6280/2
NREAD
13 Feb 1986

From: Director, Natural Resources and Environmental Affairs Division, Marine Corps Base, Camp Lejeune
To: Base Maintenance Officer (Attn: Utilities Director), Marine Corps Base, Camp Lejeune

Subj: NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES) PERMIT RELATED REPORTING DATA

Encl: (1) Monthly Report of Waste Treatment Plant Water Quality

1. It is requested that the enclosure be routed to the Utilities Systems General Foreman. The enclosure summarizes the subject data for all sewage treatment plants for 1-31 January 1986.

2. The data/information, except chlorine residuals shown under the "LAB" column, are submitted to the EPA and State in accordance with the NPDES permit.

J. I. WOOTEN

Blind copy to: (2)
QCL, NREAD w/1 encl

Writer: E. Betz, NREAD 5977
Typist: J. Cross 13Feb86

MONTHLY REPORT OF WASTE TREATMENT PLANT WATER QUALITY
MCBCL 11345/8 (REV. 6-63)

PLANT CAMP GEIGER | MONTH JANUARY 1986

DATE	PLANT EFFLUENT DATA: FLOW TOTAL DAILY M GPD	PH	CHLORINE RESIDUAL PLANT mg/1	CHLORINE RESIDUAL LAB mg/1	5 DAY 20° C. BOD RAW mg/1	5 DAY 20° C. BOD EFFLUENT mg/1	5 DAY 20° C. BOD PERCENT REMOVAL	SUSPENDED SOLIDS RAW mg/1	SUSPENDED SOLIDS EFFLUENT mg/1	SUSPENDED SOLIDS PERCENT REMOVAL	COLIFORM NUMBER PER 100 ml	COLIFORM GEOMETRIC MEAN
1	.6258	6.6	4.0	3.1	104	5	95	136	6	96	0	
2	.6641	6.8	3.6	3.0	116	10	91	80	11	86	0	
3	.6633	7.0	3.8	2.3	152	11	93	130	4	97	0	
4	.6338	7.0	4.0									
5	.6649	7.0	4.0									
6	.6717	7.0	4.0									
7	.8837	7.0	4.0	3.4	132	13	90	51	7	88	2	
8	.7731	7.0	3.0	3.5	104	7	93	63	4	94	0	
9	.8663	7.0	4.0	3.6	112	11	90	166	9	95	0	
10	.7944	7.0	4.0	3.0	172	16	91	114	8	93		
11	.7851	7.0	3.7									
12	.7884	7.0	4.0									
13	.7903	7.2	4.0									
14	.8028	7.2	4.0	3.5	152	15	90	72	1	99	0	
15	1.0270	7.2	4.0	3.8	160	20	88	202	7	97	0	
16	1.3407	7.2	4.0	4.8	160	21	87	118	5	96	0	
17	1.2913	7.2	4.0	3.7	156	28	82	104	8	92		
18	1.2164	6.8	4.0									
19	1.1900	6.8	4.0									
20	1.2533	6.8	4.0									
21	1.3330	6.9	4.0	3,5	92	7	92	42	6	86	0	
22	1.2535	7.0	3.6	7.6	128	8	94	98	7	93	0	
23	1.2145	6.9	4.0	4.2	124	12	90	76	5	93	0	
24	1.3213	6.8	4.0	4.9	112	11	90	68	2	97		
25	1.3640	7.0	4.0									
26	1.6927	7.0	4.0									
27	1.4410	6.4	4.0	3.3	92	16	83	44	6	86	0	
28	1.2975	6.8	4.0	3.3	236	14	94	97	8	92	0	
29	1.1106	6.8	4.0	4.2	124	8	95	118	4	97	2	
30	1.2553	7.0	4.0	3.2	136	11	92	72	5	93	0	
31	.7430	6.8	4.0	4.5	172	15	91	126	8	94	Sample error	
Tot.	31.7528		121.7		2736	259	1811/90	.6 1977	121	1864/93.2		
Ave.	1.0243		3.9		137	13	90.5	99	6	93.9		1.09

ENCLOSURE (1)

MONTHLY REPORT OF WASTE TREATMENT PLANT WATER QUALITY
MCBCL 11345/8 (REV. 6-63)

PLANT TARAWA TERRACE

MONTH JANUARY 1986

DATE	PLANT EFFLUENT DATA: FLOW TOTAL DAILY MGPD	PH	CHLORINE RESIDUAL PLANT mg/1	CHLORINE RESIDUAL LAB mg/1	5 DAY 20° C. BOD RAW mg/1	5 DAY 20° C. BOD EFFLUENT mg/1	5 DAY 20° C. BOD PERCENT REMOVAL	SUSPENDED SOLIDS RAW mg/1	SUSPENDED SOLIDS EFFLUENT mg/1	SUSPENDED SOLIDS PERCENT REMOVAL	COLIFORM NUMBER PER 100 ml	COLIFORM GEOMETRIC MEAN
1	.9043	6.5	4.0	4.9	172	28	84	72	11	85	0	
2	.8479	6.6	4.5	3.7	216	19	91	165	8	95	4	
3	.8948	6.5	5.0	3.6	184	14	92	194	8	96	0	
4	.8557	6.4	4.0									
5	.8725	6.5	4.5									
6	.9488	6.6	4.0									
7	.8492	6.5	4.0	3.8	204	22	89	85	15	82	10	
8	.8659	6.5	4.0	4.5	192	24	88	244	14	94	0	
9	.9245	6.5	4.5	4.8	188	23	88	89	10	89	2	
10	.8218	6.6	4.5	3.7	192	25	87	96	9	90		
11	.9128	6.5	5.0									
12	.9036	6.5	5.0									
13	.8791	6.5	4.5									
14	.8841	6.6	4.5	2.5	176	28	84	102	10	90	6	
15	.8220	6.5	4.0	2.5		chlorine		248	13	95	0	
16	.8171	6.6	5.0	3.5	200	30	85	148	12	92	0	
17	.8399	6.6	4.0	2.8	192	31	84	262	8	97		
18	.9090	6.6	5.0									
19	.9248	6.5	5.0									
20	.9302	6.2	5.0									
21	.7291	6.5	5.0	4.0	300	39	87	346	11	97	0	
22	.8047	6.6	4.0	8.5	164	36	96	106	12	89	0	
23	.8436	6.5	5.0	5.2	184	33	82	76	6	92	0	
24	.7794	6.4	4.0	5.5	184	35	81	86	11	87		
25	1.0254	6.4	4.0									
26	1.0824	6.5	4.0									
27	.9084	6.3	4.0	3.6	156	37	76	69	13	81	0	
28	.9445	6.4	4.0	3.4	184	21	88	76	12	84	2	
29	.9448	6.5	4.0	3.6	164	28	83	119	10	92	0	
30	.8550	6.6	5.0	3.7	136	25	82	206	7	97	0	
31	.9041	6.6	4.0	4.3	120	28	77	126	11	91	0	
Tot.	27.4294		137.0		3508	526	1624/85.5	2915	211	1815/90.8		
Ave.	.8848		4.4		185	28	84.9	146	11	92.5		1.50

MONTHLY REPORT OF WASTE TREATMENT PLANT WATER QUALITY
MCBCL 11345/6 (REV. 6-83)

PLANT CAMP JOHNSON

MONTH JANUARY 1986

DATE	PLANT EFFLUENT DATA: FLOW TOTAL DAILY MGPD	PH	CHLORINE RESIDUAL PLANT mg/1	CHLORINE RESIDUAL LAB mg/1	5 DAY 20° C BOD RAW mg/1	5 DAY 20° C BOD EFFLUENT mg/1	5 DAY 20° C BOD PERCENT REMOVAL	SUSPENDED SOLIDS RAW mg/1	SUSPENDED SOLIDS EFFLUENT mg/1	SUSPENDED SOLIDS PERCENT REMOVAL	COLIFORM NUMBER PER 100 ml	COLIFORM GEOMETRIC MEAN
1	.3415	7.0	6.0	4.2	84	4	95	43	3	93	0	
2	.3427	7.0	6.0	2.6	112	9	92	56	4	93	0	
3	.3409	6.3	3.0	1.4	52	7	87	43	6	86	0	
4	.3310	6.7	3.0									
5	.3389	6.3	6.0									
6	.3440	6.5	4.0									
7	.3378	6.5	5.0	7.4	124	11	91	53	2	96	chlorine	
8	.3673	6.5	5.0	5.5	100	13	87	49	6	88	0	
9	.3264	6.6	4.0	9.5	124	12	90	34	5	85	0	
10	.3449	6.5	5.0	8.2	104	12	89	72	5	93		
11	.3411	6.6	3.0									
12	.3387	6.5	5.0									
13	.3313	6.5	6.0									
14	.3455	6.7	5.0	7.1	188	15	92	88	3	97	0	
15	.3440	6.6	5.0	6.9	96	18	81	84	4	95	0	
16	.3705	6.5	5.0	4.0	84	18	79	46	6	87	0	
17	.3230	6.7	4.0	5.5	88	23	74	140	7	95		
18	.3394	6.6	6.0									
19	.3313	6.6	0.5									
20	.3299	6.6	5.0									
21	.3408	6.6	5.0	5.0	136	24	82	56	9	84	0	
22	.3424	6.6	5.0	6.9	228	17	93	144	6	96	0	
23	.3440	6.5	5.0	5.4	152	19	88	34	1	97	0	
24	.3410	6.7	5.0	6.7	160	18	89	24	4	83		
25	.3455	6.6	5.0									
26	.3403	6.7	4.0									
27	.3389	6.6	4.0									
28	.3714	7.0	4.0	5.5	128	13	90	45	7	84	0	
29	.3090	6.7	4.0									
30	.3303	6.9	4.9	4.9	180	19	89	30	1	97	0	
31	.3761	6.7	5.0									
Tot.	10.5898		142.4		2140	252	1488/87.5	1041	79	1549/91.1		
Ave.	.3416		4.6		126	15	88.1	61	5	91.8		0

MONTHLY REPORT OF WASTE TREATMENT PLANT WATER QUALITY
MCBCL 11345/8 (REV. 6-83)

PLANT: HADNOT POINT

MONTH: JANUARY 1986

DATE	PLANT EFFLUENT DATA: FLOW TOTAL DAILY MGPD	PH	CHLORINE RESIDUAL: PLANT mg/1	CHLORINE RESIDUAL: LAB mg/1	5 DAY 20° C BOD: RAW mg/1	5 DAY 20° C BOD: EFFLUENT mg/1	5 DAY 20° C BOD: PERCENT REMOVAL	SUSPENDED SOLIDS: RAW mg/1	SUSPENDED SOLIDS: EFFLUENT mg/1	SUSPENDED SOLIDS: PERCENT REMOVAL	COLIFORM: NUMBER PER 100 ml	COLIFORM: GEOMETRIC MEAN
1	3.623	6.9	4.0	3.5	100	12	88	148	5	97	8	
2	4.078	6.6	4.0	2.1	124	18	85	92	8	91	60	
3	4.004	6.6	4.0	3.2	108	17	84	87	10	89	0	
4	3.853	6.6	4.0									
5	3.875	6.8	4.0	5.9	104	14	87	86	14	84		
6	4.160	6.7	4.0									
7	4.040	6.7	3.0	3.4	136	18	87	124	7	94	100	
8	3.856	6.7	4.0	6.5	136	15	89	126	9	93	4	
9	3.874	6.8	4.0	6.4	152	20	87	122	8	97	6	
10	4.046	6.7	4.0	5.1	144	18	88	150	6	97		
11	3.771	6.8	4.0									
12	3.308	6.8	4.0	3.7	116	17	85	89	8	91		
13	4.318	6.8	4.0									
14	3.999	6.7	5.0	4.2	116	19	84	70	7	90	2	
15	4.006	6.7	4.0	4.0	124	18	85	84	10	88	50	
16	3.806	6.7	5.0	5.0	148	23	84	76	10	87	2	
17	3.610	6.8	4.0	4.4	120	33	73	110	8	93		
18	3.670	6.7	4.0									
19	3.953	6.7	4.0									
20	3.732	6.6	4.0									
21	4.050	6.7	4.0	4.4	120	24	80	62	9	85	40	
22	4.068	6.7	4.0	3.8	120	20	83	100	10	90	60	
23	4.201	6.6	4.0	4.8	132	13	90	50	2	96	0	
24	3.892	6.6	4.0	5.6	148	21	86	96	5	95		
25	3.950	6.7	4.0									
26	4.836	6.7	4.0									
27	4.435	6.6	4.0	4.2	116	23	80	84	8	90	26	
28	3.970	6.8	4.0	4.0	120	13	89	64	10	84	10	
29	4.068	6.8	4.0	3.9	116	14	88	84	5	94	20	
30	4.591	6.8	4.0	3.3	156	20	87	108	7	94	10	
31	4.620	6.8	4.0	3.0	132	27	80	58	9	84	10	
Tot.	124.263		125.0		2788	417	1869/85	2070	175	2013/91.5		
Ave.	4.008		4.0		127	19	85.0	94	8	91.5		10.64

MONTHLY REPORT OF WASTE TREATMENT [illegible] QUALITY
MCBCL 11345/8 (REV. 6-83)

PLANT: RIFLE RANGE

MONTH: JANUARY 1986

DATE	PLANT EFFLUENT DATA: FLOW TOTAL DAILY M GPD	PH	CHLORINE RESIDUAL: PLANT mg/1	CHLORINE RESIDUAL: LAB mg/1	5 DAY 20° C. BOD: RAW mg/1	5 DAY 20° C. BOD: EFFLUENT mg/1	5 DAY 20° C. BOD: PERCENT REMOVAL	SUSPENDED SOLIDS: RAW mg/1	SUSPENDED SOLIDS: EFFLUENT mg/1	SUSPENDED SOLIDS: PERCENT REMOVAL	COLIFORM: NUMBER PER 100 ml	COLIFORM: GEOMETRIC MEAN
1	.23802	6.8	7.2									
2	.28915	6.8	5.1	4.6	40	5	88	216	5	98	0	
3	.25291	6.8	4.2									
4	.24794	6.8	5.0									
5	.26330	6.8	5.2									
6	.26211	6.8	4.0									
7	.26663	6.7	3.1	3.8	184	3	98	7	4	43	0	
8	.25083	6.5	3.6									
9	.33284	6.5	4.5	3.3	40	5	88	33	4	88	0	
10	.33492	6.8	3.0									
11	.30258	6.8	4.0									
12	.36305	6.8	5.0									
13	.25273	6.8	4.0									
14	.24268	6.7	5.0	4.2	112	8	93	324	2	99	0	
15	.24755	6.7	7.6									
16	.231720	6.7	3.2	2.2	28	8	71	13	3	77	0	
17	.20267	6.5	3.0									
18	.23052	6.4	6.0									
19	.21004	6.4	5.5									
20	.25819	6.5	5.1									
21	.41075	6.7	4.0	4.0	24	8	67	16	1	94	0	
22	.22694	6.5	3.0									
23	.24236	6.5	1.7	0.6	56	10	82	50	1	98	0	
24	.21644	6.5	2.8									
25	.24678	6.8	5.0									
26	.25121	6.5	3.4									
27	.24802	6.5	4.0									
28	.24749	6.7	2.9	3.2	48	5	90	194	3	98	8	
29	.24772	6.5	2.8									
30	.22742	6.6	4.5	2.2	40	6	85	10	4	60	0	
31	.21644	6.5	2.8									
Tot.	8.06195		130.2		572	58	762/84.7	863	27	755/84.0		
Ave.	.26006		4.2		64	6	90.6	96	3	96.9		1.26

MONTHLY REPORT OF WASTE TREATMENT PLANT WATER QUALITY
MCBCL 11345/8 (REV. 6-83)

PLANT COURTHOUSE BAY

MONTH JANUARY 1986

	PLANT EFFLUENT DATA				5 DAY 20° C. BOD			SUSPENDED SOLIDS			COLIFORM	
	FLOW	PH	CHLORINE RESIDUAL									
DATE	TOTAL DAILY MGPD		PLANT mg/1	LAB mg/1	RAW mg/1	EFFLUENT mg/1	PERCENT REMOVAL	RAW mg/1	EFFLUENT mg/1	PERCENT REMOVAL	NUMBER PER 100 ml	GEOMETRIC MEAN
1	.38877	6.7	4.0									
2	.37964	6.6	2.8	1.8	68	4	94	33	3	91	0	
3	.46484	6.5	2.1									
4	.45330	6.8	3.3									
5	.44951	6.5	2.0									
6	.43796	6.5	4.3									
7	.45270	6.7	2.6	1.2	120	10	92	68	6	91	7000	
8	.40195	6.5	3.3									
9	.44430	6.5	4.4	4.2	112	15	87	103	3	97	sample error	
10	.45365	6.6	4.0									
11	.44580	6.6	4.0									
12	.43140	6.6	2.8									
13	.50550	6.8	1.8									
14	.44098	6.8	3.2	4.7	72	19	74	68	19	72	0	
15	.43187	6.7	4.0									
16	.40825	6.7	3.4	2.8	80	13	84	60	5	92	10	
17	.40825	6.8	4.1									
18	.41290	6.7	2.8									
19	.38660	6.8	2.6									
20	.40990	6.5	2.3									
21	.27475	6.7	4.0	3.0	84	14	83	96	4	96	0	
22	.40875	6.7	5.1									
23	.44800	6.8	3.8	4.1	168	12	93	108	2	98	6	
24	.40939	6.8	2.7									
25	.43958	6.4	4.2									
26	.43707	6.6	2.2									
27	.47177	6.5	2.1									
28	.37670	6.8	2.9	1.6	228	13	94	110	7	94	12	
29	.41875	6.8	3.4									
30	.36912	6.7	2.7	1.3	204	9	96	202	2	99	2	
31	.42228	6.7	2.4									
Tot.	13.08423		99.3		1136	109	797/88.6	848	51	830/92.2		
Ave.	.42207		3.2		126	12	90.5	94	6	93.6		7.51

MONTHLY REPORT OF WASTE TREATMENT PLANT WATER QUALITY
MCBCL 11345/8 (REV. 6-83)

PLANT ONSLOW BEACH

MONTH JANUARY 1986

DATE	PLANT EFFLUENT DATA: FLOW TOTAL DAILY MGPD	PH	CHLORINE RESIDUAL: PLANT mg/1	CHLORINE RESIDUAL: LAB mg/1	5 DAY 20° C. BOD: RAW mg/1	5 DAY 20° C. BOD: EFFLUENT mg/1	5 DAY 20° C. BOD: PERCENT REMOVAL	SUSPENDED SOLIDS: RAW mg/1	SUSPENDED SOLIDS: EFFLUENT mg/1	SUSPENDED SOLIDS: PERCENT REMOVAL	COLIFORM: NUMBER PER 100 ml	COLIFORM: GEOMETRIC MEAN
1	.10000	6.2	4.0									
2	.10000	6.2	5.0	7.1	56	7	88	12	4	67	0	
3	.10000	6.3	4.6									
4	.10000	6.4	4.0									
5	.10000	6.6	4.0									
6	.10000	6.5	4.2									
7	.10000	6.4	3.6	5.1	64	9	86	13	2	85	2	
8	.10844	6.2	5.6									
9	.11581	6.2	5.1	2.6	136	11	92	27	2	93	sample error	
10	.18934	6.2	4.7									
11	.19355	6.2	4.1									
12	.18835	6.2	4.5									
13	.15703	6.4	5.0									
14	.12730	6.4	5.0	5.0	80	8	90	7	1	86	6	
15	.15199	6.4	5.8									
16	.14207	6.4	4.5	2.2	112	10	91	48	2	96	10	
17	.14376	6.3	4.7									
18	.13300	6.6	6.0									
19	.13629	6.5	6.0									
20	.11422	6.3	5.0									
21	.03161	6.2	3.9	10.2	120	10	92	17	2	88	0	
22	.03020	6.3	4.1									
23	.03037	6.4	6.0	5.1	112	12	89	38	2	95	0	
24	.03156	6.4	4.6									
25	.03049	6.4	4.1									
26	.02642	6.4	4.0									
27	.03220	6.3	4.0									
28	.04004	6.4	3.0	0.2	124	9	93	9	2	78	0	
29	.03416	6.3	4.0									
30	.07696	6.4	5.0	3.3	lab	error		178	1	99	4	
31	.07946	6.4	6.0									
Tot.	3.0446		144.7		804	76	721/90.1	349	18	787/87.4		
Ave.	.09821		4.6		101	10	90.1	39	2	94.9		2.16

