

APPENDIX B

WATER MONITORING RESULTS

PHASE I OPERATOR (Industrial & high risk run-off control pollutants within the MS4)

Site Name: Northeast Substation

Site Number: 5561-203b

Event Rainfall Total: 0.08 Inches

Lake:

Stream:

Estimated Stream Flow: 1st Flush Samples CFS

Stream Level Conditions: 1st Flush (Rising, Falling, Steady)

Stream Velocity Conditions: 1st Flush (Rapid/Normal, Still (backwater))

Sample Date: Sept 23, 2015

Parameters & Units Required	Results*	Sample Type	
		Grab	Composite
Oil & Grease (mg/l)	6.5	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chemical Oxygen Demand (mg/l)	115	<input checked="" type="checkbox"/>	<input type="checkbox"/>
pH (S.U.)	8.13	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Biochemical Oxygen Demand (5-day)	27	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Suspended Solids (mg/l)	112	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Phosphorus (mg/l)	0.14	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Kjeldahl Nitrogen (mg/l)	2.37	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nitrate + Nitrite (mg/l)	1.6	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other Pollutant in Guidelines		<input type="checkbox"/>	<input type="checkbox"/>
Other Pollutant In permit		<input type="checkbox"/>	<input type="checkbox"/>
Other: Nitrogen as N	4.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other		<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

Footnotes and comments

* Any result shown in analytical report to be ND (non-detect) must be shown as < with the reporting/detection limit by the certified laboratory.

This form, Water Monitoring Results for Phase I Operator, is intended for use by Phase I MS4s.

NPDES permitted Phase I MS4s included Topeka: Unified Government of Wyandotte County and Kansas City, Kansas; and Wichita. All other NPDES permitted MS4s in Kansas are Phase II MS4s

APPENDIX B

WATER MONITORING RESULTS

PHASE I OPERATOR (Industrial & high risk run-off control pollutants within the MS4)

Site Name: Bus Transit Facility

Site Number: 5547-1562

Event Rainfall Total: 0.08 Inches

Lake:

Stream:

Estimated Stream Flow: 1st Flush Samples CFS

Stream Level Conditions: 1st Flush Samples (Rising, Falling, Steady)

Stream Velocity Conditions: 1st Flush Samples (Rapid/Normal, Still (backwater))

Sample Date: Sept 23, 2015

Parameters & Units Required	Results*	Sample Type	
		Grab	Composite
Oil & Grease (mg/l)	ND(5.8)	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Chemical Oxygen Demand (mg/l)	172	<input checked="" type="checkbox"/>	<input type="checkbox"/>
pH (S.U.)	8.64	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Biochemical Oxygen Demand (5-day)	41	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Suspended Solids (mg/l)	133	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Phosphorus (mg/l)	0.55	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Total Kjeldahl Nitrogen (mg/l)	2.36	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Nitrate + Nitrite (mg/l)	1.4	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other Pollutant in Guidelines		<input type="checkbox"/>	<input type="checkbox"/>
Other Pollutant In permit		<input type="checkbox"/>	<input type="checkbox"/>
Other: Nitrogen as N	3.8	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Other		<input type="checkbox"/>	<input type="checkbox"/>

Comments: _____

Footnotes and comments

* Any result shown in analytical report to be ND (non-detect) must be shown as < with the reporting/detection limit by the certified laboratory.

This form, Water Monitoring Results for Phase I Operator, is intended for use by Phase I MS4s.

NPDES permitted Phase I MS4s included Topeka: Unified Government of Wyandotte County and Kansas City, Kansas; and Wichita. All other NPDES permitted MS4s in Kansas are Phase II MS4s

Client: City of Wichita Attn: Jim Hardesty City Hall, 8th Floor 455 N. Main Wichita, KS 67202	Report Date: 10/13/2015 Date Sample(s) Recd: 9/24/2015 CAS File No: 8339 CAS Order No: 128697 PO/Proj. No: Purchase Auth.: BP240122
---	--

Analyses and Preparation Performed	No. of Samples	Cost Per Sample	Discounted Price Per Sample	Total
BOD (5 Day)	2	42.00	28.50	57.00
Chemical Oxygen Demand	2	32.00	18.75	37.50
Oil & Grease, (HEM)	2	42.00	28.50	57.00
Nitrate/Nitrite, as N (FIA)	2	18.00	11.25	22.50
pH	2	11.00	8.25	16.50
Phosphorus, Total, as P	2	32.00	24.00	48.00
Solids, Total Suspended	2	15.00	11.25	22.50
Kjeldahl Nitrogen, as N (TKN)	2	35.00	26.25	52.50

Amount Due: 313.50

TERMS: Net 30 days from the date of invoice. Interest will be charged on past due accounts at the rate of 1.5% per month on unpaid account balance (annual percentage rate of 18%).

VISA, MasterCard and American Express Accepted. For your protection, our company does not accept credit card numbers via email.



525 N. Eighth St. - Salina, KS 67401
 785-827-1273 800-535-3076 Fax 785-823-7830





525 N. 8th, Salina, KS 67401
 (785) 827-1273 or (800) 535-3076
 Fax (785) 823-7830
 www.cas-lab.com

CHAIN OF CUSTODY RECORD

Continental
 Order No.:
 [Lab to enter Order No.]

