, REM
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 September 1999

BROOKHAVEN NATIONAL LABORATORY

WATER SYSTEMS OPERATION REPORT

Public Water Supply Protection

PROGRAM CODE 169	STATION 11515100	SUFFOLK COUNTY	REPORTING PERIOD : SEPTEMBER 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	60/135	0	NR	NR	11764176
3	0	60/135	0	NR	NR	11764176
4	0					
5	0					
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	60/135	0	NR	NR	11764176
10	0	60/135	0	NR	NR	11764176
11	0					
12	0					
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	60/135	0	NR	NR	11764176
17	0	60/135	0	NR	NR	11764176
18	0					
19	0					
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	60/135	0	NR	NR	11764176
24	0	60/135	0	NR	NR	11764176
25	0					
26	0					
27	0	60/135	0	NR	NR	11764176
28	0	60/135	0	NR	NR	11764176
29	0	60/135	0	NR	NR	11764176
30	0	60/135	0	NR	NR	11764176
31	0					
TOT	0		0			
AVG.	0.00		0.00	No. Days:	30	

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: 10-4-99

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 : SEPTEMBER 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	1320359
1	3	160	0	NR	NR	1320362
2	0	160	0	NR	NR	1320362
3	0	160	0	NR	NR	1320362
4	0					
5	0					
6	0	160	0	NR	NR	1320362
7	5	160	0	NR	NR	1320367
8	0	160	0	NR	NR	1320367
9	0	160	0	NR	NR	1320367
10	0	160	0	NR	NR	1320367
11	0					
12	0					
13	0	160	0	NR	NR	1320367
14	0	160	0	NR	NR	1320367
15	0	160	0	NR	NR	1320367
16	0	160	0	NR	NR	1320367
17	0	160	0	NR	NR	1320367
18	0					
19	0					
20	11	160	0	NR	NR	1320378
21	0	160	0	NR	NR	1320378
22	0	160	0	NR	NR	1320378
23	0	160	0	NR	NR	1320378
24	0	160	0	NR	NR	1320378
25	0					
26	0					
27	0	160	0	NR	NR	1320378
28	0	160	0	NR	NR	1320378
29	0	160	0	NR	NR	1320378
30	0	160	0	NR	NR	1320378
31	0					
TOT	19		0			
AVG.	0.63		0.00	No. Days:	30	

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: [illegible]

Date 10-4-99

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 : SEPTEMBER 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	105	per 24hrs	mg/l	Hydroxide	0
1	0	105	0	NR	NR	0
2	0	105	0	NR	NR	0
3	0	105	0	NR	NR	0
4	0					
5	0					
6	0	105	0	NR	NR	0
7	0	105	0	NR	NR	0
8	0	105	0	NR	NR	0
9	0	105	0	NR	NR	0
10	0	105	0	NR	NR	0
11	0					
12	0					
13	0	105	0	NR	NR	0
14	0	105	0	NR	NR	0
15	0	105	0	NR	NR	0
16	0	105	0	NR	NR	0
17	0	105	0	NR	NR	0
18	0					
19	0					
20	0	103	0	NR	NR	0
21	0	103	0	NR	NR	0
22	0	103	0	NR	NR	0
23	0	103	0	NR	NR	0
24	0	103	0	NR	NR	0
25	0					
26	0					
27	0	103	0	NR	NR	0
28	0	103	0	NR	NR	0
29	0	103	0	NR	NR	0
30	0	103	0	NR	NR	0
31	0					
TOT	0		0			0
AVG.	0.00		0.00	No. Days:	30	

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: 10-4-99

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 : SEPTEMBER 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	100	0	NR	NR	0
2	0	100	0	NR	NR	0
3	0	100	0	NR	NR	0
4	0					
5	0					
6	0	100	0	NR	NR	0
7	0	100	0	NR	NR	0
8	0	100	0	NR	NR	0
9	0	100	0	NR	NR	0
10	0	100	0	NR	NR	0
11	0					
12	0					
13	0	100	0	NR	NR	0
14	0	100	0	NR	NR	0
15	0	100	0	NR	NR	0
16	0	100	0	NR	NR	0
17	0	100	0	NR	NR	0
18	0					
19	0					
20	0	100	0	NR	NR	0
21	0	100	0	NR	NR	0
22	0	100	0	NR	NR	0
23	0	100	0	NR	NR	0
24	0	100	0	NR	NR	0
25	0					
26	0					
27	0	100	0	NR	NR	0
28	0	100	0	NR	NR	0
29	0	100	0	NR	NR	0
30	0	100	0	NR	NR	0
31	0					
TOT	0		0			0
AVG.	0.00		0.00	No. Days:	30	