EFFLUENT

NPDES PERMIT NO: NC0003239 DISCHARGE NO: 001 MONTH: January YEAR: 1986

FACILITY NAME: Camp Geiger STP CLASS: III COUNTY: Onslow

OPERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

CERTIFIED LABORATORY: Water Quality Control Laboratory

PERSON(s) COLLECTING SAMPLES: STP Operators

CHECK BLOCK IF ORC HAS CHANGED ☐

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME	50050 FLOW EFF ☒ INF ☒ DAILY RATE	00010 TEMPERATURE CELSIUS	00400 pH	00545 SETTLEABLE MATTER	50060 RESIDUAL CHLORINE	00310 BOD_5 20°C	00340 COD	00610 AMMONIA NITROGEN	00500 TOTAL RESIDUE	00530 TOTAL SUSPENDED RESIDUE	31616 FECAL COLIFORM Geometric Mean	00300 DISSOLVED OXYGEN	ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW			
		HRS	MGD	C°	UNIT	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L	MG/L	/100 ML	MG/L				
1	08	24	.6258		6.6		4.0	5				6	0					
2	08	24	.6641		6.8		3.6	10				11	0					
3	08	24	.6633		7.0		3.8	11				4	0					
4	08	24	.6338		7.0		4.0											
5	08	24	.6649		7.0		4.0											
6	08	24	.6717		7.0		4.0											
7	08	24	.8837		7.0		4.0	13				7	2					
8	08	24	.7731		7.0		3.0	7				4	0					
9	08	24	.8663		7.0		4.0	11				9	0					
10	08	24	.7944		7.0		4.0	16				8						
11	08	24	.7851		7.0		3.7											
12	08	24	.7884		7.0		4.0											
13	08	24	.7903		7.2		4.0											
14	08	24	.8028		7.2		4.0	15				1	0					
15	08	24	1.0270		7.2		4.0	20				7	0					
16	08	24	1.3407		7.2		4.0	21				5	0					
17	08	24	1.2913		7.2		4.0	28				8						
18	08	24	1.2164		6.8		4.0											
19	08	24	1.1900		6.8		4.0											
20	08	24	1.2533		6.8		4.0											
21	08	24	1.3330		6.9		4.0	7				6	0					
22	08	24	1.2535		7.0		3.6	8				7	0					
23	08	24	1.2145		6.9		4.0	12				5	0					
24	08	24	1.3213		6.8		4.0	11				2						
25	08	24	1.3640		7.0		4.0											
26	08	24	1.6927		7.0		4.0											
27	08	24	1.4410		6.4		4.0	16				6	0					
28	08	24	1.2975		6.8		4.0	14				8	0					
29	08	24	1.1106		6.8		4.0	8				4	2					
30	08	24	1.2553		7.0		4.0	11				5	0					
31	08	24	.7430		6.8		4.0	15				8	SE					
Average			1.0243				3.9	13				6	1.09					
Max.			1.6927		7.2		4.0	28				11	2					
Min.			.6258		6.4		3.0	5				1	0					
Comp.(C)/Grab(G)					G		G	C				C	G					
Monthly Limit					6-9			30				30	200					

DEM Form MR-1 (11/84

SE=Sample error

ENCLOSURE (1)

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [x]
(Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [ ]
(Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

_____

_____

_____

_____

_____

_____

I certify that this Report is accurate
and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

EFFLUENT

NPDES PERMIT NO: NC0003239 DISCHARGE NO: 002 MONTH: January YEAR: 1986

FACILITY NAME: Tarawa Terrace STP CLASS: III COUNTY: Onslow

OPERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

CERTIFIED LABORATORY: Water Quality Control Laboratory

PERSON(s) COLLECTING SAMPLES: STP Operators

CHECK BLOCK IF ORC HAS CHANGED ☐

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME	50050 FLOW EFF ☒ INF ☐ DAILY RATE	00010 TEMPERATURE CELSIUS	00400 pH	00545 SETTLEABLE MATTER	50060 RESIDUAL CHLORINE	00310 BOD5 20°C	00340 COD	00610 AMMONIA NITROGEN	00500 TOTAL RESIDUE	00530 TOTAL SUSPENDED RESIDUE	31616 FECAL COLIFORM Geometric Mean	00300 DISSOLVED OXYGEN	ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW			
		HRS	MGD	C°	UNIT	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L	MG/L	/100 ML	MG/L				
1	0824		.9043		6.5		4.0	28				11	0					
2	0824		.8479		6.6		4.5	19				8	4					
3	0824		.8948		6.5		5.0	14				8	0					
4	0824		.8557		6.4		4.0											
5	0824		.8725		6.5		4.5											
6	0824		.9488		6.6		4.0											
7	0824		.8492		6.5		4.0	22				15	10					
8	0824		.8659		6.5		4.0	24				14	0					
9	0824		.9245		6.5		4.5	23				10	2					
10	0824		.8218		6.6		4.5	25				9						
11	0824		.9128		6.5		5.0											
12	0824		.9036		6.5		5.0											
13	08	24	.8791		6.5		4.5											
14	08	24	.8841		6.6		4.5	28				10	6					
15	08	24	.8220		6.5		4.0	SE				13	0					
16	08	24	.8171		6.6		5.0	30				12	0					
17	08	24	.8399		6.6		4.0	31				8						
18	08	24	.9090		6.6		5.0											
19	08	24	.9248		6.5		5.0											
20	08	24	.9302		6.2		5.0											
21	08	24	.7291		6.5		5.0	39				11	0					
22	08	24	.8047		6.6		4.0	36				12	0					
23	08	24	.8436		6.5		5.0	33				6	0					
24	08	24	.7794		6.4		4.0	35				11						
25	08	24	1.0254		6.4		4.0											
26	08	24	1.0824		6.5		4.0											
27	08	24	.9084		6.3		4.0	37				13	0					
28	08	24	.9445		6.4		4.0	21				12	2					
29	08	24	.9448		6.5		4.0	28				10	0					
30	08	24	.8550		6.6		5.0	25				7	0					
31	08	24	.9041		6.6		4.0	28				11	0					
Average			.8848				4.4	28				11	1.50					
Max.			1.0824		6.6		4.0	39				15	10					
Min.			.7291		6.2		4.0	14				6	0					
Comp.(C)/Grab(G)					G		G	C				C	G					
Monthly Limit					6-9			30				30	200					

DEM Form MR-1 (11/84

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [ ] (Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [X] (Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

See cover letter for explanation.

I certify that this Report is accurate and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

EFFLUENT

NPDES PERMIT NO: NC0003239 DISCHARGE NO: 003 MONTH: January YEAR: 1986

FACILITY NAME: Camp Johnson STP CLASS: II COUNTY: Onslow

OPERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

CERTIFIED LABORATORY: Water Quality Control Laboratory

CHECK BLOCK IF ORC HAS CHANGED ☐

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

PERSON(s) COLLECTING SAMPLES: STP OPerators

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME	50050 FLOW EFF ☒ INF ☐ DAILY RATE	00010 TEMPERATURE CELSIUS	00400 pH	00545 SETTLEABLE MATTER	50060 RESIDUAL CHLORINE	00310 BOD5 20°C	00340 COD	00610 AMMONIA NITROGEN	00500 TOTAL RESIDUE	00530 TOTAL SUSPENDED RESIDUE	31616 FECAL COLIFORM Geometric Mean	00300 DISSOLVED OXYGEN	ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW			
		HRS	MGD	C°	UNIT	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L	MG/L	/100 ML	MG/L				
1	08	8	.3415		7.0		6.0	4				3	0					
2	08	8	.3427		7.0		6.0	9				4	0					
3	08	8	.3409		6.3		3.0	7				6	0					
4	08	8	.3310		6.7		3.0											
5	08	8	.3389		6.3		6.0											
6	08	8	.3440		6.5		4.0											
7	08	8	.3378		6.5		5.0	11				2	SE					
8	08	8	.3673		6.5		5.0	13				6	0					
9	08	8	.3264		6.6		4.0	12				5	0					
10	08	8	.3449		6.5		5.0	12				5						
11	08	8	.3411		6.6		3.0											
12	08	8	.3387		6.5		5.0											
13	08	8	.3313		6.5		6.0											
14	08	8	.3455		6.7		5.0	15				3	0					
15	08	8	.3440		6.6		5.0	18				4	0					
16	08	8	.3705		6.5		5.0	18				6	0					
17	08	8	.3230		6.7		4.0	23				7						
18	08	8	.3394		6.6		6.0											
19	08	8	.3313		6.6		0.5											
20	08	8	.3299		6.6		5.0											
21	08	8	.3408		6.6		5.0	24				9	0					
22	08	8	.3424		6.6		5.0	17				6	0					
23	08	8	.3440		6.5		5.0	19				1	0					
24	08	8	.3410		6.7		5.0	18				4						
25	08	8	.3455		6.6		5.0											
26	08	8	.3403		6.7		4.0											
27	08	8	.3389		6.6		4.0											
28	08	8	.3714		7.0		4.0	13				7	0					
29	08	8	.3090		6.7		4.0											
30	08	8	.3303		6.9		4.9	19				1	0					
31	08	8	.3761		6.7		5.0											
Average			.3416				4.6	15				5	0					
Max.			.3761		7.0		6.0	24				9	0					
Min.			.3090		6.3		0.5	4				1	0					
Comp.(C)/Grab(G)					G		G	C				C	G					
Monthly Limit					6-9			30				30	200					

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [X]
(Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [ ]
(Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

_____
_____
_____
_____
_____
_____

I certify that this Report is accurate
and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

EFFLUENT

NPDES PERMIT NO: NC0003239 DISCHARGE NO: 004 MONTH: January YEAR: 1986

FACILITY NAME: Hadnot Point STP CLASS: IV COUNTY: Onslow

OPERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

CERTIFIED LABORATORY: Water Quality Control Laboratory

CHECK BLOCK IF ORC HAS CHANGED ☐

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

PERSON(s) COLLECTING SAMPLES: STP Operators

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME	50050 FLOW EFF ☒ INF ☒ DAILY RATE	00010 TEMPERATURE CELSIUS	00400 pH	00545 SETTLEABLE MATTER	50060 RESIDUAL CHLORINE	00310 BOD_5 20°C	00340 COD	00610 AMMONIA NITROGEN	00500 TOTAL RESIDUE	00530 TOTAL SUSPENDED RESIDUE	31616 FECAL COLIFORM Geometric Mean	00300 DISSOLVED OXYGEN	31504 ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW: TOTAL COLIFORM *GEO MEAN			
		HRS	MGD	C°	UNIT	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L	MG/L	/100 ML	MG/L	/100ml			
1	08	24	3.623		6.9		4.0	12				5			8			
2	08	24	4.078		6.6		4.0	18				8			60			
3	08	24	4.004		6.6		4.0	17				10			0			
4	08	24	3.853		6.6		4.0											
5	08	24	3.875		6.8		4.0	14				14						
6	08	24	4.160		6.7		4.0											
7	08	24	4.040		6.7		3.0	18				7			100			
8	08	24	3.856		6.7		4.0	15				9			4			
9	08	24	3.874		6.8		4.0	20				8			6			
10	08	24	4.046		6.7		4.0	18				6						
11	08	24	3.771		6.8		4.0											
12	08	24	3.308		6.8		4.0	17				8						
13	08	24	4.318		6.8		4.0											
14	08	24	3.999		6.7		5.0	19				7			2			
15	08	24	4.006		6.7		4.0	18				10			50			
16	08	24	3.806		6.7		5.0	23				10			2			
17	08	24	3.610		6.8		4.0	33				8						
18	08	24	3.670		6.7		4.0											
19	08	24	3.953		6.7		4.0											
20	08	24	3.732		6.6		4.0											
21	08	24	4.050		6.7		4.0	24				9			40			
22	08	24	4.068		6.7		4.0	20				10			60			
23	08	24	4.201		6.6		4.0	13				2			0			
24	08	24	3.892		6.6		4.0	21				5						
25	08	24	3.950		6.7		4.0											
26	08	24	4.836		6.7		4.0											
27	08	24	4.435		6.6		4.0	23				8			26			
28	08	24	3.970		6.8		4.0	13				10			10			
29	08	24	4.068		6.8		4.0	14				5			20			
30	08	24	4.591		6.8		4.0	20				7			10			
31	08	24	4.620		6.8		4.0	27				9			10			
Average			4.008				4.0	19				8			10.64			
Max.			4.836		6.9		5.0	33				14			100			
Min.			3.308		6.6		3.0	12				2			0			
Comp.(C)/Grab(G)					G		G	C				C			G			
Monthly Limit					6-9			30				30			70			

DEM Form MR-1 11/84

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [X] (Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [ ] (Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

_____

_____

_____

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_____

_____

I certify that this Report is accurate and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

EFFLUENT

NPDES PERMIT NO: NC0003239 DISCHARGE NO: 005 MONTH: January YEAR: 1986

FACILITY NAME: Rifle Range STP CLASS: II COUNTY: Onslow

OPERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

CERTIFIED LABORATORY: Water Quality Control Laboratory

PERSON(s) COLLECTING SAMPLES: STP Operators

CHECK BLOCK IF ORC HAS CHANGED ☐

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME	50050 FLOW EFF ☒ INF ☐ DAILY RATE	00010 TEMPERATURE CELSIUS	00400 pH	00545 SETTLEABLE MATTER	50060 RESIDUAL CHLORINE	00310 BOD_5 20°C	00340 COD	00610 AMMONIA NITROGEN	00500 TOTAL RESIDUE	00530 TOTAL SUSPENDED RESIDUE	31616 FECAL COLIFORM Geometric Mean	00300 DISSOLVED OXYGEN	31504 ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW: TOTAL COLIFORM GEO MEAN			
	HRS		MGD	C°	UNIT	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L	MG/L	/100 ML	MG/L	/100 ML			
1	08	8	.23802		6.8		7.2											
2	08	8	.28915		6.8		5.1	5				5			0			
3	08	8	.25291		6.8		4.2											
4	08	8	.24794		6.8		5.0											
5	08	8	.26330		6.8		5.2											
6	08	8	.26211		6.8		4.0											
7	08	8	.26663		6.7		3.1	3				4			0			
8	08	8	.25083		6.5		3.6											
9	08	8	.33284		6.5		4.5	5				4			0			
10	08	8	.33492		6.8		3.0											
11	08	8	.30258		6.8		4.0											
12	08	8	.36305		6.8		5.0											
13	08	8	.25273		6.8		4.0											
14	08	8	.24268		6.7		5.0	8				2			0			
15	08	8	.24755		6.7		7.6											
16	08	8	.23172		6.7		3.2	8				3			0			
17	08	8	.20267		6.5		3.0											
18	08	8	.23052		6.4		6.0											
19	08	8	.21004		6.4		5.5											
20	08	8	.25819		6.5		5.1											
21	08	8	.41075		6.7		4.0	8				1			0			
22	08	8	.22694		6.5		3.0											
23	08	8	.24236		6.5		1.7	10				1			0			
24	08	8	.21644		6.5		2.8											
25	08	8	.24678		6.8		5.0											
26	08	8	.25121		6.5		3.4											
27	08	8	.24802		6.5		4.0											
28	08	8	.24749		6.7		2.9	5				3			8			
29	08	8	.24772		6.5		2.8											
30	08	8	.22742		6.6		4.5	6				4			0			
31	08	8	.21644		6.5		2.8											
Average			.26006				4.2	6				3			1.26			
Max.			.41075		6.8		7.6	10				5			8			
Min.			.20267		6.4		1.7	3				1			0			
Comp.(C)/Grab(G)					G		G	C				C			G			
Monthly Limit					6-9			30				30			70			

DEM Form MR-1 (11/84)

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [X]
(Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [ ]
(Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

_____
_____
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_____
_____

I certify that this Report is accurate
and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

EFFLUENT

NPDES PERMIT NO: NC0003239 DISCHARGE NO: 006 MONTH: January YEAR: 1986

FACILITY NAME: Courthouse Bay STP CLASS: II COUNTY: Onslow

OPERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

CERTIFIED LABORATORY: Water Quality Control Laboratory

CHECK BLOCK IF ORC HAS CHANGED ☐

PERSON(s) COLLECTING SAMPLES: STP Operators

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME HRS	50050 FLOW EFF ☒ INF ☐ DAILY RATE MGD	00010 TEMPERATURE CELSIUS C°	00400 pH UNIT	00545 SETTLEABLE MATTER ML/L	50060 RESIDUAL CHLORINE MG/L	00310 BOD_5 20°C MG/L	00340 COD MG/L	00610 AMMONIA NITROGEN MG/L	00500 TOTAL RESIDUE MG/L	00530 TOTAL SUSPENDED RESIDUE MG/L	31616 FECAL COLIFORM Geometric Mean /100 ML	00300 DISSOLVED OXYGEN MG/L	31504 ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW: TOTAL COLIFORM + GEO MEAN /100 ML			
1	08	8	.38877		6.7		4.0											
2	08	8	.37964		6.6		2.8	4				3			0			
3	08	8	.46484		6.5		2.1											
4	08	8	.45330		6.8		3.3											
5	08	8	.44951		6.5		2.0											
6	08	8	.43796		6.5		4.3											
7	08	8	.45270		6.7		2.6	10				6			7000			
8	08	8	.40195		6.5		3.3											
9	08	8	.44430		6.5		4.4	15				3			SE			
10	08	8	.45365		6.6		4.0											
11	08	8	.44580		6.6		4.0											
12	08	8	.43140		6.6		2.8											
13	08	8	.50550		6.8		1.8											
14	08	8	.44098		6.8		3.2	19				19			0			
15	08	8	.43187		6.7		4.0											
16	08	8	.40825		6.7		3.4	13				5			10			
17	08	8	.40825		6.8		4.1											
18	08	8	.41290		6.7		2.8											
19	08	8	.38660		6.8		2.6											
20	08	8	.40990		6.5		2.3											
21	08	8	.27475		6.7		4.0	14				4			0			
22	08	8	.40875		6.7		5.1											
23	08	8	.44800		6.8		3.8	12				2			6			
24	08	8	.40939		6.8		2.7											
25	08	8	.43958		6.4		4.2											
26	08	8	.43707		6.6		2.2											
27	08	8	.47177		6.5		2.1											
28	08	8	.37670		6.8		2.9	13				7			12			
29	08	8	.41875		6.8		3.4											
30	08	8	.36912		6.7		2.7	9				2			2			
31	08	8	.42228		6.7		2.4											
Average			.42228				3.2	12				6			7.51			
Max.			.50550		6.8		4.4	19				19			7000			
Min.			.27475		6.4		1.8	4				2			0			
Comp.(C)/Grab(G)					G		G	C				C			G			
Monthly Limit					6-9			30				30			70			

DEM Form MR-1 (11/84

SE=Sample error

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [X]
(Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [ ]
(Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

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_____

I certify that this Report is accurate
and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