1250M

Page _____ of _____

Client/Reporting Information				Client Invoice Information				Requested Test (s)								Comments	
Company Name:				Company Name:												<p>Discrepancies See C/S, RF</p> <p>Is dry weight required? Write Dry Wt. in this column for applicable samples. See (3) below.</p> <p>Is Rush or Emergency TAT required? Write Rush or Emerg in this column for applicable samples. See (4) below.</p>	
Address:				Address:													
City:		State:	Zip:	City:		State:	Zip:										
Contact:				Contact:													
E-mail:				E-mail:													
Phone:		Fax:		Phone:		Fax:											
File No. / Project No.:		Project Name:				Purchase Order:											
Sampled by (Print): <i>David Ornelas</i>				Sampled by (Signature): <i>[Signature]</i>				G - Grab or C - Composite	Total No. of Containers	No. of Preserved Containers							
Sample Identification (30 characters or less - to appear on lab report)				Matrix (1)	Program (2)	DATE Sampled	TIME Sampled			HCl	NaOH	HNO ₃	H ₂ SO ₄	Not Preserved	Other :		
<i>Bus Transit</i>						<i>9-23-15</i>	<i>4:08 PM</i>										
<i>Bus Transit</i>						<i>9-23-15</i>	<i> </i>										
<i>Bus Transit</i>						<i>9-23-15</i>	<i> </i>										
<p>1. Matrix (sample type): DW = Drinking Water GW = Ground Water WW = Waste Water S = Soil / Solid SL = Sludge OL = Oil / Organic Liquid W = Wipe A = Air O = Other</p> <p>2. Regulatory Program: D = Drinking Water N = NPDES R = RCRA SL = 503 Sludge O = No program applies If Regulatory Program is "O" or blank, Continental will select the test method.</p> <p>3. Results will be reported on a wet weight (as received) basis unless dry weight is requested or required (503 regulation, PCB in solid, High level soil VOCs, etc.). Dry weight reporting is subject to an additional charge.</p> <p>4. Turnaround time (TAT): Standard TAT: 15 working days Rush TAT: 5 working days Emergency TAT: 2 - 3 working days Rush TAT and Emergency TAT are subject to an additional charge.</p>																	
RELINQUISHED BY: <i>[Signature]</i>				DATE: <i>9-23-15</i>		TIME: <i>4:36 PM</i>		RECEIVED BY:				DATE:		TIME:			
RELINQUISHED BY:				DATE:		TIME:		RECEIVED BY:				DATE:		TIME:			
RECEIVED AT LAB BY: <i>[Signature]</i>				DATE: <i>9-24-15</i>		TIME: <i>16:45</i>		SHIPPED VIA:				SEAL #:		SEAL DATE:			

CONTINENTAL ANALYTICAL SERVICES, INC.

525 N. EIGHTH STREET
SALINA, KS 67401 - 785/823-1273
FAX: 785/823/7830

CAS ORDER NO: 128697

SHIPPING ORDER NO.: 47954

Date Requested: 6/12/2015

CAS File 8339

Requested By: JH

Received By: GJG

Freq

NextUse

SHIP TO:

City of Wichita Central
Sara Runyon
1801 S. McClean, Suite A
Wichita, KS 67213
316-2688317

REPORT TO:

City of Wichita
Jim Hardesty
City Hall, 8th Floor
Wichita, KS 67202
316-268-8317

Cooler:

3727

Ship Via: UPS

Project: Industrial sites

CAS Price Quote:

QUANTITY			SAMPLE CONTAINERS		
No. Samp.	Cont/Samp.	Total Cont.	Container Type	Preservative	Test Assignment
2	1	2	250mL Plastic	H2SO4	COD, TP, TKN, NO3/NO2, N Total
2	1	2	500mL Plastic	None	BOD, pH, TSS
2	2	4	1000mL Amber	H2SO4	HEM

Date Required at Destination: 6/15/2015

Client Instructions:

Enclosures: Chain of Custody, Custody Seals, Labels, Return Labels,

Order Completed By: ms Date Completed: 6-12-15 Checked By: [Signature]

Place ICE in ZIPLOC® BAGS provided to cool samples prior to shipping to Laboratory.
Verify CAS TEMPERATURE BLANK is located in cooler before adding ice bags.

Please return this SHIPPING ORDER with shipped samples.
To meet analytical holding times, please ship samples via overnight courier.

See the CAS Sample Acceptance Policy located on reverse side of the Chain of Custody.
CAS standard Terms and Conditions of Sale will apply to all samples received unless a separate contractual agreement has been made.

For CAS use only: Labels

Continental Analytical Services, Inc.
Cooler/Sample Receipt Form (C/S RF)

CAS Order No.: 128697
CAS File No.: 8339

Client Name: Wichita

Sample ID's in cooler: 51-501

Cooler 1 of 1 for this CAS Order No.

Cooler Identification: CAS Cooler #: 3727 / Client's Cooler / Box / Letter / Hand-delivered
Other: _____

Date/Time Cooler Received: 9 / 24 / 15 16 : 45

Delivered By: UPS / FedEx / AB Express / Field Svcs / Mail / Walk-In / Other: _____

Custody Seal: Present: Intact / Broken Absent: X Seal No: _____

Seal Name: _____ Seal Date: _____

Seal matches Chain of Custody: Yes / No / N/A

Type of Packing Material: Blue Ice / Ice / Melted Ice / Bubble / Foam / Paper / Peanuts / Vermiculite / None / Other: _____

Cooler Temperature (°C): Original Reading (°C) 3.7 Corrected Reading (°C) 2.2

mu
9,24/15

Temperature. By: Temperature Blank Surface Temperature

Thermo. ID No.: 585 Thermo. Correction Factor (°C): -0.5

Evidence of Cooling and date received = date sampled

Sample Receipt Discrepancies: No Yes (See below for discrepancies.)

Note: If discrepancies are present, CAS will proceed with analyses until/unless directed otherwise by the client.

- | | |
|--|---|
| <input type="checkbox"/> Chain of Custody not present - information taken from:
Cover Letter <input type="checkbox"/> Container <input type="checkbox"/>
PO <input type="checkbox"/> CAS Proj. Mgr. <input type="checkbox"/> | <input type="checkbox"/> Sample excluded from Chain of Custody |
| <input type="checkbox"/> Container label absent | <input type="checkbox"/> Sample listed on Chain of Custody, not received |
| <input type="checkbox"/> Chain of Custody incomplete [see detail below] | <input type="checkbox"/> Sample identification on container and Chain of Custody do not agree |
| <input type="checkbox"/> Chain of Custody missing date/time sampled (excl. TB or Dup.) | <input type="checkbox"/> Air bubbles in Aqueous VOA vials larger than pea-size [approx. 6 mm] |
| <input type="checkbox"/> Date or Time sampled obtained from container label | <input type="checkbox"/> Cooler temperature exceeded 0.1 - 6.0 °C requirement
[Do not mark if samples do not require cooling to 0.1 - 6.0 °C.] |
| <input type="checkbox"/> Chain of Custody missing sampler's name | <input type="checkbox"/> Broken or leaking containers (detail actions below) |
| <input checked="" type="checkbox"/> Chain of Custody missing matrix (sample type) | <input type="checkbox"/> Sample container type or labeled chemical preservation inappropriate |
| <input type="checkbox"/> Missing relinquished information: signature date time | <input type="checkbox"/> Other discrepancies: _____ |

Detail to discrepancies/comments: NO tests on COC, tests off shipping
Order received with samples

Completed by: [Signature] Date Completed: 9/25/15

10/13/2015

Page: 1

City of Wichita
Attn: Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date and Time Received: 09/24/2015 1645
Continental File No.: 8339
Continental Order No.: 128697
Purchase Auth: BP240122

Dear Mr. Hardesty:

This laboratory report, containing the samples indicated below, includes 9 pages for the analytical report, 3 page(s) for the chain of custody and/or analysis request, and 1 page(s) for the sample receipt form.

