



April 19, 2023

Client: Perkins PWA

PO Box 9

Perkins, OK 74059

Requested By: Chad Beitz



National
Environmental
Laboratory
Accreditation
Program
ODEQ TNI Certified

Sample Project Name: Wastewater Treatment Plant - Permit # OK0028801

Date Samples Received: April 11, 2023 Time: 14:34 sample temp upon arrival at lab = 9.80°C - On Ice

Matrix: Waste Water

Lab Log Numbers: **FD11123-01**

Work Order: FD11123

Report # FD11123-0419231241

EPA Lab ID#'s: **Stillwater OK00092 Tulsa OK00983 OKC OK00129 ICR OK 001**

Oklahoma Certification: Stillwater NELAP WasteWater, ODEQ 8316/ Drinking Water, DEQ D9602
NELAP Tulsa WasteWater, ODEQ 9905 / Drinking Water, DEQ D9901
Oklahoma City NELAP WasteWater ODEQ 7202 / Drinking Water, DEQ D9937

Kansas Certification: Stillwater NELAP CERT # E-10219

Method Reference: 40 CFR 136, 141, and 261 Methods for Chemical Analysis of Water and Wastes EPA-600/4-79-020, March 1983. Test Methods for Evaluating Solid Wastes, SW-846, Final Update VI. Standard Methods 2005 (21st Edition), Standard Methods 2011 (22nd Edition), Standard Methods 2017 (23rd Edition) for the Examination of Water and Wastewater.

Analysis Reference: If qualifiers present in "Prep Info" or "Analysis Info", then analysis performed as follows: @= Tulsa Lab and * = OKC Lab. If no qualifiers present, then analysis performed at Stillwater Lab.

Accurate Environmental Laboratories certify that the test results performed at the Stillwater lab meet all requirements of NELAP. Any exceptions to this can be found in the report footer or Quality Control Section of the report.

This report is to only be replicated in its entirety.

Accurate Environmental sampling protocol was followed for any sampling performed by Accurate Field Services.

Sample: *Effluent:*

Location Code:

PWSID#:

Collection Type: Grab

Sample Time: 4/11/23 9:00

Lab Log# FD11123-01

| Method/Parameter | Test | Result | Notes | PQL# | Prep Info | Analysis Info |
|---|---------------------------|----------|-------|------|--------------------|--------------------|
| BOD5 SM5210 B | Biochemical Oxygen Demand | 281 mg/L | | 2.00 | 04/12/23 08:00 RMM | 04/17/23 11:00 KEI |
| Total Suspended Solids SM2540D 22nd ed. 2011 | Total Suspended Solids | 158 mg/L | | 50.0 | 04/14/23 12:06 JM2 | 04/17/23 16:00 JM2 |

Notes and Definitions

BOD-5 The BOD Glucose-Glutamic Acid check standard was outside of control limits.

BOD-4 The BOD batch blanks failed QC criteria. The blanks showed Oxygen depletion greater than 0.2mg/L.

MCL Analyte concentration may exceed Maximum Contaminant Limit (MCL) for EPA Primary or Secondary Drinking Water Regulations.

Analyte concentration may exceed regulatory limit.

PQL Practical Quantitation Limit - the method reporting limit (MRL) adjusted for any dilutions or other changes made to the sample to deal with interferences/matrix effects

BPQL Below Practical Quantitation Limit (if applicable).

The "Prep Date" of the QC analysis coincides with the characters of the appropriate QC Lab ID. (Example: 19 A 02 15 - BLK = 2019, Jan 2, Batch #15 - Blank)

Lab Manager



Quality Control Data

Blank Data

| QC Lab # | Test Group | Test | Result | PQL | Flags |
|--------------|--|---------------------------|-----------|------|-------|
| 23D1208-BLK1 | BOD5 SM5210 B | Biochemical Oxygen Demand | BPQL mg/L | 2.00 | BOD-4 |
| 23D1452-BLK1 | Total Suspended Solids SM2540D 22nd ed. 2011 | Total Suspended Solids | BPQL mg/L | 2.50 | |

