

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-01

System Name: City of Wichita Falls

County: Wichita

Collection Point: 4611 Lakeshore Dr

Collection Date / Time: 01/12/15 / 11:30 AM / PM

Collected By: EDT Total Chlorine Residual: 3.6 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 / 11:51 AM / PM

Date / Time Incubated: 01/12/15 / 11:56 AM / PM

Received By: EDT

Test Method: ☒ Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/13/15 / 1:01 PM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15D10901-02

System Name: City of Wichita Falls

County: Wichita

Collection Point: 2000 SW Pkwy

Collection Date / Time: 01/12/15 / 9:00 AM / PM

Collected By: EDT Total Chlorine Residual: 3.3 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 / 11:51 AM / PM

Date / Time Incubated: 01/12/15 / 11:56 AM / PM

Received By: EDT

Test Method: ☒ Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/13/15 / 1:01 PM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-03

System Name: City of Wichita Falls

County: Wichita

Collection Point: 4040 York St

Collection Date / Time: 01/12/15 11:16 AM / PM

Collected By: EDT Total Chlorine Residual: 3.1 mg/L

Type of System: Public

Type of Sample: Distribution: ☒ Raw: _____
Repeat: _____ Special: _____
Upstream: _____ Const: _____
Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 11:51 AM / PM

Date / Time Incubated: 01/12/15 11:56 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): _____

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/13/15 11:01 PM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

**City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section**

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-04

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1208 Central Freeway E

Collection Date / Time: 01/12/15 / 9:37 AM / PM

Collected By: EDT **Total Chlorine Residual:** 3.6 mg/L

Type of System: Public

Type of Sample:

Distribution: ✓

Raw: _____

Repeat: _____

Special: _____

Upstream: _____

Const: _____

Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 / 11:51 AM / PM

Date / Time Incubated: 01/12/15 / 11:56 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/13/15 / 1:01 PM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-05

System Name: City of Wichita Falls

County: Wichita

Collection Point: 2414 9th St

Collection Date / Time: 01/12/15 / 11:00 AM / PM

Collected By: EDT Total Chlorine Residual: 3.2 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 / 11:51 AM / PM

Date / Time Incubated: 01/12/15 / 11:56 AM / PM

Received By: EDT

Test Method: ☒ Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/13/15 / 1:01 PM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

**City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section**

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-06

System Name: City of Wichita Falls

County: Wichita

Collection Point: 5512 Castle

Collection Date / Time: 01/12/15 / 9:24 AM / PM

Collected By: EDT **Total Chlorine Residual:** 3.4 mg/L

Type of System: Public

Type of Sample:

Distribution: ✓

Raw: _____

Repeat: _____

Special: _____

Upstream: _____

Const: _____

Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 / 11:51 AM / PM

Date / Time Incubated: 01/12/15 / 11:56 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/13/15 / 1:01 PM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-07

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1005 River Road

Collection Date / Time: 01/12/15 | 9:55 AM / PM

Collected By: EDT **Total Chlorine Residual:** 3.1 mg/L

Type of System: Public

Type of Sample:

Distribution: ✓

Raw: _____

Repeat: _____

Special: _____

Upstream: _____

Const: _____

Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 | 11:51 AM / PM

Date / Time Incubated: 01/12/15 | 11:56 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/13/15 | 1:01 PM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

**City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section**

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-08

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1601 S. Jr Mkt Blvd

Collection Date / Time: 01/12/15 / 10:06 AM / PM

Collected By: EDT **Total Chlorine Residual:** 3.3 mg/L

Type of System: Public

Type of Sample:	Distribution: <u>✓</u>	Raw: _____
	Repeat: _____	Special: _____
	Upstream: _____	Const: _____
	Downstream: _____	

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 / 11:51 AM / PM

Date / Time Incubated: 01/12/15 / 11:56 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray Colilert 18 with Quantitray

None Found (Negative): ✓ **Found (Positive):** _____

Read By: EDT **Total Coliform:** _____ / _____ MPN

Date / Time Read: 01/13/15 / 1:01 PM **E.Coli:** _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15010901-09

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1601 SW 1 Pkwy

Collection Date / Time: 01/12/15 8:52 AM / PM

Collected By: EDT Total Chlorine Residual: 2.6 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/12/15 11:57 AM / PM

Date / Time Incubated: 01/12/15 11:58 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/13/15 1:07 PM

E.Coli: / MPN

Sample Unsuitable (Reason):

TCEQ Notified of Positive Samples By:

Name of Contact Person:

Date and Time Contacted: / AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011201-01

System Name: City of Wichita Falls

County: Wichita

Collection Point: 4540 Barnett

Collection Date / Time: 01/13/15 / 10:25 AM / PM

Collected By: EDT Total Chlorine Residual: 3.6 mg/L

Type of System: Public

Type of Sample:

Distribution: ✓

Raw: _____

Repeat: _____

Special: _____

Upstream: _____

Const: _____

Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 / 10:57 AM / PM

Date / Time Incubated: 01/13/15 / 11:07 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/14/15 / 11:29 AM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011201-02

System Name: City of Wichita Falls

County: Wichita

Collection Point: 5100 Kell W. Blvd

Collection Date / Time: 01/13/15 / 8:17 AM / PM

Collected By: EDT Total Chlorine Residual: 33 mg/L

Type of System: Public

Type of Sample:

Distribution: ✓

Raw: _____

Repeat: _____

Special: _____

Upstream: _____

Const: _____

Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 / 10:57 AM / PM

Date / Time Incubated: 01/13/15 / 11:07 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/14/15 / 11:29 AM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011207-03

System Name: City of Wichita Falls

County: Wichita

Collection Point: 2716 Old Iowa Park Rd

Collection Date / Time: 01/13/15 / 8:56 AM / PM

Collected By: EDT Total Chlorine Residual: 3.3 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 / 10:57 AM / PM

Date / Time Incubated: 01/13/15 / 11:07 AM / PM

Received By: EDT

Test Method: ☒ Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/14/15 / 11:29 AM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011207-04

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1809 5th St

Collection Date / Time: 01/13/15 / 9:05 AM / PM

Collected By: EDT Total Chlorine Residual: 2.2 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 / 10:57 AM / PM

Date / Time Incubated: 01/13/15 / 11:07 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/14/15 / 11:29 AM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011201-05

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1101 GMAA

Collection Date / Time: 01/13/15 / 9:24 AM / PM

Collected By: EDT Total Chlorine Residual: 1.9 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 / 10:57 AM / PM

Date / Time Incubated: 01/13/15 / 11:07 AM / PM

Received By: EDT

Test Method: ☒ Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/14/15 / 11:29 AM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011261-06

System Name: City of Wichita Falls

County: Wichita

Collection Point: 5420 Kell W Blvd

Collection Date / Time: 01/13/15 / 8:25 AM / PM

Collected By: EDT Total Chlorine Residual: 3.8 mg/L

Type of System: Public

Type of Sample:

Distribution: ✓

Raw: _____

Repeat: _____

Special: _____

Upstream: _____

Const: _____

Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 / 10:57 AM / PM

Date / Time Incubated: 01/13/15 / 11:07 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/14/15 / 11:29 AM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011201-07

System Name: City of Wichita Falls

County: Wichita

Collection Point: 202 Valley View/Loop 11

Collection Date / Time: 01/13/15 | 8:43 AM / PM

Collected By: EDT Total Chlorine Residual: 3.7 mg/L

Type of System: Public

Type of Sample:

Distribution: ✓

Raw: _____

Repeat: _____

Special: _____

Upstream: _____

Const: _____

Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 | 10:59 AM / PM

Date / Time Incubated: 01/13/15 | 11:07 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/14/15 | 11:29 AM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

**City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section**

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011201-08

System Name: City of Wichita Falls

County: Wichita

Collection Point: 3607 Kemp

Collection Date / Time: 01/13/15 / 10:11 AM / PM

Collected By: EDT **Total Chlorine Residual:** 2.7 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/13/15 / 10:57 AM / PM

Date / Time Incubated: 01/13/15 / 11:07 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/14/15 / 11:29 AM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011301-01

System Name: City of Wichita Falls

County: Wichita

Collection Point: 3901 Old Jacksonboro Hwy

Collection Date / Time: 01/14/15 / 9:56 AM / PM

Collected By: EDT Total Chlorine Residual: 3.1 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/14/15 / 10:46 AM / PM

Date / Time Incubated: 01/14/15 / 10:51 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/15/15 / 1:03 PM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011301-02

System Name: City of Wichita Falls

County: Wichita

Collection Point: 3800 Sheppard Access

Collection Date / Time: 01/14/15 / 9:04 AM / PM

Collected By: EDT Total Chlorine Residual: 3.8 mg/L

Type of System: Public

Type of Sample: Distribution: ☒ Raw: ☐
Repeat: ☐ Special: ☐
Upstream: ☐ Const: ☐
Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/14/15 / 10:46 AM / PM

Date / Time Incubated: 01/14/15 / 10:51 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/15/15 / 1:03 PM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011301-03

System Name: City of Wichita Falls

County: Wichita

Collection Point: 4505 Wyoming

Collection Date / Time: 01/14/15 / 10:15 AM / PM

Collected By: EDT Total Chlorine Residual: 3.8 mg/L

Type of System: Public

Type of Sample: Distribution: ✓ Raw: _____
Repeat: _____ Special: _____
Upstream: _____ Const: _____
Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/14/15 / 10:46 AM / PM