<u>CAS LAB ID #</u>	<u>SAMPLE DESCRIPTION</u>	<u>SAMPLE TYPE</u>	<u>DATE SAMPLED</u>
15091667	Bus Transit	Liquid	9/23/2015
15091668	North East Sub	Liquid	9/23/2015

The Appendix and Quality Control sections are integral parts of this laboratory report and may contain important data qualifiers.

All results are reported on a wet weight basis unless otherwise stated.

Samples will be retained for thirty days unless Continental is otherwise notified.

Continental is accredited by the State of Kansas through the National Environmental Laboratory Accreditation Program (NELAP). The results contained in this report were obtained using Continental's Standard Operating Procedures. These procedures are in substantial compliance with the approved methods referenced and the standards published by NELAP unless otherwise noted in the Appendix and Quality Control sections of this report.

This report may not be reproduced, except in full, without written approval from Continental Analytical Services, Inc.

Thank you for choosing Continental for this project.

CONTINENTAL ANALYTICAL SERVICES, INC.



Clifford J. Baker
Technical Manager
cjbaker@cas-lab.com



Gregory J. Groene
Project Manager
jgroene@cas-lab.com



525 N. Eighth St. - Salina, KS 67401
785-827-1273 800-535-3076 Fax 785-823-7830
KDHE Environmental Laboratory Accreditation No. E-10146



Sample Results

Page: 2

Client: City of Wichita
 Attn: Jim Hardesty
 City Hall, 8th Floor
 455 N. Main
 Wichita, KS 67202

Date Reported: 10/13/2015
 Date Received: 09/24/2015
 Continental File No: 8339
 Continental Order No: 128697

Lab Number: 15091667
 Sample Description: Bus Transit

Date Sampled: 09/23/2015
 Time Sampled: 1608

<u>Analysis</u>	<u>Concentration</u>	<u>Units</u>	<u>Book/Page</u>
BOD (5 Day)	41 H	mg/L	7427/515
Chemical Oxygen Demand	172	mg/L	7171/290
Kjeldahl Nitrogen, as N (TKN)	2.36	mg/L	7321/963
Nitrate/Nitrite, as N (FIA)	1.4	mg/L	7321/965
Nitrogen (TKN + NO3/NO2), as N	3.8	mg/L	9995/519
Oil & Grease, (HEM)	ND(5.8) L	mg/L	7198/534
pH	8.64 H	Std. units	7439/353
Phosphorus, Total, as P	0.55	mg/L	7321/962
Solids, Total Suspended	133	mg/L	7438/871

<u>Analysis</u>	<u>Date/Time Prepared</u>	<u>Date/Time Analyzed</u>	<u>QC Batch</u>	<u>Inst. Batch</u>	<u>Analyst</u>	<u>Method(s)</u>
BOD (5 Day)	N/A	09/25/15 1623	150925-1	150925-1	ASK	SM 5210B-2001
Chemical Oxygen Demand	N/A	10/08/15 1713	151008-1	151008-1	JND	SM 5220D-1997
Kjeldahl Nitrogen, as N (TKN)	09/29/15 1045	10/01/15 1615	150929-1	151001-2	JND	EPA 351.2
Nitrate/Nitrite, as N (FIA)	N/A	10/06/15 1518	151006-1	151006-1	MLL	4500-NO3(F)-2000
Nitrogen (TKN + NO3/NO2), as N	N/A	10/08/15 1407	N/A	N/A	CJB	Calculation
Oil & Grease, (HEM)	09/30/15 1008	09/30/15 1011	150930-1	150930-1	JND	1664 Rev. A
pH	N/A	09/25/15 0900	150925-1	150925-1	BLA	4500-H (B)-2000
Phosphorus, Total, as P	09/30/15 1315	09/30/15 2253	150930-2	150930-2	JND	4500-P(B&G)-1999
Solids, Total Suspended	N/A	09/28/15 1308	150928-1	150928-1	BLA	SM 2540 (D)-1997
HEM Preparation Method						1664 Rev. A

Conclusion of Lab Number: 15091667

Sample Results

Client: City of Wichita
 Attn: Jim Hardesty
 City Hall, 8th Floor
 455 N. Main
 Wichita, KS 67202

Date Reported: 10/13/2015
 Date Received: 09/24/2015
 Continental File No: 8339
 Continental Order No: 128697

Lab Number: 15091668
 Sample Description: North East Sub

Date Sampled: 09/23/2015
 Time Sampled: 1624

<u>Analysis</u>	<u>Concentration</u>	<u>Units</u>	<u>Book/Page</u>
BOD (5 Day)	27	mg/L	7427/515
Chemical Oxygen Demand	115	mg/L	7171/289
Kjeldahl Nitrogen, as N (TKN)	2.37	mg/L	7321/964
Nitrate/Nitrite, as N (FIA)	1.6	mg/L	7321/965
Nitrogen (TKN + NO3/NO2), as N	4.0	mg/L	9995/519
Oil & Grease, (HEM)	6.5	mg/L	7198/534
pH	8.13 H	Std. units	7439/353
Phosphorus, Total, as P	0.14	mg/L	7321/975
Solids, Total Suspended	112	mg/L	7438/871

<u>Analysis</u>	<u>Date/Time Prepared</u>	<u>Date/Time Analyzed</u>	<u>QC Batch</u>	<u>Inst. Batch</u>	<u>Analyst</u>	<u>Method(s)</u>
BOD (5 Day)	N/A	09/25/15 1623	150925-1	150925-1	ASK	SM 5210B-2001
Chemical Oxygen Demand	N/A	10/05/15 1043	151005-1	151005-1	JND	SM 5220D-1997
Kjeldahl Nitrogen, as N (TKN)	09/29/15 1045	10/01/15 1636	150929-1	151001-4	JND	EPA 351.2
Nitrate/Nitrite, as N (FIA)	N/A	10/06/15 1520	151006-1	151006-1	MLL	4500-NO3(F)-2000
Nitrogen (TKN + NO3/NO2), as N	N/A	10/08/15 1407	N/A	N/A	CJB	Calculation
Oil & Grease, (HEM)	09/30/15 1008	09/30/15 1012	150930-1	150930-1	JND	1664 Rev. A
pH	N/A	09/25/15 0902	150925-1	150925-1	BLA	4500-H (B)-2000
Phosphorus, Total, as P	10/09/15 1125	10/09/15 1510	151009-1	151009-1	JND	4500-P(B&G)-1999
Solids, Total Suspended	N/A	09/28/15 1308	150928-1	150928-1	BLA	SM 2540 (D)-1997
HEM Preparation Method						1664 Rev. A

Conclusion of Lab Number: 15091668

Appendix

Page: 4

Client: City of Wichita
Attn: Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date Reported: 10/13/2015
Date Received: 09/24/2015
Continental File No: 8339
Continental Order No: 128697

ND(), where reported, indicates the analyte was not detected above the Limit of Quantitation (LOQ). The concentration of the LOQ is inside the parentheses.