EFFLUENT

NPDES PERMIT NO: NC0003239 DISCHARGE NO: 007 MONTH: January YEAR: 1986

FACILITY NAME: Onslow Beach STP CLASS: II COUNTY: Onslow

OPERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

CERTIFIED LABORATORY: Water Quality Control Laboratory

CHECK BLOCK IF ORC HAS CHANGED ☐

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

PERSON(s) COLLECTING SAMPLES: STP Operators

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME	50050 FLOW EFF ☐ INF ☒ DAILY RATE	00010 TEMPERATURE CELSIUS	00400 pH	00545 SETTLEABLE MATTER	50060 RESIDUAL CHLORINE	00310 BOD5 20°C	00340 COD	00610 AMMONIA NITROGEN	00500 TOTAL RESIDUE	00530 TOTAL SUSPENDED RESIDUE	31616 FECAL COLIFORM Geometric Mean	00300 DISSOLVED OXYGEN	31504 TOTAL COLIFORM *GEO MEAN			
															ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW			
		HRS	MGD	C°	UNIT	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L	MG/L	/100 ML	MG/L	/100 ML			
1	08	8	.10000		6.2		4.0											
2	08	8	.10000		6.2		5.0	7				4			0			
3	08	8	.10000		6.3		4.6											
4	08	8	.10000		6.4		4.0											
5	08	8	.10000		6.6		4.0											
6	08	8	.10000		6.5		4.2											
7	08	8	.10000		6.4		3.6	9				2			2			
8	08	8	.10844		6.2		5.6											
9	08	8	.11581		6.2		5.1	11				2			SE			
10	08	8	.18934		6.2		4.7											
11	08	8	.19355		6.2		4.1											
12	08	8	.18835		6.2		4.5											
13	08	8	.15703		6.4		5.0											
14	08	8	.12730		6.4		5.0	8				1			6			
15	08	8	.15199		6.4		5.8											
16	08	8	.14207		6.4		4.5	10				2			10			
17	08	8	.14376		6.3		4.7											
18	08	8	.13300		6.6		6.0											
19	08	8	.13629		6.5		6.0											
20	08	8	.11422		6.3		5.0											
21	08	8	.03161		6.2		3.9	10				2			0			
22	08	8	.03020		6.3		4.1											
23	08	8	.03037		6.4		6.0	12				2			0			
24	08	8	.03156		6.4		4.6											
25	08	8	.03049		6.4		4.1											
26	08	8	.02642		6.4		4.0											
27	08	8	.03220		6.3		4.0											
28	08	8	.04004		6.4		3.0	9				2			0			
29	08	8	.03416		6.3		4.0											
30	08	8	.07696		6.4		5.0	LE				1			4			
31	08	8	.07946		6.4		6.0											
Average			.09821				4.6	10				2			2.16			
Max.			.19355		6.6		6.0	12				4			10			
Min.			.02642		6.2		3.0	7				1			0			
Comp.(C)/Grab(G)					G		G	C				C			G			
Monthly Limit					6-9			30				30			70			

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [X] (Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [ ] (Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

_____

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I certify that this Report is accurate and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

EFFLUENT

PDES PERMIT NO: NC0003239 DISCHARGE NO: 014 MONTH: January YEAR: 1986

CILITY NAME: Onslow Beach Water Treatment Pond CLASS: NA COUNTY: Onslow

PERATOR IN RESPONSIBLE CHARGE (ORC): Mack D. Davis GRADE: IV

RTIFIED LABORATORY: Water Quality Control Laboratory

CHECK BLOCK IF ORC HAS CHANGED ☐

PERSON(s) COLLECTING SAMPLES: WTP Operators

Mail original and one copy to:
ATT: Central Files
Division of Environmental Management
N C Department of NRCD
P O Box 27687
Raleigh, North Carolina 27611

I CERTIFY THAT THIS REPORT IS ACCURATE AND COMPLETE TO THE BEST OF MY KNOWLEDGE.

X _____
Signature of operator in responsible charge

DATE	TIME 2400 CLOCK	COMPOSITE TIME	50050 FLOW EFF ☐ INF ☐ DAILY RATE	00010 TEMPERATURE CELSIUS	00400 pH	00545 SETTLEABLE MATTER	50060 RESIDUAL CHLORINE	00310 BOD_5 20°C	00340 COD	00610 AMMONIA NITROGEN	00500 TOTAL RESIDUE	00530 TOTAL SUSPENDED RESIDUE	31616 FECAL COLIFORM Geometric Mean	00300 DISSOLVED OXYGEN	ENTER PARAMETER CODE ABOVE NAME AND UNITS BELOW			
		HRS	MGD	C°	UNIT	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L	MG/L	/100 ML	MG/L				
1																		
2																		
3																		
4																		
5																		
6																		
7					8.2							0.8						
8																		
9																		
10																		
11																		
12																		
13																		
14					7.9							4.0						
15																		
16																		
17																		
18																		
19																		
20																		
21					8.1							6.0						
22																		
23																		
24																		
25																		
26																		
27																		
28																		
29																		
30																		
31																		
Average												3.6						
Max.					8.2							6.0						
Min.					7.9							0.8						
Comp.(C)/Grab(G)					G							C						
Monthly Limit					6-10							30						

Facility Status: (Please check one of the following)

All monthly averages and / or other limitation do meet permit monitoring requirements [X]
(Compliant)

All monthly averages and / or other limitation do not meet permit monitoring requirements [ ]
(Noncompliant)

If the facility is noncompliant, please comment on corrective actions being taken in respect to equipment, operation, maintenance, etc. and a time table for improvements to be made.
(Attach additional sheets if necessary)

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I certify that this Report is accurate and complete to the best of my knowledge:

_____
Signature of Permittee

PARAMETER CODES

00010	Temperature	00556	Oil and Grease	00950	Dissolved Fluoride	01077	Silver	39516	PCBS
00065	Stream Stage	00600	Total Nitrogen	01002	Total Arsenic	01087	Total Vanadium	39941	Roundup
00076	Turbidity	00610	Ammonia Nitrogen	01027	Cadmium	01092	Zinc	50047	Max. flow during 24-hr. period
00300	Dissolved Oxygen	00625	Total Kjeldahl Nitrogen	01032	Hexavalent Chromium	01105	Total Aluminum	50048	Min. flow during 24-hr. period
00310	BOD_5	00665	Total Phosphorous	01034	Chromium	01147	Total Selenium	50050	Flow
00340	COD	00720	Cyanide	01037	Total Cobalt	31504	Total Coliform	50060	Total Residual Chlorine
00400	pH	00745	Total Sulfide	01042	Copper	31614	Fecal Coliform, MPN, Tube	71880	Formaldehyde
00500	Total Solids	00927	Total Magnesium	01045	Total Iron	31616	Fecal Coliform	71900	Mercury
00530	TSS	00929	Total Sodium	01051	Lead	32730	Total Phenolics	81318	Ferrocyanides
00545	Settleable Solids	00940	Total Chloride	01067	Nickel	38260	MBAS	85652	Time

The monthly average for fecal coliform is to be reported as a geometric MEAN.

If using alternate units for reporting data, please designate.

Influent

NPDES NO: NC0003239 DISCHARGE NO: 001 MONTH: January YEAR: 1986

FACILITY NAME: Camp Geiger STP COUNTY: Onslow

			00400	00010	00545	00310	00610	00500	00530	00340							
Date	Time	Composite Time	PH	Temperature (Celsius)	Settleable Matter	BOD5 20 °C	Ammonia Nitrogen	Total Residue	Total Suspended Residue	COD	ENTER PARAMETER CODE ABOVE & NAME AND UNITS BELOW						
		HRS	STD UNITS	°C	MI/L	MG/L	MG/L	MG/L	MG/L	MG/L							
1	08	24				104			136								
2	08	24				116			80								
3	08	24				152			130								
4	08	24															
5	08	24															
6	08	24															
7	08	24				132			51								
8	08	24				104			63								
9	08	24				112			166								
10	08	24				172			114								
11	08	24															
12	08	24															
13	08	24															
14	08	24				152			72								
15	08	24				160			202								
16	08	24				160			118								
17	08	24				156			104								
18	08	24															
19	08	24															
20	08	24															
21	08	24				92			42								
22	08	24				128			98								
23	08	24				124			76								
24	08	24				112			68								
25	08	24															
26	08	24															
27	08	24				92			44								
28	08	24				236			97								
29	08	24				124			118								
30	08	24				136			72								
31	08	24				172			126								
AVERAGE						137			99								
MONTHLY MAXIMUM						236			202								
MONTHLY MINIMUM						92			42								
SAMPLE TYPE C or G						C			C								

DEM Form MR-2 (11/84)

Influent

NPDES NO: NC0003239 DISCHARGE NO: 002 MONTH: January YEAR: 1986

FACILITY NAME: Tarawa Terrace STP COUNTY: Onslow

			00400	00010	00545	00310	00610	00500	00530	00340							
											ENTER PARAMETER CODE ABOVE & NAME AND UNITS BELOW						
Date	Time	Composite Time	PH	Temperature (Celsius)	Settleable Matter	BOD_5 20 °C	Ammonia Nitrogen	Total Residue	Total Suspended Residue	COD							
		HRS	STD UNITS	°C	ml/L	MG/L	MG/L	MG/L	MG/L	MG/L							
1	08	24				172			72								
2	08	24				216			165								
3	08	24				184			194								
4	08	24															
5	08	24															
6	08	24															
7	08	24				204			85								
8	08	24				192			244								
9	08	24				188			89								
10	08	24				192			96								
11	08	24															
12	08	24															
13	08	24															
14	08	24				176			102								
15	08	24				SE			248								
16	08	24				200			148								
17	08	24				192			262								
18	08	24															
19	08	24															
20	08	24															
21	08	24				300			346								
22	08	24				164			106								
23	08	24				184			76								
24	08	24				184			86								
25	08	24															
26	08	24															
27	08	24				156			69								
28	08	24				184			76								
29	08	24				164			119								
30	08	24				136			206								
31	08	24				120			126								
AVERAGE						185			146								
MONTHLY MAXIMUM						300			346								
MONTHLY MINIMUM						120			69								
SAMPLE TYPE C or G						C			C								

Influent

NPDES NO: NC0003239 DISCHARGE NO: 003 MONTH: January YEAR: 1986

FACILITY NAME: Camp Johnson STP COUNTY: Onslow

			00400	00010	00545	00310	00610	00500	00530	00340							
Date	Time	Composite Time	PH	Temperature (Celsius)	Settleable Matter	BOD_5 20 °C	Ammonia Nitrogen	Total Residue	Total Suspended Residue	COD	ENTER PARAMETER CODE ABOVE & NAME AND UNITS BELOW						
		HRS	STD UNITS	°C	Ml/L	MG/L	MG/L	MG/L	MG/L	MG/L							
1	08	8				84			43								
2	08	8				112			56								
3	08	8				52			43								
4	08	8															
5	08	8															
6	08	8															
7	08	8				124			53								
8	08	8				100			49								
9	08	8				124			34								
10	08	8				104			72								
11	08	8															
12	08	8															
13	08	8															
14	08	8				188			88								
15	08	8				96			84								
16	08	8				84			46								
17	08	8				88			140								
18	08	8															
19	08	8															
20	08	8															
21	08	8				136			56								
22	08	8				228			144								
23	08	8				152			34								
24	08	8				160			24								
25	08	8															
26	08	8															
27	08	8															
28	08	8				128			45								
29	08	8															
30	08	8				180			30								
31	08	8															
AVERAGE						126			61								
MONTHLY MAXIMUM						228			144								
MONTHLY MINIMUM						52			24								
SAMPLE TYPE C or G						C			C								

EM Form MR-2 (11/84)

Influent

NPDES NO: NC0003239 DISCHARGE NO: 004 MONTH: January YEAR: 1986

FACILITY NAME: Hadnot Point STP COUNTY: Onslow

			00400	00010	00545	00310	00610	00500	00530	00340							
Date	Time	Composite Time	PH	Temperature (Celsius)	Settleable Matter	BOD_5 20 °C	Ammonia Nitrogen	Total Residue	Total Suspended Residue	COD	ENTER PARAMETER CODE ABOVE & NAME AND UNITS BELOW						
		HRS	STD UNITS	°C	ML/L	MG/L	MG/L	MG/L	MG/L	MG/L							
1	08	24				100			148								
2	08	24				124			92								
3	08	24				108			87								
4	08	24															
5	08	24				104			86								
6	08	24															
7	08	24				136			124								
8	08	24				136			126								
9	08	24				152			122								
10	08	24				144			150								
11	08	24															
12	08	24				116			89								
13	08	24															
14	08	24				116			70								
15	08	24				124			84								
16	08	24				148			76								
17	08	24				120			110								
18	08	24															
19	08	24															
20	08	24															
21	08	24				120			62								
22	08	24				120			100								
23	08	24				132			50								
24	08	24				148			96								
25	08	24															
26	08	24															
27	08	24				116			84								
28	08	24				120			64								
29	08	24				116			84								
30	08	24				156			108								
31	08	24				132			58								
AVERAGE						127			94								
MONTHLY MAXIMUM						156			150								
MONTHLY MINIMUM						100			58								
SAMPLE TYPE C or G						C			C								

DEM Form MR-2 (11/84)

Influent

NPDES NO: NC0003239 DISCHARGE NO: 005 MONTH: January YEAR: 1986

FACILITY NAME: Rifle Range STP COUNTY: Onslow

Date	Time	Composite Time	PH	Temperature (Celsius)	Settleable Matter	BOD_5 20 °C	Ammonia Nitrogen	Total Residue	Total Suspended Residue	COD						
			00400	00010	00545	00310	00610	00500	00530	00340						
											ENTER PARAMETER CODE ABOVE & NAME AND UNITS BELOW					
		HRS	STD UNITS	°C	Ml/L	MG/L	MG/L	MG/L	MG/L	MG/L						
1	08	8														
2	08	8				40			216							
3	08	8														
4	08	8														
5	08	8														
6	08	8														
7	08	8				184			7							
8	08	8														
9	08	8				40			33							
10	08	8														
11	08	8														
12	08	8														
13	08	8														
14	08	8				112			324							
15	08	8														
16	08	8				28			13							
17	08	8														
18	08	8														
19	08	8														
20	08	8														
21	08	8				24			16							
22	08	8														
23	08	8				56			50							
24	08	8														
25	08	8														
26	08	8														
27	08	8														
28	08	8				48			194							
29	08	8														
30	08	8				40			10							
31	08	8														
AVERAGE						64			96							
MONTHLY MAXIMUM						184			194							
MONTHLY MINIMUM						24			7							
SAMPLE TYPE C or G						C			C							

DEM Form MR-2 (11/84)

Influent

NPDES NO: NC0003239 DISCHARGE NO: 006 MONTH: January YEAR: 1986

FACILITY NAME: Courthouse Bay STP COUNTY: Onslow

DATE	Time	Composite Time	PH	Temperature (Celsius)	Settleable Matter	BOD_5 20 °C	Ammonia Nitrogen	Total Residue	Total Suspended Residue	COD	ENTER PARAMETER CODE ABOVE & NAME AND UNITS BELOW						
			00400	00010	00545	00310	00610	00500	00530	00340							
		HRS	STD UNITS	°C	Ml/L	MG/L	MG/L	MG/L	MG/L	MG/L							
1	08	8															
2	08	8				68			33								
3	08	8															
4	08	8															
5	08	8															
6	08	8															
7	08	8				120			68								
8	08	8															
9	08	8				112			103								
10	08	8															
11	08	8															
12	08	8															
13	08	8															
14	08	8				72			68								
15	08	8															
16	08	8				80			60								
17	08	8															
18	08	8															
19	08	8															
20	08	8															
21	08	8				84			96								
22	08	8															
23	08	8				168			108								
24	08	8															
25	08	8															
26	08	8															
27	08	8															
28	08	8				228			110								
29	08	8															
30	08	8				204			202								
31	08	8															
AVERAGE						126			94								
MONTHLY MAXIMUM						228			202								
MONTHLY MINIMUM						68			33								
SAMPLE TYPE C or G						C			C								

DEM Form MR-2 (11/84)

Influent

NPDES NO: NC0003239 DISCHARGE NO: 007 MONTH: January YEAR: 1986

FACILITY NAME: Onslow Beach STP COUNTY: Onslow

DATE	Time	Composite Time	PH	Temperature (Celsius)	Settleable Matter	BOD_5 20 °C	Ammonia Nitrogen	Total Residue	Total Suspended Residue	COD						
			00400	00010	00545	00310	00610	00500	00530	00340						
											ENTER PARAMETER CODE ABOVE & NAME AND UNITS BELOW					
		HRS	STD UNITS	°C	MI/L	MG/L	MG/L	MG/L	MG/L	MG/L						
1	08	8														
2	08	8				56			12							
3	08	8														
4	08	8														
5	08	8														
6	08	8														
7	08	8				64			13							
8	08	8														
9	08	8				136			27							
10	08	8														
11	08	8														
12	08	8														
13	08	8														
14	08	8				80			7							
15	08	8														
16	08	8				112			48							
17	08	8														
18	08	8														
19	08	8														
20	08	8														
21	08	8				120			17							
22	08	8														
23	08	8				112			38							
24	08	8														
25	08	8														
26	08	8														
27	08	8														
28	08	8				124			9							
29	08	8														
30	08	8				LE			178							
31	08	8														
AVERAGE						101			39							
MONTHLY MAXIMUM						136			178							
MONTHLY MINIMUM						56			7							
SAMPLE TYPE C or G						C			C							

DEM Form MR-2 (11/84) LE=Lab error

STORM DRAINS

NPDES NO: NC0003239 MONTH: January YEAR: 1986

LOCATION: Marine Corps Base, Camp Lejeune, NC COUNTY: Onslow

STORM DRAIN NUMBER	DATE COLLECTED	FLOW 50050	pH 00400	TOTAL SUSPENDED RESIDUE 00530	OIL & GREASE 00556
32	23 Jan 86	15,746,400	7.0	14	4.0
33	23 Jan 86	388,800	7.4	2	4.3
36	23 Jan 86	No flow			
37	23 Jan 86	No flow			
38	23 Jan 86	No flow			
48	23 Jan 86	1,399,680	7.1	4	5.3
49	23 Jan 86	3,149,280	7.1	2	4.0
50	23 Jan 86	Filled in			
51	23 Jan 86	No flow			
52	23 Jan 86	97,200	6.8	2	1.9
53	23 Jan 86	Dry			
54	23 Jan 86	24,300	6.9	3	1.7
55	23 Jan 86	24,300	6.9	14	1.5
56	23 Jan 86	No flow			
57	23 Jan 86	174,960	7.5	11	0.9
58	23 Jan 86	No flow			
59	23 Jan 86	1,749,600	6.9	0.4	0
60	23 Jan 86	Dry			
61	23 Jan 86	20,995,200	7.3	3	0.1
62	23 Jan 86	No flow			
63	23 Jan 86	1,166,400	6.6	6	0
64	23 Jan 86	29,160,000	6.8	1	0
65	23 Jan 86	12,150	8.0	18	0
89	23 Jan 86	No flow			
90	23 Jan 86	14,580	5.8	1	0

Parameter	Units	Limits
Flow	GPD	none
pH	none	6 - 9
TSR	mg/l	50 mg/l
O & G	mg/l	15 mg/l

NPDES NO: NC0003239 DISCHARGE NO: 001 MONTH: January YEAR: 1986

FACILITY NAME: Camp Geiger STP COUNTY: Onslow

STREAM: New River STREAM: New River

LOCATION: RW01- At Hughes Marina LOCATION: RW04- Hospital Point

Upstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD_5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
4	10.2	7.2	6.9		276	0.6				
4	10.2	[illegible]	6.9		276	0.6				
4	10.2	7.2	6.9		276	0.6				
4	10.2	7.2	6.9		276	0.6				

Downstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD_5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	4	11.9	8.2	3.2		4	0			
	4	11.9	[illegible]	3.2		4	0			
	4	11.9	8.2	3.2		4	0			
	4	11.9	8.2	3.2		4	0			

NPDES NO: NC0003239 DISCHARGE NO: 002 MONTH: January YEAR: 1986

FACILITY NAME: Tarawa Terrace STP COUNTY: Onslow

STREAM: Northeast Creek STREAM: Northeast Creek

LOCATION: RW02-At Hwy24 Bridge LOCATION: RW03-Behind Discharge 002 & 003

Upstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	5	10.8	6.9	2.8		192	0			
erage	5	10.8	[illegible]	2.8		192*	0			
nthly ximum	5	10.8	6.9	2.8		192	0			
nthly nimum	5	10.8	6.9	2.8		192	0			

Downstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	4	11.8	7.1	3.8		200	0			
	4	11.8	[illegible]	3.8		200*	0			
	4	11.8	7.1	3.8		200	0			
	4	11.8	7.1	3.8		200	0			

EM Form MR-3 (11/84)

NPDES NO: NC0003239 DISCHARGE NO: 003 MONTH: January YEAR: 1986

FACILITY NAME: Camp Johnson STP COUNTY: Onslow

STREAM: Northeast Creek STREAM: New River

LOCATION: RW03-Between Discharge 002 & 003 LOCATION: RW04-Hospital Point

Upstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							Oil + Grease			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	4	11.8	7.1	3.8		200	0			
verage	4	11.8	[redacted]	3.8		200	0			
onthly aximum	4	11.8	7.1	3.8		200	0			
onthly inimum	4	11.8	7.1	3.8		200	0			

Downstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							Oil + Grease			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	4	11.9	8.2	3.2		4	0			
	4	11.9	[redacted]	3.2		4	0			
	4	11.9	8.2	3.2		4	0			
	4	11.9	8.2	3.2		4	0			

EM Form MR-3 (11/84)

NPDES NO: NC0003239 DISCHARGE NO: 004 MONTH: January YEAR: 1986

FACILITY NAME: Hadnot Point STP COUNTY: Onslow

STREAM: New River STREAM: New River

LOCATION: RW04 - Hospital Point LOCATION: RW05 - Marker #35

Upstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD_5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below: Oil + Grease			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	4	11.9	8.2	3.2		4	0			
Average	4	11.9	[redacted]	3.2		4 *	0			
Monthly Maximum	4	11.9	8.2	3.2		4	0			
Monthly Minimum	4	11.9	8.2	3.2		4	0			

Downstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD_5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below: Oil + Grease			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	4	11.7	8.2	2.8		0	0			
	4	11.7	[redacted]	2.8		0 *	0			
	4	11.7	8.2	2.8		0	0			
	4	11.7	8.2	2.8		0	0			

NPDES NO: NC0003239 DISCHARGE NO: 005 MONTH: January YEAR: 1986

FACILITY NAME: Rifle Range STP COUNTY: Onslow

STREAM: New River STREAM: New River

LOCATION: RW05 - Marker #35 LOCATION: RW06 - Outside Sneads Ferry Bridge

Upstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	4	11.7	8.2	2.8		0	0			
Average	4	11.7	[illegible]	2.8		0	0			
Monthly Maximum	4	11.7	8.2	2.8		0	0			
Monthly Minimum	4	11.7	8.2	2.8		0	0			

Downstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
09	5	10.4	8.1	0.5		0	0			
	5	10.4	[illegible]	0.5		0	0			
	5	10.4	8.1	0.5		0	0			
	5	10.4	8.1	0.5		0	0			

EM Form MR-3 (11/84)

NPDES NO: NC0003239 DISCHARGE NO: 006 MONTH: January YEAR: 1986

FACILITY NAME: Courthouse Bay STP COUNTY: Onslow

STREAM: New River STREAM: New River

LOCATION: RW06-Outside Sneads Ferry Bridge LOCATION: RW07 - Mouth of Inlet

Upstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD_5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	MG/L			
09	5	10.4	8.1	0.5		0	0			
eroge	5	10.4	[redacted]	0.5		0	0			
nthly ximum	5	10.4	8.1	0.5		0	0			
nthly nimum	5	10.4	8.1	0.5		0	0			

Downstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD_5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	MG/L			

No sample - Boat inoperable.

EM Form MR-3 (11/84)

NPDES NO: NC0003239 DISCHARGE NO: 007 MONTH: January YEAR: 1986

FACILITY NAME: Onslow Beach STP COUNTY: Onslow

STREAM: Intracoastal Waterway STREAM: Intracoastal Waterway

LOCATION: RW08-East of Discharge 007 LOCATION: RW09-West of Discharge 007

Upstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
No sample - Boat inoperable.										
Average										
Monthly Maximum										
Monthly Minimum										

Downstream

	00010	00300	00400	00310	00340	31616	00556			
Time 2400 Clock	Temperature (Celsius)	Dissolved Oxygen	PH	BOD5 20°C	COD	Fecal Coliform *Geometric Mean	Enter Parameter Code above Name and Units Below			
							OIL + GREASE			
HRS	°C	MG/L	STD UNITS	MG/L	MG/L	100 ml	mg/L			
No sample - Boat inoperable.										
Average										
Monthly Maximum										
Monthly Minimum										

6280/8
NREAD
20 Feb 1986

Mr. Paul Wilms, Director
Division of Environmental Management
and Community Development
Post Office Box 27687
Raleigh, North Carolina 27611

Dear Sir:

In accordance with requirements of the National Pollutant Discharge Elimination System (NPDES) Permit Number NC 0003239, discharge monitoring reports for the month of January 1986 are submitted.

The Tarawa Terrace Wastewater Treatment Plant did not meet the 85% removal requirement for Biochemical Oxygen Demand for January 1986. It only had an 84.9% removal. The plant is under construction modification of the digestor heating system, one of the two digestors is off line and inoperable. The operating digestor is therefore handling an increased volume which probably caused the reduced percent removal.

The storm drains listed on the enclosed table may be correlated with Base geography and facilities by referring to maps with numbered storm drain monitoring points that have been previously provided. Storm drains that have no values reported for the quarter were checked; however, each time they were checked they were either dry or had no flow. The Base Environmental staff is continuing to work on operational control methodology to reduce oil and grease and total suspended residue discharges. New construction to replace outdated Base facilities should further reduce oil and grease and total suspended residue discharges.

Questions regarding this report should be forwarded to Ms. Elizabeth A. Betz, Supervisory Chemist, Natural Resources and Environmental Affairs Division, Assistant Chief of Staff, Facilities at (919) 451-5977.

Sincerely,

J. I. WOOTEN
Director, Natural Resources Division
By direction of the Commanding General

Encl:
(1) DEM Form MR-2

Copy to:
EPA Region IV
CMDR LANTNAVFACENGCOM
NEESA

Blind copy to:
SupvChem
BMO (UtilDiv)

Writer: E. A. Betz, NREAD 5977
Typist: J. Cross 20Feb86

11331
NREAD
7 Feb 85

Mr. John McFadyen
Water Supply Branch
Division of Health Services
North Carolina Department of
Human Resources
Post Office Box 2091
Raleigh, North Carolina 27602

Dear Mr. McFadyen:

Enclosed are the completed Department of Health Forms (DHS 1942 2/74) for all water treatment plants aboard Marine Corps Base, Camp Lejeune for the period 1-31 January 1985. Also enclosed are the weekly Chemical Analysis Forms (MCBCL 11330/3 Rev 3-82) for the same period, as requested in the 25 October 1982 letter from Mr. Charles Rundgren of your office.

The analysis is run by the Quality Control Laboratory located in the Natural Resources and Environmental Affairs Division, Assistant Chief of Staff, Facilities, Marine Corps Base, Camp Lejeune. Ms. Elizabeth Betz, Supervisory Chemist, Quality Control Laboratory, telephone (919) 451-5977 is the point of contact in this matter.

Sincerely,

J. I. WOOTEN
Director

Encl:
(1) Dept of Health Forms
(2) Chemical Analysis Forms

Copy to:
LANTNAVFACENGCOM (Code 114)

Blind copy to:
BMO (Util Dir)
Supvy Chemist, QCL (2 copies)

Month JANUARY
Year 1986

HADNOT POINT WATER TREATMENT PLANT AT Camp Lejeune

Method Code: 303
Contaminant Code: 3000

REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES
N. C. DEPARTMENT OF HUMAN RESOURCES

Serial # 04-67-041

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	COLIFORMS (MFP): AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	INCUBATOR TEMP.
1																										
2	2ND															Ø	02	01				10				34.6
3																										
4																										
5																										
6																										
7	7th															Ø	09	010	010	010	010	01				34.5
8																										
9																										
10																										
11																										
12																										
13																										
14	14th															Ø	09	010 010	010	010	10					34.6
15																										
16																										
17																										
18																										
19																										
20																										
21	21st															Ø	09	010 010	010	01 01	10					34.6
22																										
23																										
24																										
25																										
26																										
27	28th																									
28																Ø	09	010	010	010	010	01				35°
29																										
30																										
31																										
MF MEDIA			BBL mEndo			BACTERIAL DENSITY			ARITH. MEAN							0	DIST. SYSTEM	TOTAL NO. SAMPLES								38
TPC MEDIA									GEO. MEAN									SAMPLES EXCEEDING 3/50.			4/100.	7/200.	13/500ml			0

#37807

Elizabeth A Betz

Month JANUARY MARINE CORPS AIR STATION WATER TREATMENT PLANT AT Camp Lejeune Method Code: 303

Year 1986 REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES Contaminant Code: 3000

N. C. DEPARTMENT OF HUMAN RESOURCES

Serial # 04-67-042

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	COLIFORMS (MFP): AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	COLIFORMS per 100 ml.	COLIFORMS per 100 ml.	INCUBATOR TEMP.
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2	2nd															Ø	02	0/0								34.6
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7	7th															Ø	07	0/	0/0	0/0	0/0					34.5
8																										
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21	21st															Ø	.07	0/	0/0	0/0	0/	1.0				34.6
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28	28th															Ø	07	0/ 0/	0/0	0/0	0/					35°
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31																										
MF MEDIA		BBL mEndo				BACTERIAL DENSITY		ARITH. MEAN								0	DIST. SYSTEM	TOTAL NO. SAMPLES								30
TPC MEDIA								GEO. MEAN								1		SAMPLES EXCEEDING 3/50. 4/100. 7/200. 13/500ml								0

Laboratory Seal #37807

Elizabeth A Baty

Form B-[illegible]

Month JANUARY HOLCOMB BLVD. WATER TREATMENT PLANT AT Camp Lejeune Method Code: 303

Year 1986 Contaminant Code: 3000

REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES

N. C. DEPARTMENT OF HUMAN RESOURCES

Serial # 04-67-043

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	COLIFORMS (MFP): AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	INCUBATOR TEMP.
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2	~~2nd~~															0	02	010								34.6
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7	7th															0	07	010	010	010	01					34.5
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28	28th															0	07	010	010	10		010				35°
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MF MEDIA	BBL mEndo	BACTERIAL DENSITY	ARITH. MEAN					0	DIST. SYSTEM	TOTAL NO. SAMPLES			30
TPC MEDIA			GEO. MEAN					1		SAMPLES EXCEEDING 3/50.	4/100	7/200. 13/500ml	0

Elizabeth A Betz

Laboratory Cert. #37011 Cert. Grade B-U 4087-W

Month JANUARY TARAWA TERRACE WATER TREATMENT PLANT AT Camp Lejeune Method Code: 303

Year 1986 REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES. Contaminant Code: 3000

Serial # 04-67-044 N. C. DEPARTMENT OF HUMAN RESOURCES

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	COLIFORMS (MFP) 1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	COLIFORMS per 100 ml.	COLIFORMS per 100 ml.	INCUBATOR TEMP.
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14	>14d															0	03	0	0	01						34.6
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31																										

MF MEDIA	BBL mEndo	BACTERIAL DENSITY	ARITH. MEAN		0	DIST. SYSTEM	TOTAL NO. SAMPLES 14
TPC MEDIA			GEO. MEAN		1		SAMPLES EXCEEDING 3/50. (4/100) 7/200. 13/500=1 0

#37807 Elizabeth A Betz Cert. Grade B-Well No. [illegible]

Month JANUARY WATER TREATMENT PLANT AT Camp Lejeune Method Code:

Year 1986

REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES

N. C. DEPARTMENT OF HUMAN RESOURCES

Contaminant Code: 3000

Serial # 04-67-045

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	COLIFORMS (MFP): AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	INCUBATOR TEMP.	PLANKTON
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31																											
MF MEDIA			BBL mEndo			BACTERIAL DENSITY		ARITH. MEAN								0	DIST. SYSTEM	TOTAL NO. SAMPLES								14	
TPC MEDIA								GEO. MEAN								1		SAMPLES EXCEEDING 3/50. 4/100 7/200. 13/500ml								0	

Elizabeth A Betz

Cert. Grade B-Well No. 4037-W

Month JANUARY RIFLE RANGE WATER TREATMENT PLANT AT Camp Lejeune Method Code: 303

Year 1986 Contaminant Code: 3000

REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES

N. C. DEPARTMENT OF HUMAN RESOURCES

Serial # 04-67-046

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	COLIFORMS (MFP): AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	INCUBATOR TEMP.
1																										
2	>2nd															0	03	0	0	0						34.6
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5																										
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7	>7th															0	03	0	0	0						34.5
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14	>14th															0	03	0	0	0						34.6
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21	>21st															0	03	0	0	0						34.6
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27	>28th																									
28																0	03	0	0	0						35
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31																										
MF MEDIA			BBL mEndo			BACTERIAL DENSITY		ARITH. MEAN								0	DIST. SYSTEM	TOTAL NO. SAMPLES								15
TPC MEDIA								GEO. MEAN								1		SAMPLES EXCEEDING 3/50.		4/100.	7/200.	13/500ml				0

Signature: Elizabeth A Bitz

Month JANUARY COURTHOUSE BAY WATER TREATMENT PLANT AT Camp Lejeune Method Code: 303

Year 1986 REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES Contaminant Code: 3000

Serial # 04-67-047 N. C. DEPARTMENT OF HUMAN RESOURCES

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	COLIFORMS (MFP): AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	INCUBATOR TEMP.
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2	>2nd															0	04	0/0	0/0							34.6
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7	>7th															0	04	0/0	0/0							34.5
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14	>14th															0	04	0/0	1/0	0/1						34.6
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30																										
31																										
MF MEDIA		BBL mEndo			BACTERIAL DENSITY	ARITH. MEAN										0	DIST. SYSTEM	TOTAL NO. SAMPLES								20
TPC MEDIA						GEO. MEAN										1		SAMPLES EXCEEDING 3/50. (4/100) 7/200. 13/500ml								0

Elizabeth A Betz

4087-W

Month JANUARY
Year 1986

ONSLOW BEACH WATER TREATMENT PLANT AT Camp Lejeune

Method Code: 303
Contaminant Code: 3000

REPORT OF BACTERIOLOGICAL RESULTS TO DIVISION OF HEALTH SERVICES
N. C. DEPARTMENT OF HUMAN RESOURCES

Serial # 04-67-048

DATE	RAW WATER COLIFORMS (MFP) A: VOLUME FILTERED ml.	A: TOTAL COLONIES	A: COLIFORM COLONIES	B: VOLUME FILTERED ml.	B: TOTAL COLONIES	B: COLIFORM COLONIES	C: VOLUME FILTERED ml.	C: TOTAL COLONIES	C: COLIFORM COLONIES	NO. OF COLIFORMS PER 100 ml.	FILTERED: TOTAL PLATE COUNT	FILTERED: MFP COLIFORMS per 100 ml.	FINISHED: TOTAL PLATE COUNT	FINISHED: MFP COLIFORMS per 100 ml.	DISTRIBUTION SYSTEM: TOTAL PLATE COUNT	COLIFORMS (MFP): AVE. COLIFORMS per 100 ml.	NO. OF SAMPLES EXAMINED	1: COLIFORMS per 100 ml.	2: COLIFORMS per 100 ml.	3: COLIFORMS per 100 ml.	4: COLIFORMS per 100 ml.	5: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	REPEAT SAMPLES: COLIFORMS per 100 ml.	INCUBATOR TEMP.
1																										
2	>2 nt															0	02	0	0							34.6
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7	>7 nt															0	02	0	0							34.5
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21	>21 nt															0	02	0	0							34.6
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28	>28															0	02	0		0						35
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30																										
31																										

MF MEDIA	BBL mEndo	BACTERIAL DENSITY	ARITH. MEAN		0	DIST. SYSTEM	TOTAL NO. SAMPLES 10
TPC MEDIA			GEO. MEAN		1		SAMPLES EXCEEDING 3/50. (4/100) 7/200. 13/500ml 0

Elizabeth A Bk

#37807 B-Well

DATE COLLECTED 1/2/86 | DATE OF ANALYSIS 1/2/86

PARAMETER Serial #04-67	HADNOT POINT -041	CAMP JOHNSON -045	TARAWA TERRACE -044	ONSLOW BEACH -048	COURTHOUSE BAY -047	RIFLE RANGE -046	HOLCOMB BLVD -043	NEW RIVER -042		
PH (IN LAB NOT PLANT)	8.8	7.7	8.8	7.8	8.6	8.6	9.0	8.8		
PHENOLTHALEIN ALKALINITY	6	0	4	0	2	4	2	6		
METHYL ORANGE ALKALINITY	62	198	66	168	184	170	58	124		
CARBONATES AS $CaCO_3$	12	0	8	0	4	8	4	12		
BICARBONATES AS $CaCO_3$	50	198	58	168	180	162	54	112		
CHLORIDES AS C1	12	32	20	22	24	36	10	44		
HARDNESS AS $CaCO_3$	72	70	72	62	56	88	60	58		
IRON AS Fe	<0.04	0.32	<0.04	0.27	<0.04	0.05	0.07	0.12		
FLUORIDE AM	1.15		0.86				1.07			
FLUORIDE PM	1.33	0.20	1.03	0.19	0.12	0.10	1.23	0.53		
CHLORINE RESIDUAL	1.1	1.2	1.0	1.8	1.3	1.1	1.2	0.9		
TURBIDITY AM	0.3		0.2				0.3			
TURBIDITY PM	0.2	0.5	0.5	0.2	0.2	0.2	1.2	0.6		
TOTAL PHOSPHATE		1.33			0.07					
ORTHO PHOSPHATE		0.80			0.0					
META PHOSPHATE		0.53			0.07					
STABILITY	+0.5	-0.7	+0.3	-0.7	+0.1	0.0	+0.4	0.0		

REMARKS

COPY TO:

☐ UTIL DIR ☐

☐ WATER TREATMENT

☐ PMU ☐ MCAS PMU

☐ NREAD ☐ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

Barbee/Shores

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330 3 (REV 6-84)