Date / Time Incubated: 01/14/15 / 10:51 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ✓

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/15/15 / 1:03PM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011307-04

System Name: City of Wichita Falls

County: Wichita

Collection Point: 4570 Seymour Hwy

Collection Date / Time: 01/14/15 / 8:27 AM / PM

Collected By: EDT Total Chlorine Residual: 3.5 mg/L

Type of System: Public

Type of Sample: Distribution: ☒ Raw: _____
Repeat: _____ Special: _____
Upstream: _____ Const: _____
Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/14/15 / 10:46 AM / PM

Date / Time Incubated: 01/14/15 / 10:51 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/15/15 / 1:03PM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011307-05

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1801 Kemp

Collection Date / Time: 01/14/15 / 8:40 AM / PM

Collected By: EDT Total Chlorine Residual: 3.0 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/14/15 / 10:46 AM / PM

Date / Time Incubated: 01/14/15 / 10:57 AM / PM

Received By: EDT

Test Method: ☒ Colilert 24 with Quantitray

☐ Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/15/15 / 1:03 PM

E.Coli: / MPN

Sample Unsuitable (Reason):

TCEQ Notified of Positive Samples By:

Name of Contact Person:

Date and Time Contacted: / AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011301-06

System Name: City of Wichita Falls

County: Wichita

Collection Point:

5201 Central Freeway

Collection Date / Time:

01/14/15

1

8:54

AM / PM

Collected By:

EDT

Total Chlorine Residual:

3.5

mg/L

Type of System: Public

Type of Sample:

Distribution:

☒

Raw:

☐

Repeat:

☐

Special:

☐

Upstream:

☐

Const:

☐

Downstream:

☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated:

01/14/15

1

10:46

AM / PM

Date / Time Incubated:

01/14/15

1

10:51

AM / PM

Received By:

EDT

Test Method:

Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative):

☒

Found (Positive):

☐

Read By:

EDT

Total Coliform:

/

MPN

Date / Time Read:

01/15/15 1203 PM

E.Coli:

/

MPN

Sample Unsuitable (Reason):

TCEQ Notified of Positive Samples By:

Name of Contact Person:

Date and Time Contacted:

/

AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011307-07

System Name: City of Wichita Falls

County: Wichita

Collection Point: 1104 Broad

Collection Date / Time: 01/14/15 / 9:17 AM / PM

Collected By: EDT **Total Chlorine Residual:** 1.05 mg/L

Type of System: Public

Type of Sample:

Distribution: ☒

Raw: ☐

Repeat: ☐

Special: ☐

Upstream: ☐

Const: ☐

Downstream: ☐

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/14/15 / 10:46 AM / PM

Date / Time Incubated: 01/14/15 / 10:57 AM / PM

Received By: EDT

Test Method: ☒ Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): ☐

Read By: EDT

Total Coliform: / MPN

Date / Time Read: 01/15/15 / 1:03 PM

E.Coli: / MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM

City of Wichita Falls Water Purification Laboratory
Microbiological / Bacteriological Testing Section

Water Bacteriological Testing Report

System Identification Number: 2430001

Texas Commission on Environmental Quality Laboratory ID Number: 48180-2006A

Sample Number: 15011307-08

System Name: City of Wichita Falls

County: Wichita

Collection Point: 5320 SW Pkwy

Collection Date / Time: 01/14/15 / 10:26 AM / PM

Collected By: EDT Total Chlorine Residual: 2.0 mg/L

Type of System: Public

Type of Sample: Distribution: ☒ Raw: _____
Repeat: _____ Special: _____
Upstream: _____ Const: _____
Downstream: _____

Water Sources: Lakes Arrowhead, Kickapoo, and Kemp.

For Laboratory Use Only

Water of Satisfactory Bacteriological Quality Must Be Free Of All Coliform Organisms

Date / Time Sample Inoculated: 01/14/15 / 10:46 AM / PM

Date / Time Incubated: 01/14/15 / 10:51 AM / PM

Received By: EDT

Test Method: Colilert 24 with Quantitray

Colilert 18 with Quantitray

None Found (Negative): ☒

Found (Positive): _____

Read By: EDT

Total Coliform: _____ / _____ MPN

Date / Time Read: 01/15/15 / 12:03 PM

E.Coli: _____ / _____ MPN

Sample Unsuitable (Reason): _____

TCEQ Notified of Positive Samples By: _____

Name of Contact Person: _____

Date and Time Contacted: _____ / _____ AM / PM