All samples which require cooling were received at a temperature of less than 6 degrees Celsius.

The following table presents the date and time sampled, the date and time analyzed, and the total time elapsed for each analysis with an EPA recommended holding time of seventy-two hours or less.

<u>CAS LAB ID #</u>	<u>ANALYSIS</u>	<u>DATE/TIME SAMPLED</u>	<u>DATE/TIME ANALYZED</u>	<u>ELAPSED HRS:MIN</u>
15091667	BOD (5 Day)	09/23/2015 1608	09/25/2015 1623	48:15
15091667	pH	09/23/2015 1608	09/25/2015 0900	40:52
15091668	BOD (5 Day)	09/23/2015 1624	09/25/2015 1623	47:59
15091668	pH	09/23/2015 1624	09/25/2015 0902	40:38

H - Regulatory analytical holding time for this analysis was exceeded.

L - Reporting limit higher than normal due to limited sample volume available. If a result is provided it may be less accurate than normal.

Accreditation Summary

Page: 5

Client: City of Wichita
Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date Reported: 10/13/2015
Date Received: 09/24/2015
Continental File No: 8339
Continental Order No: 128697

NELAP accreditation is issued under each EPA regulatory program for a given matrix/analyte/method combination. Continental is NELAP accredited for each matrix/analyte/method and EPA program cited in this Laboratory Report, except for those listed in the table below and for analyses performed in the field. For most of the analyses listed in the table, NELAP accreditation is not offered under the listed EPA program and Continental is NELAP accredited for the analysis, using the same analytical technology, but under a different EPA program. Continental's full NELAP accreditation status may be viewed at www.kdheks.gov/envlab. Note that unless qualified otherwise in the Laboratory Report, Continental performs all analyses, including each analysis listed in the table below, utilizing NELAP protocol.

<u>Test</u>	<u>Analysis</u>	<u>Matrix-Regulatory Program</u>	<u>Method</u>	<u>CAS NELAP Accredited in Other Reg. Program</u>
CAS is accredited for all analytes.				

Quality Control Report Batch Summary

Page: 6

Client: City of Wichita
Attn: Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date Reported: 10/13/2015
Date Received: 09/24/2015
Continental File No: 8339
Continental Order No: 128697

Test Code	Testname	QC Batch	Method Blank Date/Time Analyzed	LCS Date/Time Analyzed	MS Lab No. Date/Time Analyzed
GL123	BOD (5 Day)	150925-1	150925BLK1 09/25/15 1623	150925LCS1 09/25/15 1623	15091576MS 09/25/15 1623
Lab numbers associated with this batch: 15091667 15091668					
GL140	Chemical Oxygen Demand	151005-1	151005BLK1 10/05/15 1040	151005LCS1 10/05/15 1041	15091745MS 10/05/15 1044
Lab numbers associated with this batch: 15091668					
GL140	Chemical Oxygen Demand	151008-1	151008BLK1 10/08/15 1711	151008LCS1 10/08/15 1711	15100042MS 10/08/15 1715
Lab numbers associated with this batch: 15091667					
GL595	Kjeldahl Nitrogen, as N (TKN)	150929-1	150929BLK1 10/01/15 1557	150929LCS1 10/01/15 1558	15091748MS 10/01/15 1638
Lab numbers associated with this batch: 15091667 15091668					
GL192	Nitrate/Nitrite, as N (FIA)	151006-1	151006BLK1 10/06/15 1511	151006LCS1 10/06/15 1513	15091646MS 10/06/15 1515
Lab numbers associated with this batch: 15091667 15091668					
GL343	Nitrogen (TKN + NO3/NO2), as N		N/A	N/A	
Lab numbers associated with this batch: 15091667 15091668					
GL188	Oil & Grease, (HEM)	150930-1	150930BLK1 09/30/15 1008	150930LCS1 09/30/15 1008	15091323MS 09/30/15 1008
Lab numbers associated with this batch: 15091667 15091668					
GL211	pH	150925-1	N/A	150925LCS1 09/25/15 0850	15091504MS 09/25/15 0854
Lab numbers associated with this batch: 15091667 15091668					
GL218	Phosphorus, Total, as P	150930-2	150930BLK2 09/30/15 2251	150930LCS2 09/30/15 2252	15091803MS 09/30/15 2256
Lab numbers associated with this batch: 15091667					
GL218	Phosphorus, Total, as P	151009-1	151009BLK1 10/09/15 1507	151009LCS1 10/09/15 1508	15100037MS 10/09/15 1521
Lab numbers associated with this batch: 15091668					

Quality Control Report Batch Summary

Page: 7

Client: City of Wichita
Attn: Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date Reported: 10/13/2015
Date Received: 09/24/2015
Continental File No: 8339
Continental Order No: 128697

Test Code	Testname	QC Batch	Method Blank Date/Time Analyzed	LCS Date/Time Analyzed	MS Lab No. Date/Time Analyzed
GL243	Solids, Total Suspended	150928-1	150928BLK1 09/28/15 1307	N/A	15091802MS 09/28/15 1310

Lab numbers associated with this batch:
15091667 15091668

Quality Control Report
Method Blank, LCS, MS/MSD Data

Page: 8

Client: City of Wichita
Attn: Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date Reported: 10/13/2015
Date Received: 09/24/2015
Continental File No: 8339
Continental Order No: 128697