DATE COLLECTED 1/7/86

DATE OF ANALYSIS 1/7/86

PARAMETER SERIAL # 04-67	HADNOT POINT -041	CAMP JOHNSON -045	TARAWA TERRACE -044	ONSLOW BEACH -048	COURTHOUSE BAY -047	RIFLE RANGE -046	HOLCOMB BLVD -043	NEW RIVER -042		
PH (IN LAB NOT PLANT)	8.9	7.4	8.5	7.8	8.5	8.5	8.6	8.6		
PHENOLTHALEIN ALKALINITY	6	0	2	0	4	6	6	6		
METHYL ORANGE ALKALINITY	60	200	80	166	170	158	78	136		
CARBONATES AS $CaCO_3$	12	0	4	0	8	12	12	12		
BICARBONATES AS $CaCO_3$	48	200	76	166	162	146	66	124		
CHLORIDES AS C1	14	36	20	24	24	44	22	52		
HARDNESS AS $CaCO_3$	70	90	88	58	64	58	84	52		
IRON AS Fe	<0.04	0.41	0.06	0.22	0.06	0.07	0.07	0.08		
FLUORIDE AM	0.94		1.06				1.07			
FLUORIDE PM	0.92	0.19	0.93	0.19	0.14	0.11	1.10	0.44		
CHLORINE RESIDUAL	0.9	1.3	1.0	1.4	1.2	1.0	0.9	0.9		
TURBIDITY AM	0.2		0.5				0.2			
TURBIDITY PM	0.2	0.7	0.6	0.2	0.4	0.2	0.6	0.3		
TOTAL PHOSPHATE		1.68			0.07					
ORTHO PHOSPHATE		0.76			0.00					
META PHOSPHATE		0.92			0.07					
STABILITY	+0.5	-0.9	0.0	-0.7	0.0	0.0	+0.2	0.0		

REMARKS

COPY TO:

☐ UTIL DIR ☐

☐ WATER TREATMENT

☐ PMU ☐ MCAS PMU

☐ NREAD ☐ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

Barbee

MCRCL 11330 (REV 6-83)

DATE COLLECTED 1-14-86

DATE OF ANALYSIS 1-14-86

PARAMETER Serial # 04-67	HADNOT POINT -041	CAMP JOHNSON -045	TARAWA TERRACE -044	ONSLOW BEACH -048	COURTHOUSE BAY -047	RIFLE RANGE -046	HOLCOMB BLVD -043	NEW RIVER -042		
PH (IN LAB NOT PLANT)	8.6	7.4	8.6	7.3	8.0	8.0	8.6	8.5		
PHENOLTHALEIN ALKALINITY	4	0	4	0	4	4	4	12		
METHYL ORANGE ALKALINITY	64	190	64	142	164	180	62	132		
CARBONATES AS $CaCO_3$	8	0	8	0	8	8	8	24		
BICARBONATES AS $CaCO_3$	56	190	76	142	156	172	74	108		
CHLORIDES AS C1	10	30	20	14	14	40	12	48		
HARDNESS AS $CaCO_3$	78	66	60	66	70	86	76	50		
IRON AS Fe	AA Down									
FLUORIDE AM	1.37		1.02				1.22			
FLUORIDE PM	1.45	0.19	1.21	0.21	0.12	0.12	1.25	0.55		
CHLORINE RESIDUAL	1.2	1.2	1.0	1.2	1.5	1.0	0.8	0.8		
TURBIDITY AM	0.3		0.3				0.3			
TURBIDITY PM	0.3	1.0	0.4	0.5	0.3	0.4	0.3	1.0		
TOTAL PHOSPHATE		2.36			0.06					
ORTHO PHOSPHATE		0.87			0.00					
META PHOSPHATE		1.49			0.06					
STABILITY	+0.9	-0.6	+0.6	-0.6	0.0	0.0	+0.5	+0.1		

REMARKS

COPY TO:

☐ UTIL DIR ☐

☐ WATER TREATMENT

☐ PMU ☐ MCAS PMU

☐ NREAD ☐ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

Burns

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330.3 (REV 6-84)

DATE COLLECTED 1/21/86

DATE OF ANALYSIS 1/21/86

PARAMETER SERIAL# 04-67	HADNOT POINT -041	CAMP JOHNSON -045	TARAWA TERRACE -044	ONSLOW BEACH -048	COURTHOUSE BAY -047	RIFLE RANGE -046	HOLCOMB BLVD -043	NEW RIVER -042		
PH (IN LAB NOT PLANT)	8.8	7.2	8.4	7.6	8.4	8.3	8.7	8.5		
PHENOLTHALEIN ALKALINITY	4	0	2	0	4	2	2	4		
METHYL ORANGE ALKALINITY	60	185	60	160	170	156	60	146		
CARBONATES AS $CaCO_3$	8	0	4	0	8	4	4	8		
BICARBONATES AS $CaCO_3$	52	185	56	160	162	152	56	138		
CHLORIDES AS C1	10	30	20	20	18	40	10	46		
HARDNESS AS $CaCO_3$	66	70	70	50	62	70	64	64		
IRON AS Fe	AA Down									
FLUORIDE AM	0.12		0.90				1.01			
FLUORIDE PM	0.13	0.15	0.96	0.18	0.10	0.20	0.97	0.54		
CHLORINE RESIDUAL	1.1	1.2	1.0	2.0	1.2	1.0	0.9	0.8		
TURBIDITY AM	0.2		0.3				0.2			
TURBIDITY PM	0.2	0.5	0.3	0.2	0.2	0.4	0.3	0.3		
TOTAL PHOSPHATE		0.90			0.07					
ORTHO PHOSPHATE		0.62			0.00					
META PHOSPHATE		0.28			0.07					
STABILITY	+0.6	-0.8	+0.2	-0.8	0.0	0.0	+0.3	+0.1		

REMARKS

COPY TO:

☐ UTIL DIR ☐

☐ WATER TREATMENT

☐ PMU ☐ MCAS PMU

☐ NREAD ☐ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

Burns

CHEMICAL ANALYSIS
MCBCL 11330.3 (REV 6-84)

WATER TREATMENT PLANTS

DATE COLLECTED: 1/28/86

DATE OF ANALYSIS: 1/28/86

PARAMETER Serial # 04-67	HADNOT POINT -041	CAMP JOHNSON -045	TARAWA TERRACE -044	ONSLOW BEACH -048	COURTHOUSE BAY -047	RIFLE RANGE -046	HOLCOMB BLVD -043	NEW RIVER -042		
PH (IN LAB NOT PLANT)	8.6	7.3	8.7	7.6	8.3	8.4	8.6	8.7		
PHENOLTHALEIN ALKALINITY	2	0	2	0	0	2	2	6		
METHYL ORANGE ALKALINITY	62	180	46	154	162	148	60	118		
CARBONATES AS $CaCO_3$	4	0	4	0	0	4	4	12		
BICARBONATES AS $CaCO_3$	58	180	42	154	162	144	56	106		
CHLORIDES AS C1	4	14	16	16	16	40	10	42		
HARDNESS AS $CaCO_3$	70	72	66	60	76	44	64	54		
IRON AS Fe	<0.04	0.34	<0.04	0.15	<0.04	0.06	<0.04	<0.04		
FLUORIDE AM	0.15		1.04				1.16			
FLUORIDE PM	0.17	0.16	0.84	0.22	0.12	0.12	1.08	0.50		
CHLORINE RESIDUAL	1.0	1.2	1.0	1.0	1.0	1.0	0.9	0.8		
TURBIDITY AM	0.2		0.2				0.4			
TURBIDITY PM	0.2	1.1	0.5	0.2	0.2	0.3	0.4	0.5		
TOTAL PHOSPHATE		3.06			0.09					
ORTHO PHOSPHATE		1.05			0					
META PHOSPHATE		2.01			0.09					
STABILITY	+0.4	-0.8	+0.5	-0.7	-0.1	-0.1	+0.1	+0.1		

REMARKS

COPY TO:

☐ UTIL DIR ☐

☐ WATER TREATMENT

☐ PMU ☐ MCAS PMU

☐ NREAD ☐ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

Barbee/Waddoups

Eur

6280/1
NREAD
7 Feb 1986

From: Commanding General, Marine Corps Base, Camp Lejeune
To: Commanding Officer, Naval Hospital, Marine Corps Base, Camp Lejeune

Subj: WATER QUALITY MONITORING AND RELATED ENVIRONMENTAL HEALTH CONSIDERATIONS

Ref: (a) CG, MCB CLNC ltr NREAD/DDS/th 11330/2 of 19 May 1983

Encl: (1) Weekly Chemical Analysis of Drinking Water
(2) Weekly Bacteriological Analysis of Drinking Water
(3) Analysis of Samples from PMU Inspections (Ice)
(4) Analysis of Complaints
(5) Water Plant Maintenance Check Samples

1. In accordance with the reference, enclosures (1) through (5) are forwarded for information.

2. Questions regarding this matter should be referred to Ms. Elizabeth Betz, extension 5977.

J. I. WOOTEN
By direction

Blind copy to:
SupvChem

Writer: E. Betz, NREAD 5977
Typist: J. Cross 7Feb86

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330 3 (REV 9-84

DATE COLLECTED 12-03-85

DATE OF ANALYSIS 12-03-85

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER	BA 164	
PH	8.8	7.5	8.6	7.7	8.3	8.4	8.9	8.9	7.7	
PHENOLTHALEIN ALKALINITY	2	0	2	0	2	2	4	4		
METHYL ORANGE ALKALINITY	60	186	70	164	160	186	60	120		
CARBONATES AS $CaCO_3$	4	0	4	0	4	4	8	8		
BICARBONATES AS $CaCO_3$	56	186	66	164	156	182	52	112		
CHLORIDES AS C1	8	12	16	16	14	32	10	38		
HARDNESS AS $CaCO_3$	64	68	78	72	54	56	64	50	162	
IRON AS Fe	<0.04	0.38	0.07	0.33	0.07	0.06	<0.04	<0.04		
FLUORIDE AM/PM	1.27/1.31	0.22	0.84/0.89	0.23	0.13	0.22	0.99/0.97	0.48		
CHLORINE RESIDUAL	1.0	1.3	1.0	1.0	1.4	1.0	0.9	0.8		
TURBIDITY AM/PM	0.1/0.4	0.5	0.3/0.3	0.3	0.2	0.2	0.4/0.9	0.4		
TOTAL PHOSPHATE		1.21			0.51					
ORTHO PHOSPHATE		0.84			0.03					
META PHOSPHATE		0.37			0.48					
STABILITY	+0.3	-0.9	+0.1	-0.8	-0.2	-0.1	+0.4	+0.2		

REMARKS

pH OB Pond = 8.1

COPY TO:

- ☑ UTIL DIR ☐
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMU
- ☐ NREAD ☑ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY Brenda Waddoups

ENCLOSURE (1)

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330/3 (REV. 6-84)

DATE COLLECTED 12-10-85

DATE OF ANALYSIS 12-10-85

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.6	7.4	8.7	7.7	8.4	8.4	8.8	8.6		
PHENOLTHALEIN ALKALINITY	4	0	4	0	4	4	4	4		
METHYL ORANGE ALKALINITY	68	204	58	168	94	176	58	140		
CARBONATES AS $CaCO_3$	8	0	8	0	8	8	8	8		
BICARBONATES AS $CaCO_3$	60	204	50	168	86	168	50	132		
CHLORIDES AS C1	10	38	26	20	18	50	10	40		
HARDNESS AS $CaCO_3$	78	70	72	70	76	68	70	60		
IRON AS Fe	<0.04	0.39	<0.04	0.20	<0.04	0.07	0.05	0.06		
FLUORIDE AM/PM	0.98/1.03	0.18	0.70/0.76	0.20	0.13	0.10	1.04/1.00	0.49		
CHLORINE RESIDUAL	1.2	1.2	1.0	—	1.3	1.0	0.9	0.9		
TURBIDITY AM/PM	0.2/0.3	0.5	0.3/0.2	0.2	0.3	0.3	0.3/0.5	0.3		
TOTAL PHOSPHATE		0.95			0.08					
ORTHO PHOSPHATE		0.80			0					
META PHOSPHATE		0.15			0.08					
STABILITY	+0.3	-0.9	+0.2	-0.6	+0.1	0	+0.5	-0.2		

REMARKS

pH OB POND = 8.0

COPY TO:

☑ UTIL DIR ☐

☑ WATER TREATMENT

☑ PMU ☑ MCAS PMU

☐ NREAD ☑ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

Barber

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330/3 (REV. 6-84)

DATE COLLECTED: 12-17-85
DATE OF ANALYSIS: 12-17-85

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.8	7.5	8.7	7.8	8.5	8.6	8.9	8.9		
PHENOLTHALEIN ALKALINITY	4	0	4	0	4	2	2	8		
METHYL ORANGE ALKALINITY	60	180	64	156	168	150	64	126		
CARBONATES AS $CaCO_3$	8	0	8	0	8	4	4	16		
BICARBONATES AS $CaCO_3$	52	180	56	156	160	146	60	110		
CHLORIDES AS C1	10	30	20	18	18	30	14	46		
HARDNESS AS $CaCO_3$	76	64	76	48	54	56	74	48		
IRON AS Fe	<0.04	0.34	0.06	0.29	0.06	0.08	0.77	0.08		
FLUORIDE A.M./P.M.	0.78/0.79	0.16	0.94/0.94	0.20	0.12	0.12	0.99/0.83	0.48		
CHLORINE RESIDUAL	1.1	1.4	1.0	1.5	1.6	1.0	0.9	0.8		
TURBIDITY A.M./P.M.	0.3/0.8	0.8	0.4/0.3	0.3	0.2	0.3	0.2/16.2	1.0		
TOTAL PHOSPHATE		2.09			0.07					
ORTHO PHOSPHATE		0.76			0.00					
META PHOSPHATE		1.33			0.07					
STABILITY	+0.7	-0.8	+0.2	-0.6	+0.1	+0.2	+0.4	+0.4		

REMARKS

HB - REPEAT TURBIDITY = 0.6

COPY TO:

☑ UTIL DIR ☐

☑ WATER TREATMENT

☑ PMU ☑ MCAS PMU

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330/3 (REV. 6-84)

DATE COLLECTED: 12-[illegible]

DATE OF ANALYSIS: [illegible]

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.5	7.5	8.7	7.5	8.3	8.4	8.7			
PHENOLTHALEIN ALKALINITY	4	0	4	0	2	4	2			
METHYL ORANGE ALKALINITY	60	190	50	160	164	170	68			
CARBONATES AS $CaCO_3$	8	0	8	0	4	8	4			
BICARBONATES AS $CaCO_3$	52	190	42	160	160	162	64			
CHLORIDES AS C1	12	30	20	20	20	24	14	N		
HARDNESS AS $CaCO_3$	72	66	56	52	36	60	78			
IRON AS Fe	<0.04	0.31	<0.04	0.26	<0.04	0.06	0.09	L		
FLUORIDE A.M/P.M	0.74 / 0.89	0.26	1.23 / 1.33	0.22	0.14	0.10	[illegible] / 1.10	E		
CHLORINE RESIDUAL	1.0	1.2	1.0	1.2	1.4	1.0	1.0			
TURBIDITY A.M/P.M	0.2 / 0.2	0.8	0.4 / 0.3	0.3	0.2	0.2	[illegible]			
TOTAL PHOSPHATE		1.55			0.06					
ORTHO PHOSPHATE		0.77			.00					
META PHOSPHATE		0.78			.06					
STABILITY	+0.2	-1.2	-0.1	-1.1	-0.4	-0.2	+[illegible]			

REMARKS
* New River - No Sample

COPY TO:
☑ UTIL DIR ☐
☑ WATER TREATMENT
☑ PMU ☑ MCAS PMU
☐ NREAD ☑ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY
[illegible]

CHEMICAL ANALYSIS WATER TREATMENT PLANTS
MCBCL 11330.3 (REV. 6-84)

DATE COLLECTED 1-2-86 | DATE OF ANALYSIS 1-2-86

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.8	7.7	8.8	7.8	8.6	8.6	8.0	8.8		
PHENOLTHALEIN ALKALINITY	6	0	4	0	2	4	2	6		
METHYL ORANGE ALKALINITY	62	198	66	168	184	170	58	124		
CARBONATES AS $CaCO_3$	12	0	8	0	4	8	4	12		
BICARBONATES AS $CaCO_3$	50	198	58	168	180	162	54	112		
CHLORIDES AS C1	12	32	20	22	24	36	10	44		
HARDNESS AS $CaCO_3$	72	70	72	62	56	88	60	58		
IRON AS Fe	<0.04	0.32	<0.04	0.27	<0.04	0.05	0.07	0.12		
FLUORIDE Am/pm	1.15/1.33	0.20	0.86/1.03	0.19	0.12	0.10	1.07/1.23	0.53		
CHLORINE RESIDUAL	1.1	1.2	1.0	1.8	1.3	1.1	1.2	0.9		
TURBIDITY Am/pm	0.3/0.2	0.5	0.2/0.5	0.2	0.2	0.2	0.3/1.2	0.6		
TOTAL PHOSPHATE		1.33			0.07					
ORTHO PHOSPHATE		0.80			0.0					
META PHOSPHATE		0.53			0.07					
STABILITY										

REMARKS

pH OB POND = 8.3

COPY TO:

☒ UTIL DIR ☐

☒ WATER TREATMENT

☒ PMU ☒ MCAS PMU

☐ NREAD ☒ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

Barbara Shore

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330/3 (REV. 6-84)

DATE COLLECTED: 1-7-86
DATE ANALYZED: 1-7-86

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.9	7.4	8.5	7.8	8.5	8.5	8.6	8.6		
PHENOLTHALEIN ALKALINITY	6	0	2	0	4	6	6	6		
METHYL ORANGE ALKALINITY	60	200	80	166	170	158	78	136		
CARBONATES AS $CaCO_3$	12	0	4	0	8	12	12	12		
BICARBONATES AS $CaCO_3$	48	200	76	166	162	146	66	124		
CHLORIDES AS C1	14	36	20	24	24	44	22	52		
HARDNESS AS $CaCO_3$	70	90	88	58	64	58	84	52		
IRON AS Fe	<0.04	0.41	0.06	0.22	0.06	0.07	0.07	0.08		
FLUORIDE A.M./PM.	0.94/0.92	0.19	1.06/0.93	0.19	0.14	0.11	1.07/1.10	0.44		
CHLORINE RESIDUAL	0.9	1.3	1.0	1.4	1.2	1.0	0.9	0.9		
TURBIDITY AM/PM	0.2/0.2	0.7	0.5/0.6	0.2	0.4	0.2	0.2/0.6	0.3		
TOTAL PHOSPHATE		1.68			0.07					
ORTHO PHOSPHATE		0.76			0.00					
META PHOSPHATE		0.92			0.07					
STABILITY	+0.5	−0.9	0.0	−0.7	0.0	0.0	+0.2	0.0		

REMARKS

COPY TO:
- ☑ UTIL DIR ☐
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMU
- ☐ NREAD ☑ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY: T.H. BARBEE

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBOL 11330 3 (REV. 6-84)

DATE COLLECTED 1-14-86

DATE OF ANALYSIS 1-14-86

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.6	7.4	8.6	7.3	8.0	8.0	8.6	8.5		
PHENOLTHALEIN ALKALINITY	4	0	4	0	4	4	4	12		
METHYL ORANGE ALKALINITY	64	190	64	142	164	180	62	132		
CARBONATES AS $CaCO_3$	8	0	8	0	8	8	8	24		
BICARBONATES AS $CaCO_3$	56	190	76	142	156	172	74	1.08		
CHLORIDES AS C1	10	30	20	14	14	40	12	48		
HARDNESS AS $CaCO_3$	78	66	60	66.	70	86	76	50		
IRON AS Fe	—	—	A. A.	DOWN	—	—	—	—		
FLUORIDE A.M./P.M.	1.37 / 1.45	0.19	1.02 / 1.21	0.21	0.12	0.12	1.22 / 1.25	0.55		
CHLORINE RESIDUAL	1.2	1.2	1.0	1.2	1.5	1.0	0.8	0.8		
TURBIDITY	0.3 / 0.3	1.0	0.3 / 0.4	0.5	0.3	0.4	0.3 / 0.3	1.0		
TOTAL PHOSPHATE		2.36			0.06					
ORTHO PHOSPHATE		0.87			0.00					
META PHOSPHATE		1.49			0.06					
STABILITY	+0.9	-0.6	+0.6	-0.6	0.0	0.0	+0.5	+0.1		