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. Ross

Date: 10-4-99

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 : SEPTEMBER 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	110	per 24hrs	mg/l	Hydroxide	715896
1	144	110	0	0.79	7.8	716040
2	15	110	0	0.58	8.2	716055
3	191	110	0	0.58	8.4	716246
4	0					
5	0					
6	5	110	0	0.4	7.8	716251
7	15	110	0	0.54	7.6	716266
8	180	110	0	NR	NR	716446
9	0	110	0	NR	NR	716446
10	177	105	0	NR	NR	716623
11	0					
12	0					
13	0	105	0	NR	NR	716623
14	0	105	0	NR	NR	716623
15	0	105	0	NR	NR	716623
16	260	102	0	NR	NR	716883
17	0	102	0	NR	NR	716883
18	0					
19	0					
20	736	95	7	NR	NR	717619
21	0	95	0	NR	NR	717619
22	99	94	1	NR	NR	717718
23	809	90	4	0.64	7.5	718527
24	1,290	83	7	0.52	8	719817
25	0					
26	0					
27	3,468	55	28	0.7	7.6	723285
28	1,230	45 + 145	10	0.74	7.6	724515
29	1,294	185	5	0.6	8	725809
30	1,321	180	5	0.63	8.2	727130
31	0					
TOT	11,234		67			0
AVG.	374.47		2.23	No. Days:	30	

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: Joe Roes

Date: 10-4-99

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 : SEPTEMBER 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	120	per 24hrs	mg/l	Hydroxide	239336
1	0	120	0	NR	NR	239336
2	8	120	0	0.64	7.9	239344
3	7	120	0	0.65	7	239351
4	0					
5	0					
6	6	120	0	0.3	7	239357
7	5	120	0	0.2	6.8	239362
8	5	120	0	NR	NR	239367
9	0	120	0	NR	NR	239367
10	0	120	0	NR	NR	239367
11	0					
12	0					
13	0	120	0	NR	NR	239367
14	0	120	0	NR	NR	239367
15	0	120	0	NR	NR	239367
16	0	120	0	NR	NR	239367
17	0	120	0	NR	NR	239367
18	0					
19	0					
20	334	120	0	NR	NR	239701
21	455	116	4	0.7	7.4	240156
22	1,178	103	13	1.6	7.1	241334
23	354	100	3	0.8	7	241688
24	8	100	0	NR	NR	241696
25	0					
26	0					
27	0	100	0	NR	NR	241696
28	0	100	0	NR	NR	241696
29	2	100	0	NR	NR	241698
30	0	100	0	NR	NR	241698
31	0					
TOT	2,362		20			
AVG.	78.73		0.67	No. Days:	30	

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: 10-4-99

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 : SEPTEMBER 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	192	per 24hrs	mg/l	Hydroxide	5975
1	1,556	182	10	0.8	8	7531
2	1,596	179	3	0.81	8.1	9127
3	1,579	170	9	0.75	7.9	10706
4	0					
5	0					
6	4,567	145	25	0.65	8	15273
7	1,772	132	13	0.7	7.8	17045
8	1,569	125	7	0.5	7.6	18614
9	1,547	120	5	0.62	8.5	20161
10	1,571	110	10	0.63	8.3	21732
11	0					
12	0					
13	4,175	90	20	0.6	7.3	25907
14	1,485	82	8	0.5	7.8	27392
15	1,553	75	7	0.5	8	28945
16	1,519	69	6	0.5	8.3	30464
17	1,357	63	6	0.5	8.3	31821
18	0					
19	0					
20	4,076	40	23	0.8	7.5	35897
21	1,466	34	6	0.3	8	37363
22	92	34+170	0	0.7	NR	37455
23	0	204	0	0.73	8	37455
24	0	204	0	NR	NR	37455
25	0					
26	0					
27	0	204	0	NR	NR	37455
28	0	204	0	NR	NR	37455
29	1	204	0	NR	NR	37456
30	0	204	0	NR	NR	37456
31	0					
TOT	31,481		158			
AVG.	1049.37		5.27	No. Days:	30	