Analysis	Method Blank	LCS % Rec	LCS Limits	LCS Spike Level	Units	Spiked Sample (% Recovery)		MS/MSD Limits	MS/MSD Spike Level	Units	Spiked Sample Precision Data	
						MS	MSD				RPD	Limit
QC Batch: 150925-1 pH	For sample analyzed on: 09/25/2015			7.0	Std. u	Spiked sample: 15091504		#	N/A	Std. u	**	0.90
QC Batch: 150925-1 BOD (5 Day)	For sample analyzed on: 09/25/2015			198	mg/L	Spiked sample: 15091576		#	N/A	mg/L	**	13.4
QC Batch: 150928-1 Solids, Total Suspended	For sample analyzed on: 09/28/2015			N/A	mg/L	Spiked sample: 15091802		#	N/A	mg/L	**	24.1
QC Batch: 150929-1 Kjeldahl Nitrogen, as N (TKN)	For samples prepared on: 09/29/2015 1045			4.0	mg/L	Spiked sample: 15091748		73.3-126	4.0	mg/L	**	25.3
QC Batch: 150930-1 Oil & Grease, (HEM)	For samples prepared on: 09/30/2015 1008			40.0	mg/L	Spiked sample: 15091323		78.0-114	40.0	mg/L	**	18.0
QC Batch: 150930-2 Phosphorus, Total, as P	For samples prepared on: 09/30/2015 1315			2.0	mg/L	Spiked sample: 15091803		78.2-125	2.0	mg/L	**	13.7
QC Batch: 151005-1 Chemical Oxygen Demand	For sample analyzed on: 10/05/2015			50.0	mg/L	Spiked sample: 15091745		60.1-130	50.0	mg/L	**	19.3
QC Batch: 151006-1 Nitrate/Nitrite, as N (FIA)	For sample analyzed on: 10/06/2015			2.0	mg/L	Spiked sample: 15091646		81.3-113	2.0	mg/L	**	6.2
QC Batch: 151008-1 Chemical Oxygen Demand	For sample analyzed on: 10/08/2015			100	mg/L	Spiked sample: 15100042		60.1-130	100	mg/L	**	19.3
QC Batch: 151009-1 Phosphorus, Total, as P	For samples prepared on: 10/09/2015 1125			2.0	mg/L	Spiked sample: 15100037		78.2-125		mg/L	**	13.7

Data Qualifiers:

MN - The MS/MSD sample analyses were not performed on a sample from this Continental order number.

- Limits not applicable/not available for this analysis.

** - RPD calculation not applicable/not available for this analysis.

Quality Control Report Continuing Calibration Report

Page: 9

Client: City of Wichita
Attn: Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date Reported: 10/13/2015
Date Received: 09/24/2015
Continental File No: 8339
Continental Order No: 128697

<u>Analysis</u>	<u>Date of Analysis</u>	<u>Instrument Batch ID</u>	<u>Amount in Standard</u>	<u>Amount Detected</u>	<u>Units</u>	<u>Percent Recovery</u>
BOD (5 Day)	09/25/2015	150925-1	CCV recovery acceptable for this			Instrument Batch.
BOD (5 Day)	09/25/2015	150925-2	CCV recovery acceptable for this			Instrument Batch.
Chemical Oxygen Demand	10/05/2015	151005-1	CCV recovery acceptable for this			Instrument Batch.
Chemical Oxygen Demand	10/05/2015	151005-2	CCV recovery acceptable for this			Instrument Batch.
Chemical Oxygen Demand	10/08/2015	151008-1	CCV recovery acceptable for this			Instrument Batch.
Chemical Oxygen Demand	10/08/2015	151008-2	CCV recovery acceptable for this			Instrument Batch.
Oil & Grease, (HEM)	09/30/2015	150930-1	CCV recovery acceptable for this			Instrument Batch.
Oil & Grease, (HEM)	09/30/2015	150930-2	CCV recovery acceptable for this			Instrument Batch.
Nitrate/Nitrite, as N (FIA)	10/06/2015	151006-1	CCV recovery acceptable for this			Instrument Batch.
Nitrate/Nitrite, as N (FIA)	10/06/2015	151006-2	CCV recovery acceptable for this			Instrument Batch.
pH	09/25/2015	150925-1	CCV recovery acceptable for this			Instrument Batch.
pH	09/25/2015	150925-2	CCV recovery acceptable for this			Instrument Batch.
Phosphorus, Total, as P	09/30/2015	150930-2	CCV recovery acceptable for this			Instrument Batch.
Phosphorus, Total, as P	09/30/2015	150930-3	CCV recovery acceptable for this			Instrument Batch.
Phosphorus, Total, as P	10/09/2015	151009-1	CCV recovery acceptable for this			Instrument Batch.
Phosphorus, Total, as P	10/09/2015	151009-2	CCV recovery acceptable for this			Instrument Batch.
Kjeldahl Nitrogen, as N (TKN)	10/01/2015	151001-2	CCV recovery acceptable for this			Instrument Batch.
Kjeldahl Nitrogen, as N (TKN)	10/01/2015	151001-3	CCV recovery acceptable for this			Instrument Batch.
Kjeldahl Nitrogen, as N (TKN)	10/01/2015	151001-4	CCV recovery acceptable for this			Instrument Batch.
Kjeldahl Nitrogen, as N (TKN)	10/01/2015	151001-5	CCV recovery acceptable for this			Instrument Batch.



525 N. 8th, Salina, KS 67401
 (785) 827-1273 or (800) 535-3076
 Fax (785) 823-7830
 www.cas-lab.com

CHAIN OF CUSTODY RECORD

Continental
 Order No.:
 [Lab to enter Order No.]