REMARKS

COPY TO:

☐ UTIL DIR ☐

☑ WATER TREATMENT

☑ PMU ☑ MCAS PMU

☐ NREAD ☑ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

H. J. Burns

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MCBCL 11330/3 (REV. 6-84)

DATE COLLECTED: 1-21-86

DATE OF ANALYSIS: 1-21-86

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	ONSLOW BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.8	7.2	8.4	7.6	8.4	8.3	8.7	8.5		
PHENOLTHALEIN ALKALINITY	4	0	2	0	4	2	2	4		
METHYL ORANGE ALKALINITY	60	185	60	160	170	156	60	146		
CARBONATES AS $CaCO_3$	8	0	4	0	8	4	4	8		
BICARBONATES AS $CaCO_3$	52	185	56	160	162	152	56	138		
CHLORIDES AS C1	10	30	20	20	18	40	10	46		
HARDNESS AS $CaCO_3$	66	70	70	50	62	70	64	64		
IRON AS Fe	—	A.A.	DOWN	—	—	—	—	—	—	
FLUORIDE A.M./P.M.	0.12 / 0.13	0.15	0.90 / 0.96	0.18	0.10	0.2	1.01 / 0.97	0.54		
CHLORINE RESIDUAL	1.1	1.2	1.0	2.0	1.2	1.0	0.9	0.8		
TURBIDITY A.M./P.M.	0.2 / 0.2	0.5	0.3 / 0.3	0.2	0.2	0.4	0.2 / 0.3	0.3		
TOTAL PHOSPHATE		0.90			0.07					
ORTHO PHOSPHATE		0.62			0.00					
META PHOSPHATE		0.28			0.07					
STABILITY	+0.6	−0.8	+0.2	−0.8	0.0	0.0	+0.3	+0.1		

REMARKS

COPY TO:

☒ UTIL DIR ☐

☒ WATER TREATMENT

☒ PMU ☒ MCAS PMU

☐ NREAD ☒ FILE

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY

H. J. Burns

CHEMICAL ANALYSIS — WATER TREATMENT PLANTS
MEBOL 11-80-3 (REV 6-83)

DATE COLLECTED: 1-28-86
DATE OF ANALYSIS: 1-29-86

PARAMETER	HADNOT POINT	CAMP JOHNSON	TARAWA TERRACE	TARAWA BEACH	COURTHOUSE BAY	RIFLE RANGE	HOLCOMB BLVD	NEW RIVER		
PH	8.6	7.3	8.7	7.6	8.3	8.7	8.6	8.7		
PHENOLTHALEIN ALKALINITY	2	0	2	0	0	2	2	6		
METHYL ORANGE ALKALINITY	62	180	46	154	162	148	60	118		
CARBONATES AS $CaCO_3$	4	0	4	0	0	4	4	12		
BICARBONATES AS $CaCO_3$	58	180	42	154	162	144	56	106		
CHLORIDES AS C1	4	14	16	16	16	40	10	42		
HARDNESS AS $CaCO_3$	70	72	66	60	76	44	64	54		
IRON AS Fe	<0.04	0.34	<0.04	0.15	<0.04	0.06	<0.04	<0.04		
FLUORIDE	0.15 / 0.17	0.16	1.04 / 0.84	0.22	0.12	0.12	1.16 / 1.08	0.50		
CHLORINE RESIDUAL	1.0	1.2	1.0	1.0	1.0	1.0	0.9	0.8		
TURBIDITY	0.2 / 0.2	1.1	0.2 / 0.5	0.2	0.2	0.3	0.4 / 0.4	0.5		
TOTAL PHOSPHATE		3.06			0.09					
ORTHO PHOSPHATE		1.05			0					
META PHOSPHATE		2.01			0.09					
STABILITY	+0.4	-0.8	+0.5	-0.7	-0.1	-0.1	+0.1	+0.1		

REMARKS

NOTE: All results reported in parts per million unless otherwise noted except for pH, temperature, and specific conductance. One liter of potable water is assumed to weigh one kilogram.

LABORATORY ANALYSIS BY: Barber / Burns / Waddoups

COPY TO:
- ☑ UTIL DIR ☐
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMU
- ☐ NREAD ☑ FILE

BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/4 (REV. 7-83)

DATE COLLECTED 12-3-85

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME	WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0 *	0.8	1100	MCAS - 3502	24	0	0.4	1010
RR - 15	2	0	0.8	1115	MCAS - 2002	25	0	0.4	1040
RR - 10	3	0 *	0.7	1125	MCAS - AS-4157	26	0 *	0.4	0955
	4				MCAS - EN-1250	27	0 *	0.4	1115
A-1	5	0	0.8	1045	NRMC - FOOD SERVICE MEN'S HEAD	28	0	0.6	1140
BB - 7	6	0	1.0	0835	~~NRMC~~ - PP 2615	29	0	0.3	1125
BB - ~~497~~ 260 1 coli	7	0 *	1.0	0905	PP - ~~2613~~ 2613	30	0	0.4	1130
BB - 245	8	0	1.0	0840	~~PP~~ BM-5400	31	0	0.6	1150
	9				BM - ~~5400~~ 820	32	0	0.4	1200
BA - 103	10	0	0.8	1000	~~BM~~ ~~#~~ LCH-4022	33	0	0.5	1230
BA - 101	11	0	0.8	1015	LCH - ~~4022~~ 4000	34	0	0.5	1220
	12				~~LCH~~ H-1	35	0	0.8	1110
TT - 38	13	0	1.0	0845	H-16	36	0	0.9	1100
TT - 43 1 coli	14	0 *	1.0	0915	H-14	37	0 *	0.4	1105
TT - 3408	15	0	1.0	1040	~~H~~ FC-303	38	0	0.9	1010
TT-2646 70 coli	16	70 *	1.0	1000	FC - ~~303~~ 420	39	0	0.9	1005
CK - 1603	17	0	1.0	1015	FC - ~~420~~ 330 "E" CLUB	40	0	0.7	0950
M - 139	18	0	1.2	1050	FC - 540	41	0	0.9	0955
M - 231	19	0	1.1	1115	HP - 236	42	0	0.7	1050
	20				HP - 540	43	0	0.9	0935
CG - 1 1 coli	21	0 *	0.3	0920	HP - ~~1080~~ 1400	44	0	0.9	0900
TC - 830	22	0 *	0.8	0900	HP - 1202	45	0	0.7	0910
TC - G-650	23	0	0.5	0830	HP - 1606	46	0	0.8	0920

LABORATORY DATA

TIME RECEIVED 1312 - 1319
DATE RECEIVED 12-3-85
ACCEPTED BY HLB, C.S.
DATE ANALYZED 12-3-85
ANALYSIS STARTED 1325
ANALYSIS FINISHED 1519
INCUBATOR TEMP
PROCESSED BY C.S.

CUSTODY DATA

DATE
TIME
SIGNATURE
DATE
TIME
SIGNATURE

COPY TO:

- [x] UTIL DIR
- [x] WATER TREATMENT
- [x] PMU
- [x] MCAS PMO
- [ ] NREAD
- [x] FILE
- [ ] _____

REMARKS * 22 - NUMEROUS NON-COLIFORM COLONIES NOTED.
1, 3, 22, 26, 37 - ONE NON-COLIFORM COLONY NOTED
7, 14, 21 - ONE POSSIBLE COLIFORM COLONY - RESAMPLE 2 DAYS.
16 - RESAMPLE 2 DAYS

SIGNATURE
HLBarbee

ENCLOSURE (2)

ANALYSIS OF WATER NON-REPORTABLE

WATER SAMPLES	MARKED	COLIFORM COUNT M-ENDO MEDIUM	RESIDUAL CHLORINE	pH	TIME
BB-97		0	0.6		0855
FC-19					
SH-8		0 *	1.6	-	1020
M.P. POOL		1	0.6	8.1	1100
#2 POOL		0	0.5	7.4	1050
#5 POOL		0	0.4	7.4	0935
P. P. POOL					
P. P. BABY POOL					
MCAS E-POOL					
MCAS O-POOL					
MCAS BABY POOL					

REMARKS

* SH-8 ONE NON COLIFORM COLONY NOTED

MCBCL 11330/4 (A)

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	Ø	0.7	1100
RR - 15	2		0.5	1120
RR - 10	3		0.2	1115
	4			
A-1	5		1.1	0845
BB - 7	6		1.2	0805
BB - ~~48~~ 265	7		1.1	0820
BB - 245	8		1.1	0810
	9			
BA - 103	10		1.3	1000
BA - 101	11		1.2	1020
	12			
TT - 38	13		1.0	0845
TT - 43	14		1.0	0900
TT - 2945	15		0.9	1000
TT - 2465	16	Ø	0.9	0920
CK - 1100	17	13	0.8	1030
M - 139	18	Ø	1.1	1045
M - 104	19		1.2	1115
	20			
CG - 1	21		0.4	0850
TC - 830	22		0.5	1020
TC - 810	23	Ø	0.6	1000

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
MCAS - 3502	24	Ø	0.4	1130
MCAS - 2002	25		0.5	110
MCAS - 208	26		0.6	115
MCAS - 240	27		0.5	1140
NRMC - 18A	28		0.6	0855
PP - 2615	29		0.6	1230
PP - 2611	30		0.6	0845
BM - 5400	31		0.5	110
BM - 5753	32		0.6	1125
LCH - 4022	33		0.5	1200
LCH - 1071	34		0.6	1215
H - 1	35		0.6	1100
H - 16	36		0.5	1020
H - Wood 10A	37		0.6	1030
FC - 303	38		0.7	1145
FC - 420	39		0.7	1145
FC - 330	40		0.7	1140
FC - 530	41		0.6	155
HP - 236	42		0.6	1125
HP - 540	43		0.1	1135
HP - 1300	44		0.6	100
HP - 18	45		0.6	1100
HP - 1203	46	Ø	0.6	1115

LABORATORY DATA	
TIME RECEIVED	1230 - 1[illegible]5
DATE RECEIVED	12-10-85
ACCEPTED BY	[illegible]
DATE ANALYZED	12-1[illegible]-85
ANALYSIS STARTED	1240
ANALYSIS FINISHED	1405
INCUBATOR TEMP	34.5
PROCESSED BY	[illegible]

CUSTODY DATA	
DATE	
TIME	
SIGNATURE	
DATE	
TIME	
SIGNATURE	

COPY TO:

- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☑ PMU
- ☑ MCAS PMO
- ☐ NREAD
- ☑ FILE
- ☐ _____

REMARKS

SIGNATURE [illegible]

12-11-85

BACTERIOLOGICAL ANALYSIS OF WATER NON-REPORTABLE

WATER SAMPLES	MARKED	COLIFORM COUNT M-ENDO MEDIUM	RESIDUAL CHLORINE	pH	TIME
BB-97		Ø	0.6		0100
FC-19					
SH-8		Ø	0.6		1230
M.P. POOL		Ø	0.8	8.0	1100
#2 POOL		Ø	0.6		1140
#5 POOL		Ø	0.5		0815
P. P. POOL					
P. P. BABY POOL					
MCAS E-POOL					
MCAS O-POOL					
MCAS BABY POOL					

REMARKS

MCBCL 11330/4 (A)

BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/4 (TEMP REV 12-85)

DATE COLLECTED 12-17-85

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME	WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0	6.8	1030	MCAS - 3502	24	0	0.3	1025
RR - 15	2	0 *	0.8	1025	MCAS - 2002	25	0	0.4	1108
RR -	3	0	6.8	1035	MCAS - 4157	26	0	0.4	1008
	4				MCAS - EN, 1040	27	overgrown	0.3	1130
A-1	5	0	1.2	1005	NRMC - Food Service	28	0 *	0.8	0950
BB - 7	6	0	1.2	0915	PP - 2615	29	0	0.5	1010
BB - 270	7	0	1.2	0955	PP - 2624	30	0	0.7	1000
BB - 45	8	0	1.2	0910	BM - 5400	31	0	0.5	0935
	9				BM - 825	32	0	0.6	0940
BA - 103	10	0	1.2	1130	LCH - 4022	33	0	0.3	0915
BA -	11	0	1.2	1135	LCH - 4000	34	0	0.5	0920
	12				H - 1 WARD 12A	35	0	1.1	1030
TT - 38	13	0	1.0	0845	H - 30	36	0	0.4	1025
TT - 43	14	0	1.0	0916	H - 23	37	0	1.1	1040
TT - 252	15	0	0.9	0905	FC - 303	38	0	1.0	1155
TT - 3364	16	0 *	0.9	0925	FC - 420	39	0	1.3	1205
CK - 1413	17	0	0.8	0935	FC - 330	40	0	0.9	1140
M - 139	18	0	1.02	1040	FC - 300	41	0	1.1	1150
M - 231	19	0	1.0	1050	HP - 236	42	0	1.2	1050
	20				HP - 540	43	0	1.2	1130
CG - 1	21	0	0.3	0920	HP - ~~1300~~ 1400	44	0	1.2	1110
TC - 830	22	0	0.8	0900	HP - 20	45	0	1.1	1100
TC -	23	0	0.6	0830	HP - 1005	46	0	1.2	1115

LABORATORY DATA	
TIME RECEIVED	1235 - 1315
DATE RECEIVED	12-17-85
ACCEPTED BY	Burns
DATE ANALYZED	12-17-85
ANALYSIS STARTED	1320
ANALYSIS FINISHED	1445
INCUBATOR TEMP	34.[illegible]
PROCESSED BY	B. Waddoups

CUSTODY DATA	
DATE	
TIME	
SIGNATURE	
DATE	
TIME	
SIGNATURE	

COPY TO:
- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMO
- ☐ NREAD ☑ FILE
- ☐ _____

REMARKS

* Numerous Non-Coliform

M-130 = 0 M-1100 = 0 M-622 = 0

SIGNATURE

[illegible]

12-17-85

BACTERIOLOGICAL ANALYSIS OF WATER NON-REPORTABLE

WATER SAMPLES	MARKED	COLIFORM COUNT M-ENDO MEDIUM	RESIDUAL CHLORINE	pH	TIME
BB-97		0	0.7		0920
FC-19					
SH-8		0	1.3		1215
M.P. POOL		0	0.7	7.6	1030
#2 POOL		0	0.5	7.3	1050
#5 POOL		0	0.5	7.5	1130
P. P. POOL					
P. P. BABY POOL					
MCAS E-POOL					
MCAS O-POOL					
MCAS BABY POOL					

REMARKS

MCBCL 11330/4 (A)

BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/4 (TEMP REV 12-85)

DATE COLLECTED 12-26-85

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME	WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0	0.9	0900	MCAS - 3502	24			
RR - 15	2				MCAS - 2002	25			
RR -	3				MCAS -	26			
	4				MCAS - OFF 2110	27	0	0.4	0840
A-1	5				NRMC - FOOD SVC	28	0	0.5	0945
BB - 7	6				PP - 2615	29	0	0.5	1000
BB - 49	7	0	1.3	0930	PP -	30			
BB -	8				BM - 5400	31			
	9				BM -	32			
BA - 103	10				LCH - 4022	33			
BA - 101	11	0	1.2	1000	LCH -	34			
	12				H - 1	35	0	0.6	0910
TT - 38	13	0	1.0	0930	H - 16	36	0	0.6	0930
TT - 43	14				H -	37			
TT - 2465	15	0	0.9	1000	FC - 303	38			
TT -	16				FC - 420	39			
CK -	17				FC -	40			
M - 139	18	0	1.2	1045	FC -	41			
M - 19	19	0	1.2	1100	HP - 236	42			
	20				HP - 540	43			
CG - 1	21				HP - 1300	44			
TC - 830	22				HP -	45			
TC - G 650	23	0	0.5	0900	HP -	46			

REMARKS

LABORATORY DATA

TIME RECEIVED	0950-1125
DATE RECEIVED	12-26-85
ACCEPTED BY	HB
DATE ANALYZED	12-26-85
ANALYSIS STARTED	1300
ANALYSIS FINISHED	1320
INCUBATOR TEMP	34.7
PROCESSED BY	HB

CUSTODY DATA

DATE	
TIME	
SIGNATURE	
DATE	
TIME	
SIGNATURE	

COPY TO:

- ☐ UTIL DIR
- ☐ WATER TREATMENT
- ☐ PMO ☐ MEAS PMO
- ☐ NREAD ☐ FILE
- ☐ _____

SIGNATURE

H Barber

REPORTABLE POINTS FOR SDWA

WATER SAMPLE	LABELED	COLIFORM MF 100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0	0.9	1100
RR - 15	2	0	1.0	1115
RR - 10	3	0	0.9	1045
	4			
A-1	5	0	1.2	0845
BB - 7	6	0	1.2	0810
BB - 265	7	0	1.2	0830
BB - 245	8	0	1.1	0820
	9			
BA - 103	10	0	1.3	1015
BA - 101	11	0	1.3	1025
	12			
TT - 38	13	0	1.0	0850
TT - 43	14			
TT - 2436	15	0	0.8	0910
TT -	16			
CK -	17			
M - 139	18	0	0.8	1000
M - 231	19	0	0.5	0940
	20			
CG - 1	21			
TC - 830	22			
TC - G-650	23	0	0.4	0900

WATER SAMPLES	MARKED	COLIFORM MF 100 ML	RESIDUAL CHLORINE	TIME
MCAS - 3502	24			
MCAS - 2002	25			
MCAS -	26			
MCAS - OFF-2110	27	0	0.4	0930
NRMC - FOOD SERVICE	28	0	1.0	0935
PP - 2615	29	0	0.5	0920
PP -	30			
BM - 5400	31			
BM -	32			
LCH - 4022	33			
LCH -	34			
H - 1 WARD 12A	35	0	1.1	0900
H - 24	36	0	1.1	0910
H -	37			
FC - 303	38			
FC - 420	39			
FC -	40			
FC -	41			
HP - 236	42			
HP - 540	43			
HP - 1300	44			
HP -	45			
HP -	46			

LABORATORY DATA

TIME RECEIVED 1051 - 1332

DATE RECEIVED 1-2-86

ACCEPTED BY THB

DATE ANALYZED 1-2-86

ANALYSIS STARTED 1245 - 1335

ANALYSIS FINISHED 1400

INCUBATOR TEMP 34.6

PROCESSED BY BW

CUSTODY DATA

DATE

TIME

SIGNATURE

DATE

TIME

SIGNATURE

COPY TO:

- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☑ ~~PMU~~ ☑ MCAS PMO
- ☐ NREAD ☑ FILE
- ☐

REMARKS

SIGNATURE Thomas H Barbee

BACTERIOLOGICAL ANALYSIS OF WATER

NON-REPORTABLE

WATER SAMPLES	TOTAL COLIFORM COUNT MF/100 ML M-ENDO MEDIA	RESIDUAL CHLORINE	pH	TIME
BB-97	0	0.4		0910
SH-8				
TT POOL				
M.P. POOL	0	0.7	8.0	1000
#2 POOL				
#5 POOL				
P. P. POOL				
P. P. BABY POOL				
MCAS E-POOL				
MCAS O-POOL				
MCAS BABY POOL				

LABORATORY DATA

DATE COLLECTED	1-2-86	DATE ANALYZED	1-2-86
COLLECTED BY		ANALYSIS STARTED	1335
TIME RECEIVED	1235-1335	ANALYSIS FINISHED	1400
DATE RECEIVED	1-2-86	INCUBATOR TEMP	34.6
ACCEPTED BY	TKB	PROCESSED BY	BW
SIGNATURE	Thomas H Barbee		

COPY TO:

- ☐ UTIL DIR
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMU
- ☐ NREAD ☑ FILE
- ☐ _____

REMARKS

MCBCL 11330/4(A) (REV. 11-85)

BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 1330/4 (REV. 7-83)

DATE COLLECTED 1-7-86

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME	WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0	1.0	1050	MCAS - 3502	24	0	0.4	1020
RR - 15	2	0	1.0	1100	MCAS - 2002	25	0	0.4	1040
RR -	3	0	0.9	1115	MCAS - AS 4157	26	0	0.4	1005
	4				MCAS - EN 1270	27	0	0.5	1100
A-1	5	0	1.0	0830		28			
BB - 7	6	0	1.1	0805	NRMC - Food Service	29	0*	0.8	1125
BB - ~~28~~ 265	7	0	1.0	0830	PP - 2615	30	0	0.5	1110
BB - 245	8	0	1.0	0815	PP - 2613	31	0	0.5	1115
	9				BM - 5400	32	0	0.9	1140
BA - 103	10	0	1.0	0900	BM - 825	33	0	0.8	1145
BA - 101	11	0	1.0	0920	LCH - 4022	34	0	0.5	1215
	12				LCH - 4000	35	0	0.6	1220
TT - 38	13	0	1.0	0900		36			
TT - 43	14	0	1.0	0915	H - 1 WARD 12A	37	0	0.8	1055
TT - 3409	15	0	0.9	1015	H - 23	38	0	0.8	1100
	16				FC - 303	39	0	0.8	0955
CK - 1103	17	0	0.8	0945	FC - 420	40	0	0.7	1005
M - 139	18	0	1.2	1115	FC - 540	41	0	0.7	1000
M - 305	19	0	1.1	1045	HP - 236	42	0	0.8	0900
	20				HP - 540	43	0	0.9	0940
CG - 1	21	0	0.4	0935	HP - ~~1300~~ 1400	44	0	0.5	0915
TC - 830	22	0	0.7	0920	HP - 1005	45	0	0.8	0925
TC - 6650	23	0	0.6	0850		46			

LABORATORY DATA	
TIME RECEIVED	
DATE RECEIVED	
ACCEPTED BY	
DATE ANALYZED	1-7-86
ANALYSIS STARTED	1315
ANALYSIS FINISHED	1445
INCUBATOR TEMP	34.5
PROCESSED BY	BW

CUSTODY DATA	
DATE	
TIME	
SIGNATURE	
DATE	
TIME	
SIGNATURE	

COPY TO:
- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMO
- ☐ NREAD ☑ FILE
- ☐ _____

REMARKS

*#29 = Numerous Non-Coliform

SIGNATURE

Brenda Wadsworth

~~BACTER~~IOLOGICAL ANALYSIS OF WATER NON-REPORTABLE

WATER SAMPLES	TOTAL COLIFORM COUNT MF/100 ML M-ENDO MEDIA	RESIDUAL CHLORINE	pH	TIME
BB-97	0	0.3		0900
SH-8	0	1.1		1025
TT POOL				
M.P. POOL	0 *	0.3	8.0	1100
#2 POOL	0 *	0.5	7.6	0900
#5 POOL	0	1.0	7.7	0940
P. P. POOL				
P. P. BABY POOL				
MCAS E-POOL				
MCAS O-POOL				
MCAS BABY POOL				

LABORATORY DATA

DATE COLLECTED	1-7-86	DATE ANALYZED	1-7-86	COPY TO:
COLLECTED BY		ANALYSIS STARTED	1315	☑ UTIL DIR
TIME RECEIVED	1215	ANALYSIS FINISHED	1445	☑ WATER TREATMENT
DATE RECEIVED	1-7-86	INCUBATOR TEMP	34.5°	☑ PMU ☑ MCAS PMU
ACCEPTED BY	ELB	PROCESSED BY	BW	☐ NREAD ☑ FILE
SIGNATURE	Brenda Waddoups			☐

REMARKS
*#2 Pool = 8 Non-Coliform
MP Pool = Numerous Non-Coliform

MCBCL 11330/4(A) (REV. 11-85)

BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/4 (REV. 7-83)

DATE COLLECTED 1-14-86

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME	WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0	1.0	1030	MCAS - 3502	24	0	0.4	1050
RR - 15	2	0	1.0	1045	MCAS - 2002	25	0	0.5	1115
RR - 10	3	0	1.1	1100	MCAS - 4157	26	0	0.4	1030
	4				MCAS - MCQ 2034	27	0	0.5	1135
A-1	5	0	1.3	1015		28			
BB - 7	6	0	1.0	0820	NRMC - FOOD SERVICE MEN'S HEAD	29	0	0.6	0919
BB - 49	7	0	1.2	0830	PP - 2615	30	0	0.6	0930
BB - 245	8	0	1.0	0840	PP - 2613	31	0	0.5	0935
	9			0	BM - 5400	32	0	0.6	1000
BA - 103	10	0	1.0	0935	BM - 820	33	0	0.5	0945
BA - 102	11	0	1.0	0950	LCH - 4022	34	0	0.5	0853
	12				LCH - 4000	35	0	0.5	0900
TT - 38	13	0	1.0	0845		36			
TT - 43	14	0	1.0	0900	H - 1 MEN'S HEAD 1ST DECK	37	0	0.6	1015
TT - 2547	15	0	0.9	0920	H - 16	38	0	0.5	1020
	16				FC - 303	39	0	0.6	1135
CK - 1001	17	0	0.7	1000	FC - 420	40	0	0.5	1125
M - 139	18	0	1.1	1030	FC - 540	41	0	0.8	1120
M - 231	19	0	1.0	1110	HP - 236	42	0	0.5	1030
	20				HP - 540	43	0	0.6	1050
CG - 1	21	0	0.4	1000	HP - 1400	44	0	0.6	1107
TC - 830	22	0	0.9	0940	HP - 1202	45	0	0.7	1103
TC - 650	23	0	0.6	0910		46			

LABORATORY DATA	
TIME RECEIVED	1203
DATE RECEIVED	1-14-86
ACCEPTED BY	CS/MB/PW
DATE ANALYZED	1-14-86
ANALYSIS STARTED	1330
ANALYSIS FINISHED	142[illegible]
INCUBATOR TEMP	34.6
PROCESSED BY	C.S.

CUSTODY DATA

DATE	
TIME	
SIGNATURE	
DATE	
TIME	
SIGNATURE	

COPY TO:

- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☐ PMU ☑ MCAS PMO
- ☐ NREAD ☑ FILE
- ☐ _____

REMARKS

SIGNATURE

BACTERIOLOGICAL ANALYSIS OF WATER

NON-REPORTABLE

WATER SAMPLES	TOTAL COLIFORM COUNT MF/100 ML M-ENDO MEDIA	RESIDUAL CHLORINE	pH	TIME
BB-97	0	0.5		0855
SH-8	0	0.8		1155
TT POOL				
M.P. POOL	0	0.5	8.0	1045
#2 POOL	0	0.3	7.3	1035
#5 POOL	0	0.5	7.8	1055
P. P. POOL				
P. P. BABY POOL				
MCAS E-POOL				
MCAS O-POOL				
MCAS BABY POOL				

LABORATORY DATA

DATE COLLECTED	1-14-86	DATE ANALYZED	1-14-86
COLLECTED BY	BM,	ANALYSIS STARTED	1330
TIME RECEIVED	1203	ANALYSIS FINISHED	1422
DATE RECEIVED	1-14-86	INCUBATOR TEMP	34.6
ACCEPTED BY	ThB	PROCESSED BY	C. S
SIGNATURE	C. Shnes		

COPY TO:

- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMU
- ☐ NREAD ☑ FILE
- ☐ _____

REMARKS

MCBCL 11330/4(A) (REV. 11-85)

BACTERIOLOGICAL ANALYSIS OF WATER
BCL 11330/4 (REV. 7-83)

1-21-86

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME	WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0	0.8	1005	MCAS - 3502	24	0	0.4	1055
RR - 15	2	0	0.7	0957	MCAS - 2002	25	0	0.6	1115
RR - 10	3	0	0.6	0950	MCAS - 4157	26	0 *	0.4	1035
	4				MCAS - MEQ1220	27	0	0.5	1135
A-1	5	0	1.1	0925		28			
BB - 7	6	0	0.8	0835	NRMC - Food Service	29	0	0.6	1245
BB - 49	7	0	1.1	0910	PP - 2615 OFF Club	30	0	0.5	1145
BB - 9	8	0	0.9	0840	PP - 2613 Random	31	0	0.5	1155
	9				BM - 5400 School	32	0	0.5	1215
BA - 103	10	0	1.2	1120	BM - 1985 Random	33	0	0.5	1230
BA - 101	11	0	1.0	1130	LCH - 4022 Fire Station	34	0	0.6	1315
	12				LCH - 4000 Random	35	0	0.5	1330
TT - 38	13	0	1.0	0830		36			
TT - 43	14	0	1.0	0900	H - 1 HEAD	37	0 *	0.7	1120
TT - 3355	15	0	0.9	1015	H - 16	38	0	0.8	1130
	16				FC - 303	39	0	1.0	0855
CK - 1305	17	0 *	0.7	0945	FC - 420	40	0	0.9	0915
M - 139	18	0	1.2	1045	FC - 540	41	0	1.0	0930
M - 103	19	0	1.1	1100	~~HP 230~~ ~~HP - 230~~ #2 Pool	42	0	1.0	1100
	20				~~HP 540~~ ~~HP - 540~~ #5 Pool	43	0	0.8	1030
CG - 1	21	0	0.3	1010	HP - 1300	44	0	0.9	1015
TC - 830	22	0	0.8	0945	HP - 1202	45	0	1.0	1045
TC - 6650	23	0	0.6	0920	SH - 8	46	0	0.8	1000

LABORATORY DATA

TIME RECEIVED	1310
DATE RECEIVED	1-21-86
ACCEPTED BY	Burns/Wallace
DATE ANALYZED	1-21-86
ANALYSIS STARTED	1330
ANALYSIS FINISHED	1430
INCUBATOR TEMP	34.6°
PROCESSED BY	BW

CUSTODY DATA

DATE	
TIME	
SIGNATURE	
DATE	
TIME	
SIGNATURE	

COPY TO:

- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMO
- ☐ NREAD ☑ FILE
- ☐ _____

REMARKS

* 17, 26, 37 = Numerous Non-Coliform

SIGNATURE

[illegible]

BACTERIOLOGICAL ANALYSIS OF WATER

NON-REPORTABLE

WATER SAMPLES	TOTAL COLIFORM COUNT MF/100 ML M-ENDO MEDIA	RESIDUAL CHLORINE	pH	TIME
BB-97	0	0.2		0857
SH-8	0	0.8		1000
TT POOL				
M.P. POOL	0	0.7	7.9	1115
#2 POOL	0	0.5	7.4	1100
#5 POOL	0	0.5	7.6	1045
P. P. POOL				
P. P. BABY POOL				
MCAS E-POOL				
MCAS O-POOL				
MCAS BABY POOL				

LABORATORY DATA

DATE COLLECTED 1-21-86	DATE ANALYZED 1-21-86
COLLECTED BY	ANALYSIS STARTED 1330
TIME RECEIVED 1310	ANALYSIS FINISHED 1430
DATE RECEIVED 1-21-86	INCUBATOR TEMP 34.6°
ACCEPTED BY BW	PROCESSED BY BW

SIGNATURE Brenda Waddoups

REMARKS

COPY TO:

- ☑ UTIL DIR
- ☑ WATER TREATMENT
- ☑ PMU ☑ MCAS PMU
- ☐ NREAD ☑ FILE
- ☐ _____

MCBCL 11330/4(A) (REV. 11-85)

BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330 4 (REV. 7-83)

DATE COLLECTED 1-28-86

REPORTABLE POINTS FOR SDWA

WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME	WATER SAMPLES	MARKED	COLIFORM MF/100 ML	RESIDUAL CHLORINE	TIME
RR - 3	1	0	0.8	0900	MCAS - 3502	24	0	0.4	1115
RR - 15	2	0	0.8	0930	MCAS - 2002	25	0	0.5	1135
RR - 6	3	0	0.7	0945	MCAS - 4157	26	* 0	0.4	1050
	4				MCAS - MOQ 2100	27	0	0.6	1155
A-1	5	0	0.9	1000		28			
BB - 7	6	0	1.0	1015	NRMC - FOOD SERVICE	29	0	0.8	1055
BB - 49	7	0	0.8	1020	PP - 2615	30	0	0.7	1040
BB - 107	8	0	1.0	1030	PP - 2613	31	0	0.6	1045
	9				BM - 5400	32	0	1.0	1105
BA - 103	10	0	0.9	1200	BM - 1985	33	0	0.4	1115
BA - 107	11	0	1.0	1220	LCH - 4022	34	0	0.5	1140
	12				LCH - 4025	35	0	0.5	1150
TT - 38	13	0	1.0	0845		36			
TT - 43	14	0	1.0	0900	H - 1 WARD 12A	37	0	0.5	1015
TT - 2265	15	0	0.9	0920	H - 23	38	0	0.8	1025
	16				FC - 303	39	0	0.5	0930
CK - 1212	17	0	0.8	0950	FC - 420	40	0	1.0	0935
M - 139	18	0	1.2	1050	FC - 540	41	0	0.9	0940
M - 130	19	0	1.1	1015	HP - 236	42	0	0.5	0840
	20				HP - 540	43	0	0.8	0920
CG - 1	21	0	0.4	1030	HP - ~~1300~~ 1400	44	0	0.5	0900
TC - 830	22	0	1.1	1010	HP - 1015	45	0	0.7	0905
TC - G-650	23	0	0.7	0945		46			

LABORATORY DATA	
TIME RECEIVED	1304
DATE RECEIVED	1-28-86
ACCEPTED BY	CS/B/THB
DATE ANALYZED	1-28-86
ANALYSIS STARTED	1345
ANALYSIS FINISHED	1456
INCUBATOR TEMP	35°C
PROCESSED BY	C.S

CUSTODY DATA	
DATE	
TIME	
SIGNATURE	
DATE	
TIME	
SIGNATURE	

COPY TO:
- ☒ UTIL DIR
- ☒ WATER TREATMENT
- ☒ PMU ☐ MCAS PMO
- ☐ NREAD ☒ FILE
- ☐ _____

REMARKS

*: #26 HAD NUMEROUS NON-COLIFORMS

SIGNATURE

Carol S. Ahrens

BIOLOGICAL ANALYSIS OF WATER — NON-REPORTABLE

WATER SAMPLES	TOTAL COLIFORM COUNT MF/100 ML M-ENDO MEDIA	RESIDUAL CHLORINE	pH	TIME
BB-97	0	[illegible]		
SH-8	[illegible]	1.1		[illegible]
TT POOL				
M.P. POOL	0	0.6	[illegible]	[illegible]
#2 POOL	0	[illegible]	1.3	[illegible]
#5 POOL	0	0.4	1.7	[illegible]
P. P. POOL				
P. P. BABY POOL				
MCAS E-POOL				
MCAS O-POOL				
MCAS BABY POOL				

LABORATORY DATA

DATE COLLECTED	1-28-86	DATE ANALYZED	1-28-86
COLLECTED BY	BW	ANALYSIS STARTED	1345
TIME RECEIVED	1345	ANALYSIS FINISHED	[illegible]
DATE RECEIVED	[illegible]	INCUBATOR TEMP	[illegible] C
ACCEPTED BY	[illegible]	PROCESSED BY	[illegible]
SIGNATURE	[illegible]		

COPY TO:

- ☒ UTIL DIR
- ☐ WATER TREATMENT
- ☐ PMU ☐ MCAS PMU
- ☐ NREAD ☐ FILE
- ☐ _____

REMARKS

MCBCL 11330/4(A) (REV. 11-85)

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLE	GROSS	3 DEC 85

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
BLDG # RR10 SNACK BAR	1) 3825	0	
BLDG # RR10 SERV LINE SNACK BAR	2)	0	
BLDG # RR3 GALLEY CHOW HALL	3) 728915	0	
BLDG # RR3 CHOW HALL SERV LINE	4) 81548	0	
BLDG # BA101 SNACK BAR	5) 35582 4079	0	
BLDG # BA101 SNACK BAR SERV LINE	6)	0 *	
BLDG # BA103 MESS HALL GALLEY	7) 67001	0	

REMARKS

Received 11:10 O'Beaty

*

#6 – NUMEROUS NON-COLIFORM COLONIES

SIGNATURE T Barber

DATE 12-4-85

COPY TO

- [ ] INREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [x] ~~FIRE SAFETY DIVISION~~
- [x] FILE

ENCLOSURE (3)

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	[illegible]	4 DEC 85

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
BLDG # G640 BARRED [illegible]	1) [illegible]	0	
BLDG # G640 NCO CLUB [illegible]	2) 79249	0	
BLDG # G640 NCO CLUB BAR	3) 0667	0*	
BLDG # G614 EM CLUB MAIN	4) 3861	0*	
BLDG # G614 EM CLUB [illegible]	5) 3957	0	
BLDG # T640 CLUB [illegible]	6) 5779	SMEARED AND OVERGROWN	
BLDG # T640 STACK [illegible]	7) 70116	0	
BLDG # T640 DEN BAR DISP.	8) 80597	OVERGROWN	

REMARKS

Set up @ 1400 hrs, C.S.

* 3 - HAS 2 NONCOLIFORMS
4 - HAS 3 NON-COLIFORMS

SIGNATURE [signature] DATE 12/5/85

COPY TO

- [ ] NREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [1] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] FILE
- [4] SURVEILLANCE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL-11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLE	J Ross	9 DEC 85

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
# DEC 1 T2 BLDG 2461 unlimited	1)	∅	

REMARKS Recd LAB 1030 12-9-85 3

SIGNATURE BVENS DATE 12-10-85

COPY TO

- [ ] INREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] File

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
KL SAMPLES	HN WILSON	11 DEC 85

LOCATION	MARKED	COLIFORM	
		TOTAL	FECAL
BLDG # 1057 - DISPENSER	1) 85901	Ø	
BLDG # 1057 - MAKER	2) 35253	Ø	

REMARKS

SIGNATURE Walter A. Wilson HN

DATE 11 DEC 85

COPY TO H D Burns 12/12/85

- ☐ NREAD
- ☐ UTILITIES DIRECTOR
- ☐ WATER TREATMENT PLANT (GENERAL FOREMAN)
- ☐ BASE PREVENTIVE MEDICINE
- ☐ MCAS PREVENTIVE MEDICINE
- ☒ ~~SANITATION~~ File

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN WILSON	11 DEC 85

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
BLDG # 403 - MAKER	3) 34193	Ø	
BLDG # 403 - DISPENSOR	4) 83962	2	
BLDG # 820 - DEL UNLTID	5) 849350-10G	Ø	

REMARKS

Rec'd lab 1520, THB, 11 Dec 85.