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: 10-4-99

Title: WATER SYSTEMS SUPERVISOR

Cert. #: 05650

9/30/99
Pump Data

MONTHLY GALLONAGE REPORT
SEP99.XLS

Date	Well 4	Well 6	Well 7	Well10	Well11	Well12	Daily Total
1	3	0	0	144	0	1,556	1,703
2	0	0	0	15	8	1,596	1,619
3	0	0	0	191	7	1,579	1,777
4	0	0	0	0	0	0	0
5	0	0	0	0	0	0	0
6	0	0	0	5	6	4,567	4,578
7	5	0	0	15	5	1,772	1,797
8	0	0	0	180	5	1,569	1,754
9	0	0	0	0	0	1,547	1,547
10	0	0	0	177	0	1,571	1,748
11	0	0	0	0	0	0	0
12	0	0	0	0	0	0	0
13	0	0	0	0	0	4,175	4,175
14	0	0	0	0	0	1,485	1,485
15	0	0	0	0	0	1,553	1,553
16	0	0	0	260	0	1,519	1,779
17	0	0	0	0	0	1,357	1,357
18	0	0	0	0	0	0	0
19	0	0	0	0	0	0	0
20	11	0	0	736	334	4,076	5,157
21	0	0	0	0	455	1,466	1,921
22	0	0	0	99	1,178	92	1,369
23	0	0	0	809	354	0	1,163
24	0	0	0	1,290	8	0	1,298
25	0	0	0	0	0	0	0
26	0	0	0	0	0	0	0
27	0	0	0	3,468	0	0	3,468
28	0	0	0	1,230	0	0	1,230
29	0	0	0	1,294	2	1	1,297
30	0	0	0	1,321	0	0	1,321
31	0	0	0	0	0	0	0
Total	19	0	0	11,234	2,362	31,481	45,096

	Totalizer This Month	Totalizer Last Month	Total(x1,000) Gallons
Well 4	1,320,378	1,320,359	19
Well 6	0	0	0
Well 7	0	0	0
Well 10	727,130	715,896	11,234
Well 11	241,698	239,336	2,362
Well 12	37,456	5,975	31,481
AGS Water Supply Meter	55,778	55,130	648.00
Medical Reactor - Well 105	51,674,710	49,480,780	2193.93
Biology Building - Well 9	5,346,440	5,327,140	19.30

H2M LABS, INC.

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

BROOKHAVEN NATIONAL LAB.-BNLM
S. SCARPITTA/TONY ROSS
70 BELL AVE.
UPTON, NY 11973
FED-ID: 5111891

DATE RECEIVED.. 09/02/99
COLLECTED BY... RL99
PROJECT NO.....
TYPE ..... POTABLE WATER

LAB NO.	DATE COLLECTED	LOCATION	T.COLI. BACT.	E.COLI.	CHLORINE RESIDUAL mg/l
9926116 ROUTINE	09/02/99 06:10 DISTRIBUTION	B-49 WATER TOWER	Negative	Absent	0.5
9926117 ROUTINE	09/02/99 07:05 DISTRIBUTION	B-363 APARTMENT LAUNDRY	Negative	Absent	0.4
9926118 ROUTINE	09/02/99 07:45 DISTRIBUTION	B-490 BLOCK 11	Negative	Absent	0.5
9926119 ROUTINE	09/02/99 07:30 DISTRIBUTION	B-490 OTPATIENT CLINC	Negative	Absent	0.3
9926120 ROUTINE	09/02/99 06:25 DISTRIBUTION	B-640 WATER TOWER	Negative	Absent	0.7
9926121 ROUTINE	09/02/99 07:15 DISTRIBUTION	B-930 LINAC	Negative	Absent	0.6
9926122 ROUTINE	09/02/99 06:40 DISTRIBUTION	B-1005 RHIC	Negative	Absent	0.5
9926123 ROUTINE	09/02/99 06:25 DISTRIBUTION	DUPLICATE	Negative	Absent	0.4

- Result(s) reported meet(s) NEW YORK STATE limits for potable water

REMARKS:

DATE ISSUED 09/07/99

J M Slavin

LABORATORY DIRECTOR

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ATTACHMENT II

Brookhaven National Laboratory
Potable Water Supply

September 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
September 1999

Sample Location	Sample Date	pH	Temp. Degree F	Conductivity	Alkalinity	Calcium
Well 10	9/2/99	8.2	55	181 umhos	NR	NR
Well 10	9/7/99	7.6	58	155 umhos	NR	NR
Well 10	9/21/99	8.2	56	200 umhos	NR	NR
Well 10	9/23/99	7.5	56	172 umhos	NR	NR
Well 10	9/28/99	7.6	58	173 umhos	NR	NR
Well 10	9/30/99	8.2	56	181 umhos	NR	NR
Well 11	9/2/99	7.9	56	172 umhos	NR	NR
Well 11	9/7/99	6.8	52	252 umhos	NR	NR
Well 11	9/21/99	7.4	56	185 umhos	NR	NR
Well 11	9/23/99	7.0	56	163 umhos	NR	NR
Well 12	9/2/99	8.1	56	157 umhos	NR	NR
Well 12	9/7/99	7.8	56	153 umhos	NR	NR
Well 12	9/9/99	8.5	56	156 umhos	NR	NR
Well 12	9/14/99	7.8	56	155 umhos	NR	NR
Well 12	9/16/99	8.3	56	158 umhos	NR	NR
Well 12	9/21/99	8.0	65	162 umhos	NR	NR
Well 12	9/23/99	8.0	55	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