12/20/15

Page _____ of _____

Client/Reporting Information				Client Invoice Information				Requested Test (s)								Comments	
Company Name:				Company Name:												<p>Discrepancies See C/S, RF</p> <p>Is dry weight required? Write Dry Wt. in this column for applicable samples. See (3) below.</p> <p>Is Rush or Emergency TAT required? Write Rush or Emerg in this column for applicable samples. See (4) below.</p>	
Address:				Address:													
City:		State:	Zip:	City:		State:	Zip:										
Contact:				Contact:													
E-mail:				E-mail:													
Phone:		Fax:		Phone:		Fax:											
File No. / Project No.:		Project Name:				Purchase Order:											
Sampled by (Print): <i>David Ornelas</i>				Sampled by (Signature): <i>[Signature]</i>				G - Grab or C - Composite	Total No. of Containers	No. of Preserved Containers							
Sample Identification (30 characters or less - to appear on lab report)				Matrix (1)	Program (2)	DATE Sampled	TIME Sampled			HCl	NaOH	HNO ₃	H ₂ SO ₄	Not Preserved	Other :		
<i>Bus Transit</i>						<i>9-23-15</i>	<i>4:08 PM</i>										
<i>Bus Transit</i>						<i>9-23-15</i>	<i> </i>										
<i>Bus Transit</i>						<i>9-23-15</i>	<i> </i>										
<p>1. Matrix (sample type): DW = Drinking Water GW = Ground Water WW = Waste Water S = Soil / Solid SL = Sludge OL = Oil / Organic Liquid W = Wipe A = Air O = Other</p> <p>2. Regulatory Program: D = Drinking Water N = NPDES R = RCRA SL = 503 Sludge O = No program applies If Regulatory Program is "O" or blank, Continental will select the test method.</p> <p>3. Results will be reported on a wet weight (as received) basis unless dry weight is requested or required (503 regulation, PCB in solid, High level soil VOCs, etc.). Dry weight reporting is subject to an additional charge.</p> <p>4. Turnaround time (TAT): Standard TAT: 15 working days Rush TAT: 5 working days Emergency TAT: 2 - 3 working days Rush TAT and Emergency TAT are subject to an additional charge.</p>																	
RELINQUISHED BY: <i>[Signature]</i>				DATE: <i>9-23-15</i>		TIME: <i>4:36 PM</i>		RECEIVED BY:				DATE:		TIME:			
RELINQUISHED BY:				DATE:		TIME:		RECEIVED BY:				DATE:		TIME:			
RECEIVED AT LAB BY: <i>[Signature]</i>				DATE: <i>9-24-15</i>		TIME: <i>16:45</i>		SHIPPED VIA:				SEAL #:		SEAL DATE:			



525 N. 8th, Salina, KS 67401
 (785) 827-1273 or (800) 535-3076
 Fax (785) 823-7830
 www.cas-lab.com

CHAIN OF CUSTODY RECORD

Continental
 Order No.:
 [Lab to enter Order No.]

120697

Page _____ of _____

Client/Reporting Information				Client Invoice Information				Requested Test (s)								Comments
Company Name:				Company Name:												<p>Is dry weight required ? Write Dry Wt. in this column for applicable samples. See (3) below.</p> <p>Is Rush or Emergency TAT required ? Write Rush or Emerg in this column for applicable samples. See (4) below.</p>
Address:				Address:												
City:		State:	Zip:	City:		State:	Zip:									
Contact:				Contact:												
E-mail:				E-mail:												
Phone:		Fax:		Phone:		Fax:										
File No. / Project No.:		Project Name:		Purchase Order:												
Sampled by (Print): David S O'Neil AS				Sampled by (Signature): <i>[Signature]</i>				No. of Preserved Containers								
Sample Identification (30 characters or less - to appear on lab report)			Matrix (1)	Program (2)	DATE Sampled	TIME Sampled	G-Grab or C-Composite	Total No. of Containers	HCl	NaOH	HNO ₃	H ₂ SO ₄	Not Preserved	Other :		
North East Sub					9-23-15	4:24 PM										
North East Sub																
North East Sub																
<p>1. Matrix (sample type): DW = Drinking Water GW = Ground Water WW = Waste Water S = Soil / Solid SL = Sludge OL = Oil / Organic Liquid W = Wipe A = Air O = Other</p> <p>2. Regulatory Program: D = Drinking Water N = NPDES R = RCRA SL = 503 Sludge O = No program applies If Regulatory Program is "O" or blank, Continental will select the test method.</p> <p>3. Results will be reported on a wet weight (as received) basis unless dry weight is requested or required (503 regulation, PCB in solid, High level soil VOCs, etc.). Dry weight reporting is subject to an additional charge.</p> <p>4. Turn around time (TAT): Standard TAT: 15 working days Rush TAT: 5 working days Emergency TAT: 2 - 3 working days Rush TAT and Emergency TAT are subject to an additional charge.</p>																
RELINQUISHED BY: <i>[Signature]</i>				DATE: 9-23-15		TIME: 4:36 PM		RECEIVED BY:				DATE:		TIME:		
RELINQUISHED BY:				DATE:		TIME:		RECEIVED BY:				DATE:		TIME:		
RECEIVED AT LAB BY: <i>[Signature]</i>				DATE: 9-24-15		TIME: 16:45		SHIPPED VIA:				SEAL #:		SEAL DATE:		

Continental's standard Terms and Conditions of Sale will apply to all samples received unless a separate contractual agreement has been made. Please note the enclosed Continental Sample Acceptance Policy.

CONTINENTAL ANALYTICAL SERVICES, INC.

525 N. EIGHTH STREET
SALINA, KS 67401 - 785/823-1273
FAX: 785/823/7830

CAS ORDER NO: 128697

SHIPPING ORDER NO.: 47954

Date Requested: 6/12/2015

CAS File 8339

Requested By: JH

Received By: GJG

Freq

NextUse

SHIP TO:

City of Wichita Central
Sara Runyon
1801 S. McClean, Suite A
Wichita, KS 67213
316-2688317

REPORT TO:

City of Wichita
Jim Hardesty
City Hall, 8th Floor
Wichita, KS 67202
316-268-8317

Cooler:

3727

Ship Via: UPS

Project: Industrial sites

CAS Price Quote:

QUANTITY			SAMPLE CONTAINERS		
No. Samp.	Cont/ Samp.	Total Cont.	Container Type	Preservative	Test Assignment
2	1	2	250mL Plastic	H2SO4	COD, TP, TKN, NO3/NO2, N Total
2	1	2	500mL Plastic	None	BOD, pH, TSS
2	2	4	1000mL Amber	H2SO4	HEM

Date Required at Destination: 6/15/2015

Client Instructions:

Enclosures: Chain of Custody, Custody Seals, Labels, Return Labels,

Order Completed By: ms Date Completed: 6-12-15 Checked By: [Signature]

Place ICE in ZIPLOC® BAGS provided to cool samples prior to shipping to Laboratory.
Verify CAS TEMPERATURE BLANK is located in cooler before adding ice bags.

Please return this SHIPPING ORDER with shipped samples.
To meet analytical holding times, please ship samples via overnight courier.

See the CAS Sample Acceptance Policy located on reverse side of the Chain of Custody.
CAS standard Terms and Conditions of Sale will apply to all samples received unless a separate contractual agreement has been made.

For CAS use only: Labels

Continental Analytical Services, Inc.
Cooler/Sample Receipt Form (C/S RF)

CAS Order No.: 128697
CAS File No.: 8339

Client Name: Wichita

Sample ID's in cooler: 51-501

Cooler 1 of 1 for this CAS Order No.