SET UP 0945 12/12/85

SIGNATURE Walter L. Wilson HN — DATE 11 DEC 85

COPY TO H. J. Burns — 13 Dec 85

- [ ] INREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [X] SURVEILLANCE

FILE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN WILSON	16 DEC 85

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
MCAS			
TP GIEGER DELALIO ELEM SCHOOL	1) MAKER #1	0 *	
" O CLUB	2) N-965	0	
" O CLUB	3) 004406	0	
DINING FACILITY #226	4) 217978	0	
ENLISTED CLUB	5) BP 57	0	
ENLISTED CLUB	6) BP 41	0	
ENLISTED CLUB	7) BP 17	0	
ENLISTED CLUB	8) BP 26	0 *	
" ENLISTED CLUB	9) BP 08	0	
SNCO CLUB	10) BEHIND BAR	0 *	
" SNCO CLUB	11) 004347	0	
" SNCO CLUB	12) N 667	0	

REMARKS

#1) ONE NON-COLIFORM COLONY
* #8) ONE NON-COLIFORM COLONY
#10) ONE NON-COLIFORM COLONY

SIGNATURE [illegible] / [illegible] DATE 16 DEC 85

COPY TO

- [ ] NREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [ ] BASE PREVENTIVE MEDICINE
- [x] MCAS PREVENTIVE MEDICINE
- [x] SURVEILLANCE
- [x] FILE

QUALITY CONTROL LABORATORY REPORT

MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
[illegible]	HN [illegible]	20 DEC 65

LOCATION	MARKED	COLIFORM TOTAL	COLIFORM FECAL
[illegible]	1) 10714	0	
[illegible]	2) 003741	0	
[illegible]	3) 81284	0	
[illegible] BLDG 539 SNACK BAR	4) MARKED #1	0	
[illegible] BLDG 539 [illegible]	5) DISPENSER	0	
[illegible] BLDG 200 BOWLING ALLEY	6) PX-27650	0	

REMARKS

Rec'd [illegible] 1100, Th B. Set up @

SIGNATURE [illegible] HN [illegible]

DATE 20 DEC 65 / [illegible]

COPY TO

- [ ] UNREAD
- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [x] SURVEILLANCE
- [x] FILE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN W. WILSON	26 DEC 85

LOCATION	CL_2	TIME	COLIFORM TOTAL	COLIFORM FECAL	
JOHNSON CHOWHALL DEP 677		0844	0 *		
" " 2) 67011		0841	0 *		
" " 3) 211833		0841	0 *		
" " 4) 211834		0842	0		
HALL (SOX 1209) 5) 217590		1000	0		
" 6) 533509		1001	0 *		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	12-26-85	1100	TLB
SAMPLES ANALYZED	12-26-85	1300	TLB

COLIFORM ANALYSIS BY: (MF) MPN

DILUTIONS 100 ml.

REMARKS

* up @ 1300, 26 Dec 85, TLB

1, 3, 6 — 1 NON-COLIFORM COLONY

2 — 15 NON-COLIFORM COLONIES NOTED

SIGNATURE Walter Wilson HN TLB

DATE 26 DEC 85 27 Dec 85

COPY TO

- (X) LAB/FILE
- ( ) NREAD
- ( ) UTILITIES DIRECTOR
- ( ) WATER/WASTEWATER (GENERAL FOREMAN)
- (X) BASE PREVENTIVE MEDICINE
- (X) FILE
- ( ) MCAS PMU
- ( ) SUPT, ILL FACC
- ( )

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
NCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE	HN Bart Duarte	7 JAN 86

LOCATION	~~CL2~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	
C 540 06852584	1	945	0		
C 540 06852585	2	950	0		
C 425 83688	3	955	0		
C 425 625452	4	955	0		
Short Bar (NCOS) 3866 C 330 CCMS-N-	5	1005	0		
C 330 CCMS 3784	6	1005	0		
C 420 743285 03P	7	1020	0		
C 420 84265	8	~~842~~ 1020 ~~33077~~	0		
C 323 33077	9	1100	1		

	DATE	TIME	INITIALS
SAMPLES RECEIVED			
SAMPLES ANALYZED			

COLIFORM ANALYSIS BY: MF MPN

DILUTIONS

REMARKS

SIGNATURE Brenda Waldrop

DATE 1-8-86

COPY TO

- [✓] LAB/FILE
- [ ] NREAD
- [✓] BASE PREVENTIVE MEDICINE Surveillance
- [ ] MCAS PMU
- [ ] UTILITIES DIRECTOR
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN W. WILSON	9 JAN 86

LOCATION	CL_2	TIME	COLIFORM TOTAL	COLIFORM FECAL	
H-100 2 WEST #1		0840	0		
-100 2 EAST #2		0845	0		
-100 ICU #3		0849	0		
H-100 3 EAST #4		0854	0		
H-100 4 WEST #5		0859	0		
100 4 EAST #6		0902	0		
H-100 SERV-LINE CHOW HALL #7		0905	0		
-100 (CHOW HALL) KITCHEN #8		0909	0		
-100 SERV-LINE SNACK BAR #9		0913	0		
100 MAKER SNACK BAR #10		0915	0		
-100 SERV LINE ICE CREAM SHOP #11		0920	0		
TT 1 KITCHER ELEM. SCHOOL #12		0950	0		
T-2 ELEM. SCHOOL #13		1005	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED			
SAMPLES ANALYZED	1/9/86	1300	CS

COLIFORM ANALYSIS BY: (MF) MPN

DILUTIONS 1/9/86 1300

REMARKS

SIGNATURE Walter Wilson HN

DATE 9 JAN 86

COPY TO

- ☐ LAB/FILE
- ☐ NREAD
- ☐ UTILITIES DIRECTOR
- ☐ WATER/WASTEWATER (GENERAL FOREMAN)
- ☑ BASE PREVENTIVE MEDICINE
- ☐ MCAS PMU
- ☑ FILE
- ☑ SURVEILLANCE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE ICE	SAMPLE COLLECTED BY HN LANE	DATE COLLECTED 13 JAN 86

LOCATION	CL_2	TIME	COLIFORM TOTAL	COLIFORM FECAL	
SNACK BAR 251 (R)		1340	0		
SNACK BAR 251 (L)		1345	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-13-86	1412	THB
SAMPLES ANALYZED			

COLIFORM ANALYSIS BY: (MF) MPN

DILUTIONS 100 ml.

REMARKS

SIGNATURE Gregory T Lane THBoatner 15 Jan 86

DATE 13 JAN 86

COPY TO

- [x] LAB/FILE
- [ ] NREAD
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PMU
- [ ] UTILITIES DIRECTOR
- [x] SURVEILLANCE
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)
- [ ] _____

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HM W. WILSON	14 JAN 86

LOCATION	~~OLZ~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	
[illegible] (1) 1		0856	0		
[illegible] (2) 30615		0905	0		1
DISPENSER BAR BLDG #4 (3) 4165		0906	0		
DISPENSER BAR BLDG 257 (4) 83027		0910	0		
MAKER BAR BLDG 257 (5) 625433		0911	0		
MAKER BAR BLDG 251 (6) 22962		0915	0		
MAKER BAR BLDG 251 (7) 30619		0920	0		3
MAKER BAR BLDG 251 (8) 55347		0921	0		
MAKER CLUB BLDG 425 (9) 28455		0930	0		
CLUB BLDG 425 (10) 11061		0931	0		
MAKER [illegible] (11) 34193		0942	0		
DISPENSER [illegible] BLDG 413 (12) 83962		0945	4		
MAKER [illegible] 524 (13) 411		0952	0		
DISPENSER CLUB BLDG 524 (14) 3458		0955	0		
DISPENSER CLUB BAR BLDG 1057 (15) 85901		1010	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-14-86	1100	THB
SAMPLES ANALYZED			

COLIFORM ANALYSIS BY: (MF) MPN

DILUTIONS THB

REMARKS

SIGNATURE Walter C. Wilson THBarber 15 Jan 86

DATE 14 JAN 86

COPY TO

- [x] LAB/FILE
- [ ] NREAD
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PMU
- [ ] UTILITIES DIRECTOR
- [x] FILE SURVEILLANCE
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)
- [ ]

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN W. WILSON	14 JAN 86

LOCATION	~~OL2~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	NON-COLIFORM
MAKER SNACK BAR BLDG-1057 (16)	35253	10:12	0		TNTC
DISPENSER TEAK HOUSE BLDG-1220 (17)	N78-930	10:25	0		
DISPENSER TEAK HOUSE BLDG-1220 (18)	35658	10:26	0		
MAKER TEAK HOUSE BLDG-1220 (19)	24083	10:27	0		7
DISPENSER TEAK HOUSE BLDG-1220 (20)	N-78-933	10:28	0		TNTC
MAKER TEAK HOUSE BLDG-1220 (21)	24084	10:30	0		TNTC
MAKER [illegible] LTD (22)	1	10:40	0		
MAKER [illegible] MCX (23)	15101	10:45	0		
SNACK BAR MCX (24)	20341	10:46	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-14-86	1100	THB
SAMPLES ANALYZED			

COLIFORM ANALYSIS BY: MF MPN

DILUTIONS 100 ml.

REMARKS

SIGNATURE HN Walter Wilson H Beckham 15 Jan 86

DATE 14 JAN 86

COPY TO

- ☑ LAB/FILE
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- ☑ BASE PREVENTIVE MEDICINE
- ☐ MCAS PMU
- ☐ UTILITIES DIRECTOR
- ☒ FILE SURVEILLANCE
- ☐ WATER/WASTEWATER (GENERAL FOREMAN)
- ☐

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN Rott, LANCE T.	1-16-86

LOCATION	Cl_2	TIME	COLIFORM TOTAL	COLIFORM FECAL	
SNCO WEST ICE DESP BLDG 540 DINING FACILITY	(1)	0835	0		
FC EAST ICE DESP BLDG 540 DINING FACILITY	(2)	0840	0		
EAST SERVING LINE BLDG DINING FACILITY	(3)	0845	0		
MAIN DECK ICE DESP. FC BLDG 420 DINING FACILITY	(4)	0925	0		
NOTICE DISPENSER FC BLDG 420 DINING FACILITY	(5)	0930	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-16-86	1320	EB
SAMPLES ANALYZED	1-16-86	1330	CS.

COLIFORM ANALYSIS BY: (MF) MPN

DILUTIONS

REMARKS

SIGNATURE [signature] DATE 1-16-86

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- [ ] WATER/WASTEWATER (GENERAL FOREMAN)
- [✓] BASE PREVENTIVE MEDICINE
- [✓] SURVEILLANCE
- [ ] MCAS PMU

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
CBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
SAMPLES	HN WILSON	22 JAN 86

LOCATION	~~CHLF~~ # Cl2	TIME	COLIFORM TOTAL	COLIFORM FECAL	
MAKER MCAS DELALIO SCHOOL	#1	0845	0		
MAKER MCAS-4126 SNACK BAR	#10764	0850	0		
MAKER MCAS-205 BOWLING ALLEY	#27640	0940	0		
DISPENSER MCAS-4600 - SNACK BAR	#83963	0945	Contaminated with Coliform		
MAKER MCAS-4600 - SNACK BAR	#75270	0946	0		
MAKER MCAS-205 SNACK BAR	#3741	0955	0		
DISPENSER MCAS-4600 - SNACK BAR	#82804	0956	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-22-86	1145	BW
SAMPLES ANALYZED	1-22-86	1300	BW

COLIFORM ANALYSIS BY: MF MPN

DILUTIONS

REMARKS

#3 TNTC Non-Coliform

SIGNATURE HN Wilson Bonita Walker

DATE 22 JAN 86 23 Jan 86

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- [ ] MCAS PMU
- [ ] UTILITIES DIRECTOR
- [x] SURVEILLANCE
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)
- [ ]

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
NCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN WILSON	~~23~~ 24 JAN 86

LOCATION	Residual Cl2	TIME	COLIFORM TOTAL	COLIFORM FECAL	
[illegible]	N/A	0920	∅		
DISPENSER 15-[illegible] SNACKBAR	83963	0902	1		THIS SAMPLE IS A RETEST FOR VERIFICATION OF ELIM. 22 JAN 86
DISPENSER n-19 - SNACK BAR	4537	0925	∅		
-19 - SNACK BAR - MAKER	22666	0927	∅		
DISPENSER 134 - SNACK BAR	83217	0935	∅		
-134 - SNACK BAR - MAKER	2843	0940	1		
-130 - SNACK BAR MAKER	4081	0942	∅		
420 - CHOW HALL - MAKER	414313	0950	∅		
420 - CHOW HALL - MAKER	211834	0952	∅		
n-424 - CHOW HALL - DISPENSER	FP0077	0955	∅		
-424 CHOW HALL - DISPENSER	84255	0956	∅		
MAKER [illegible]	217100	10:30	∅		
DISPENSER 520 - [illegible]	450	10:32	∅		
-100 - NCO CLUB - MAKER	1	10:40	1		
-240 - SNCO CLUB - MAKER	21806	10:45	∅		

	DATE	TIME	INITIALS
SAMPLES RECEIVED			
SAMPLES ANALYZED			

COLIFORM ANALYSIS BY: MF MPN

DILUTIONS

REMARKS

* 2 NUMEROUS NON-COLIFORM
* 11 " " "

H. J. Burns 25 JAN 86

SIGNATURE HN

DATE ~~23~~ 24 JAN 86

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- [x] LAB/FILE
- [ ] NREAD
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PMU
- [ ] UTILITIES DIRECTOR
- [x] SURVIELLANCE
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)
- [ ]

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
NCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE-SAMPLES	HN W. WILSON	28 JAN 86

LOCATION	~~Cl2~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	
MAKER ICE HALL - BLDG 521	553511	08:30	0		
MAKER ICE HALL - BLDG 521	432851	08:30	0		
DISPENSER ICE HALL - BLDG 521	855519	08:35	0		
MAKER SNACK BAR - BA101		0845	0		
DISPENSER SNACK BAR - BA101		0845	0		
SNACK BAR - BA103		0845	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-28-86	1030	CS
SAMPLES ANALYZED	1-28-86	1345	CS

COLIFORM ANALYSIS BY: ME MPN

DILUTIONS , ml

REMARKS

SIGNATURE HN W. Wilson

DATE 28 JAN 86

COPY TO

☑ LAB/FILE ☐ NREAD ☒ BASE PREVENTIVE MEDICINE ☐ MCAS PMU

☐ UTILITIES DIRECTOR ☐

☐ WATER/WASTEWATER (GENERAL FOREMAN) ☒ SURVIELLANCE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN W WILSON	28 ~~FEB~~ JAN 86

LOCATION	~~Cl2~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	
DISPENSOR BLDG KING-BLDG-1220	20768	1320	Ø		> DOUBLE DISPENSOR.
DISPENSOR BLDG KING-BLDG-1220	20768	1320	Ø		
MARKER BLDG KING-BLDG-1220	8503-8512	1325	Ø		
DISPENSOR TEAK HOUSE-BLDG-1220	24072	1330	14		
MARKER TEAK HOUSE BLDG-1220	24084	1332	Ø		
MARKER TEAK HOUSE BLDG-1220	24083	1335	Ø		
DISPENSOR TEAK HOUSE-BLDG-1220	86194	1340	Ø		
DISPENSOR TEAK HOUSE BLDG-1220	24074	1342	OVERGROWN WITH COLIFORM		
DISPENSOR BLDG 1057	85961	1350	Ø		
MARKER BLDG 1057	35253	1352	Ø		
MARKER LOW HALL-BLDG 1209	217590	1355	Ø		
MARKER LOW HALL BLDG 1209	53626	1355	Ø		
DISPENSOR LOW HALL BLDG 1209	04498	1356	Ø		
DISPENSOR LOW HALL BLDG 1209	94641	1357	Ø		
DISPENSOR LOW HALL BLDG 1209	24262	1350	Ø		

	DATE	TIME	INITIALS
SAMPLES RECEIVED			
SAMPLES ANALYZED			

COLIFORM ANALYSIS BY: MF MPN

DILUTIONS

REMARKS

H.J. Burns 30 Jan 86

SIGNATURE Walter Wilson HN

DATE 28 ~~FEB~~ JAN 86

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- ☒ BASE PREVENTIVE MEDICINE
- ☐ MCAS PMU
- ☐ UTILITIES DIRECTOR
- ☒ SURVEILLANCE
- ☐ WATER/WASTEWATER (GENERAL FOREMAN)
- ☐ FILE

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN W. WILSON	28 JAN 86

LOCATION	SAMPLE # ~~BL2~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	
DISPENSOR SNACK BAR - BLDG 62	83305	14:10	Ø		
MAKER SNACKBAR - BLDG 62	2915	14:11	Ø		
DISPENSOR BOWLING ALLEY - BLDG 89	84783	14:20	Ø		
MAKER BOWLING ALLEY - BLDG 89	30813	14:12	Ø		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-28-86	1430	D
SAMPLES ANALYZED	1-29-86	0900	

COLIFORM ANALYSIS BY: MF MPN

DILUTIONS

REMARKS

K. J. Burns 30 Jan 86

SIGNATURE Walter C. Wilson HN

DATE 28 JAN 86

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- [x] LAB/FILE
- [ ] NREAD
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PMU
- [ ] UTILITIES DIRECTOR
- [x] SURVIELLANCE
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)
- [ ]

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN W. WILSON	31 JAN 86

LOCATION	MACHINE # ~~Cl_2~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	
MAKER - KITCHEN STEAKHOUSE - 1220	24084	11:05	0		
MAKER LOBBY STEAK HOUSE - 1220	24083	11:08	0		

	DATE	TIME	INITIALS
SAMPLES RECEIVED	1-31-86	1115	CS
SAMPLES ANALYZED	2-1-86	1126	TMB

REMARKS

COLIFORM ANALYSIS BY: (MF) MPN

DILUTIONS 100ml

SIGNATURE Walter Wilson

DATE 31 JAN 86

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- [ ] UTILITIES DIRECTOR
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)
- [x] BASE PREVENTIVE MEDICINE
- [ ] MCAS PMU
- [x] SURVEILLANCE
- [x] File

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
MCBCL 11330/8 (REV. 11-85)

FILE:

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
ICE SAMPLES	HN W. WILSON	24 JAN 86

LOCATION	MACHINE # ~~Cl2~~	TIME	COLIFORM TOTAL	COLIFORM FECAL	
M-240-SNCO CLUB MAKER	215811	10:46	ϕ		

	DATE	TIME	INITIALS
SAMPLES RECEIVED			
SAMPLES ANALYZED			

COLIFORM ANALYSIS BY: MF MPN

DILUTIONS

REMARKS

SIGNATURE: HN W. Wilson HN

DATE: 24 JAN 86

COPY TO

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- [ ] MCAS PMU
- [ ] UTILITIES DIRECTOR
- [ ] WATER/WASTEWATER (GENERAL FOREMAN)

QUALITY CONTROL LABORATORY REPORT
MISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER

MCBCL 11330/8 (REV. 4/78)

WATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
	WTP	12/11/85

LOCATION	MARKED	COLIFORM	
		TOTAL	FECAL
12" TRANS LINE	Cl2 = 0		
TT 2			
TIME 1500			
12/10/85			

REMARKS

SIGNATURE BVRNS DATE 12/11/85

COPY TO

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- [ ] UTILITIES DIRECTOR
- [ ] WATER TREATMENT PLANT (GENERAL FOREMAN)
- [ ] BASE PREVENTIVE MEDICINE
- [ ] MCAS PREVENTIVE MEDICINE
- [ ] File

ENCLOSURE (5)

UALITY CONTROL LABORATORY REPORT
ISCELLANEOUS BACTERIOLOGICAL ANALYSIS OF WATER
CBCL 11330/8 (REV. 11-85)

FILE:

ATER TYPE	SAMPLE COLLECTED BY	DATE COLLECTED
POTABLE	WATER TREATMENT	1-30-86

LOCATION	CL_2	TIME	COLIFORM TOTAL	COLIFORM FECAL	
TT 1393	1.0	1115	0		COMPLAINT
860130					

	DATE	TIME	INITIALS
AMPLES RECEIVED	1-30-86	1200	CS
AMPLES ANALYZED	1-30-86	1215	CS

COLIFORM ANALYSIS BY: (MF) MPN

DILUTIONS 100 ml

EMARKS

Honeycutt collected

GNATURE Carol S. Shen

DATE 1-30-86

OPY TO

☑ LAB/FILE ☐ NREAD ☐ ~~BASE~~ PREVENTIVE MEDICINE ☐ MCAS PMU

☐ UTILITIES DIRECTOR ☐

☑ WATER/WASTEWATER (GENERAL FOREMAN) ☐