Laboratory Control Sample Data

| Lab QC# | Test Group | Test Name | LCS Result | Spike Level | Units | % Rec. | Control Limits | Flags |
|-------------|--|---------------------------|------------|-------------|-------|--------|----------------|-------|
| 23D1208-BS1 | BOD5 SM5210 B | Biochemical Oxygen Demand | 233 | 198.0 | mg/L | 118 | 84.6 - 115.4 | BOD-5 |
| 23D1452-BS1 | Total Suspended Solids SM2540D 22nd ed. 2011 | Total Suspended Solids | 231 | 250.0 | mg/L | 92 | 80 - 120 | |

* Complete Entire COC to be in Compliance*

RUSH Due Date _____



Chain of Custody

Client Name- **City of Perkins - Public Works Authority**
 Project Name- **Wastewater Treatment Plant - Permit # OK0028801**

| Sample Preserv. & Container → | 1000 ml Plastic | 1000 ml Plastic | 500ml Plastic | | |
|-------------------------------|-----------------|-----------------|---------------|--|--|
| Analysis Requested → | TSS / BOD | TSS / BOD | TDS | | |
| # of Container ↓ | | | | | |
| | x | | | | |

| Accurate Work Order # | Date Sample Taken | Time Sample Taken | Matrix or Source (Refer. below) | Grab (G) or Comp (C) | Client I.D. / Sample Location or DEQ / EPA Location Code | Field Results (pH, Temp, Chlorine, ...) (note analysis & units) | | | # of Container ↓ | TSS / BOD | TSS / BOD | TDS |
|-----------------------|-------------------|-------------------|---------------------------------|----------------------|--|---|---------|--|------------------|-----------|-----------|-----|
| | | | | | | pH | Temp °C | | | | | |
| FD11123 -01 | 4/11/23 | 09:00 | WW | G | Effluent: | | | | 1 | x | | |
| | | | | | | | | | | | | |
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|-----------------------|--|-------------------------------|--------------------------------|-----------|-------------|-------------|----------|
| On-Site Info | Raw Alkalinity (TOC Raw)= _____ mg/L | Turbidity (E.Coli)= _____ ntu | Field Instrument Calibration - | | | | |
| Matrix Codes | DW = Drinkingwater ; WW = Wastewater ; SL = Sludge ; O = Other _____ | | Meter Type | Standards | Final Read. | Date , Time | Initials |
| E.Coli Source- | FS= Flowing Stream; RL= Reservoir Lake; GWUDI= Groundwater under direct influence of surface water | | HACH | | | | |

Comments **Samples Delivered On Ice. (Effluent is Disinfected with Ultra Violet Light)**

-- All Glass containers provided by Accurate Labs have Teflon lined lids --
 -- All samples are scheduled to be disposed of in 4 weeks of receipt at Accurate. --
 -- Hazardous samples will be returned to client or will be disposed of for a fee --

Certification by Company Official: I hereby certify that the above sampling occurred during a period such that the sample(s) is/are representative of a typical operating day discharge for the above facility. Signature _____ Date/Time 4/11/23

Sampled By: [Signature] Company: **City of Perkins** Sample Method: **GRAB**

Relinquished By: [Signature] Date/Time 4/11/23 Received By: [Signature] Date/Time 4/11/23

Relinquished to Lab By: [Signature] Date/Time 4/11/23
 Rel'd to Log-In Fridge By: [Signature] Date/Time 4/11/23 2:34
 Received at Lab By: [Signature] Rec'd °C 9.8 Date/Time 4/11/23 14:34

| | | | | | |
|--|------------------------------|-------------------|-------------------|-----------------------------|----------------|
| Reporting Requirements (standard 10-15 working days) | Compliance Reporting? | Yes or No (DMR,) | Oklahoma PWS ID # | RUSH Request (if available) | (Working Days) |
|--|------------------------------|-------------------|-------------------|-----------------------------|----------------|

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| Mail Report To: chad beitz CBEITZ@cityofperkins.net jsauls@cityofpirkins.net City Manager – citymanager@cityofperkins.net Address: City of Perkins P.O. Box. 9 Perkins, Ok. 74059 Phone #: (405) 714-7859 Fax #: (405) 547-5440 | Mail Invoice To: Bid # - _____ Address: City of Perkins P.O. Box. 9 Perkins, Ok. 74059 PO # - _____ Phone #: (405) 547-2445 Fax #: (405) 547-5440 |
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