Cooler Identification: CAS Cooler #: 3727 / Client's Cooler / Box / Letter / Hand-delivered
Other: _____

Date/Time Cooler Received: 9 / 24 / 15 16 : 45

Delivered By: UPS / FedEx / AB Express / Field Svcs / Mail / Walk-In / Other: _____

Custody Seal: Present: Intact / Broken Absent: X Seal No: _____

Seal Name: _____ Seal Date: _____

Seal matches Chain of Custody: Yes / No / N/A

Type of Packing Material: Blue Ice / Ice / Melted Ice / Bubble / Foam / Paper / Peanuts / Vermiculite / None / Other: _____

Cooler Temperature (°C): Original Reading (°C) 3.7 Corrected Reading (°C) 2.2

mu
9,24/15

Temperature. By: Temperature Blank Surface Temperature

Thermo. ID No.: 505 Thermo. Correction Factor (°C): -0.5

Evidence of Cooling and date received = date sampled

Sample Receipt Discrepancies: No Yes (See below for discrepancies.)

Note: If discrepancies are present, CAS will proceed with analyses until/unless directed otherwise by the client.

- | | |
|--|---|
| <input type="checkbox"/> Chain of Custody not present - information taken from:
Cover Letter <input type="checkbox"/> Container <input type="checkbox"/>
PO <input type="checkbox"/> CAS Proj. Mgr. <input type="checkbox"/> | <input type="checkbox"/> Sample excluded from Chain of Custody |
| <input type="checkbox"/> Container label absent | <input type="checkbox"/> Sample listed on Chain of Custody, not received |
| <input type="checkbox"/> Chain of Custody incomplete [see detail below] | <input type="checkbox"/> Sample identification on container and Chain of Custody do not agree |
| <input type="checkbox"/> Chain of Custody missing date/time sampled (excl. TB or Dup.) | <input type="checkbox"/> Air bubbles in Aqueous VOA vials larger than pea-size [approx. 6 mm] |
| <input type="checkbox"/> Date or Time sampled obtained from container label | <input type="checkbox"/> Cooler temperature exceeded 0.1 - 6.0 °C requirement
[Do not mark if samples do not require cooling to 0.1 - 6.0 °C.] |
| <input type="checkbox"/> Chain of Custody missing sampler's name | <input type="checkbox"/> Broken or leaking containers (detail actions below) |
| <input checked="" type="checkbox"/> Chain of Custody missing matrix (sample type) | <input type="checkbox"/> Sample container type or labeled chemical preservation inappropriate |
| <input type="checkbox"/> Missing relinquished information: signature date time | <input type="checkbox"/> Other discrepancies: _____ |

Detail to discrepancies/comments: NO tests on COC, tests off shipping
Order received with samples

Completed by: [Signature] Date Completed: 9/25/15



9/25/2015

City of Wichita
Attn: Jim Hardesty
City Hall, 8th Floor
455 N. Main
Wichita, KS 67202

Date Received: 9/24/2015
CAS File No.: 8339
CAS Order No.: 128697
Your P.O./Project No.:

Purchase Auth: BP240122

Re: Laboratory Receipt of Samples

Dear Mr. Hardesty:

Continental Analytical Services, Inc., received your sample(s) on the date referenced above. The enclosed Test Assignment Review Sheet(s) detail the test(s) and regulatory program that have been assigned to each sample. Also enclosed is the Billing Review Sheet itemizing the anticipated charges for the samples under this order. Please contact me directly at (800)535-3076 if corrections are necessary or fax (785)823-7830/email this letter to deny authorization to proceed with analysis. All samples on the order have been scheduled for Standard Turnaround.

All samples which require cooling were received at a temperature of less than 6 degrees Celsius.

Please review the Test Assignment Review Sheet(s) and the Cooler/Sample Receipt Form(s), if enclosed, for discrepancies. Continental will proceed with analysis unless you inform us otherwise. If you DO NOT want the analysis performed please sign, date and return this form to Continental.

Name _____ Date _____

Our Terms and Conditions of Sale are located on our website: www.cas-lab.com. These Terms and Conditions will be in effect unless a separate contractual agreement has been made. Samples will be retained by the laboratory for 30 days following issuance of the final report unless an alternate arrangement is agreed to in writing.

Thank you for choosing Continental Analytical Services, Inc. If you have any questions, or require assistance, please contact me directly at (800)535-3076.

CONTINENTAL ANALYTICAL SERVICES, INC.

Gregory J. Groene
Project Manager
Email: gjgroene@cas-lab.com

CONTINENTAL ANALYTICAL SERVICES, INC.
 525 N. Eighth St. - SALINA, KANSAS 67401
 (800)535-3076 - (785)827-1273
 FED ID #48-1062249

BILLING REVIEW SHEET

This is not an invoice.

The invoice will be issued following the final laboratory report.

Page: 1

Client:	City of Wichita Attn: Jim Hardesty City Hall, 8th Floor 455 N. Main Wichita, KS 67202	Report Date: Date Sample(s) Recd: 9/24/2015 CAS File No: 8339 CAS Order No: 128697 PO/Proj. No: Purchase Auth.: BP240122
---------	---	---

Analyses and Preparation Performed	No. of Samples	Cost Per Sample	Discounted Price Per Sample	Total
BOD (5 Day)	2	42.00	28.50	57.00
Chemical Oxygen Demand	2	32.00	18.75	37.50
Oil & Grease, (HEM)	2	42.00	28.50	57.00
Nitrate/Nitrite, as N (FIA)	2	18.00	11.25	22.50
pH	2	11.00	8.25	16.50
Phosphorus, Total, as P	2	32.00	24.00	48.00
Solids, Total Suspended	2	15.00	11.25	22.50
Nitrogen (TKN + NO3/NO2), as N	2	0.00	0.00	0.00
Kjeldahl Nitrogen, as N (TKN)	2	35.00	26.25	52.50

Amount Due: 313.50



525 N. Eighth St. - Salina, KS 67401
 785-827-1273 800-535-3076 Fax 785-823-7830



Continental Analytical Services, Inc.
Accreditation Summary Report

Client: City of Wichita
CAS Order Number: 128697

NELAP accreditation is issued under each EPA regulatory program for a given matrix/analyte/method combination. The table below summarizes Continental's NELAP accreditation status for each requested test for the matrix and regulatory program indicated. If an analyte is listed as Other Reg. Program, NELAP accreditation is not offered under the listed EPA regulatory program and Continental is NELAP accredited for the analysis, using the same analytical technology, but under a different EPA regulatory program. If an analyte is listed as None then Continental is not accredited for that analyte (normally NELAC accreditation is not available). Continental's full NELAP accreditation status may be viewed at www.kdheks.gov/envlab. Note that unless qualified otherwise in the Laboratory Report, Continental performs all analyses, including each analysis listed in the table below, utilizing NELAP protocol.

<u>Test</u>	<u>Analysis</u>	<u>Matrix- Regulatory Program</u>	<u>Method</u>	<u>Certification</u>
GL123	BOD (5 Day)	L-NPDES	SM 5210B-2001	KS
GL140	Chemical Oxygen Demand	L-NPDES	SM 5220D-1997	KS
GL188	Oil & Grease, (HEM)	L-NPDES	1664 Rev. A	KS
GL192	Nitrate/Nitrite, as N (FIA)	L-NPDES	4500-NO ₃ (F)-2000	KS
GL211	pH	L-NPDES	4500-H (B)-2000	KS
GL218	Phosphorus, Total, as P	L-NPDES	4500-P(B&G)-1999	KS
GL243	Solids, Total Suspended	L-NPDES	SM 2540 (D)-1997	KS
GL343	Nitrogen (TKN + NO ₃ /NO ₂), as N	L-NPDES	Calculation	KS
GL595	Kjeldahl Nitrogen, as N (TKN)	L-NPDES	EPA 351.2	KS



525 N. 8th, Salina, KS 67401
 (785) 827-1273 or (800) 535-3076
 Fax (785) 823-7830
 www.cas-lab.com

CHAIN OF CUSTODY RECORD

Continental
 Order No.:
 [Lab to enter Order No.]

1250M

Page _____ of _____

Client/Reporting Information				Client Invoice Information				Requested Test (s)								Comments	
Company Name:				Company Name:												<p>Discrepancies See C/S, RF</p> <p>Is dry weight required? Write Dry Wt. in this column for applicable samples. See (3) below.</p> <p>Is Rush or Emergency TAT required? Write Rush or Emerg in this column for applicable samples. See (4) below.</p>	
Address:				Address:													
City:		State:	Zip:	City:		State:	Zip:										
Contact:				Contact:													
E-mail:				E-mail:													
Phone:		Fax:		Phone:		Fax:											
File No. / Project No.:		Project Name:				Purchase Order:											
Sampled by (Print): <i>David Ornelas</i>				Sampled by (Signature): <i>[Signature]</i>				G - Grab or C - Composite	Total No. of Containers	No. of Preserved Containers							
Sample Identification (30 characters or less - to appear on lab report)				Matrix (1)	Program (2)	DATE Sampled	TIME Sampled			HCl	NaOH	HNO ₃	H ₂ SO ₄	Not Preserved	Other :		
<i>Bus Transit</i>						<i>9-23-15</i>	<i>4:08 PM</i>										
<i>Bus Transit</i>						<i>9-23-15</i>	<i> </i>										
<i>Bus Transit</i>						<i>9-23-15</i>	<i> </i>										
<p>1. Matrix (sample type): DW = Drinking Water GW = Ground Water WW = Waste Water S = Soil / Solid SL = Sludge OL = Oil / Organic Liquid W = Wipe A = Air O = Other</p> <p>2. Regulatory Program: D = Drinking Water N = NPDES R = RCRA SL = 503 Sludge O = No program applies If Regulatory Program is "O" or blank, Continental will select the test method.</p> <p>3. Results will be reported on a wet weight (as received) basis unless dry weight is requested or required (503 regulation, PCB in solid, High level soil VOCs, etc.). Dry weight reporting is subject to an additional charge.</p> <p>4. Turnaround time (TAT): Standard TAT: 15 working days Rush TAT: 5 working days Emergency TAT: 2 - 3 working days Rush TAT and Emergency TAT are subject to an additional charge.</p>																	
RELINQUISHED BY: <i>[Signature]</i>				DATE: <i>9-23-15</i>		TIME: <i>4:36 PM</i>		RECEIVED BY:				DATE:		TIME:			
RELINQUISHED BY:				DATE:		TIME:		RECEIVED BY:				DATE:		TIME:			
RECEIVED AT LAB BY: <i>[Signature]</i>				DATE: <i>9-24-15</i>		TIME: <i>16:45</i>		SHIPPED VIA:				SEAL #:		SEAL DATE:			

CONTINENTAL ANALYTICAL SERVICES, INC.

525 N. EIGHTH STREET
 SALINA, KS 67401 - 785/823-1273
 FAX: 785/823/7830

CAS ORDER NO: 128697

SHIPPING ORDER NO.: 47954

Date Requested: 6/12/2015

CAS File 8339

Requested By: JH

Received By: GJG

Freq

NextUse

SHIP TO:

City of Wichita Central
 Sara Runyon
 1801 S. McClean, Suite A
 Wichita, KS 67213
 316-2688317

REPORT TO:

City of Wichita
 Jim Hardesty
 City Hall, 8th Floor
 Wichita, KS 67202
 316-268-8317

Cooler:

3727

Ship Via: UPS

Project: Industrial sites

CAS Price Quote:

QUANTITY			SAMPLE CONTAINERS		
No. Samp.	Cont/Samp.	Total Cont.	Container Type	Preservative	Test Assignment
2	1	2	250mL Plastic	H2SO4	COD, TP, TKN, NO3/NO2, N Total
2	1	2	500mL Plastic	None	BOD, pH, TSS
2	2	4	1000mL Amber	H2SO4	HEM

Date Required at Destination: 6/15/2015

Client Instructions:

Enclosures: Chain of Custody, Custody Seals, Labels, Return Labels,

Order Completed By: ms Date Completed: 6-12-15 Checked By: [Signature]

Place ICE in ZIPLOC® BAGS provided to cool samples prior to shipping to Laboratory.
 Verify CAS TEMPERATURE BLANK is located in cooler before adding ice bags.

Please return this SHIPPING ORDER with shipped samples.
 To meet analytical holding times, please ship samples via overnight courier.

See the CAS Sample Acceptance Policy located on reverse side of the Chain of Custody.
 CAS standard Terms and Conditions of Sale will apply to all samples received unless a separate contractual agreement has been made.

For CAS use only: Labels

Continental Analytical Services, Inc.
Cooler/Sample Receipt Form (C/S RF)

CAS Order No.: 128697
CAS File No.: 8339

Client Name: Wichita

Sample ID's in cooler: 51-501

Cooler 1 of 1 for this CAS Order No.

Cooler Identification: CAS Cooler #: 3727 / Client's Cooler / Box / Letter / Hand-delivered
Other: _____

Date/Time Cooler Received: 9 / 24 / 15 16 : 45

Delivered By: UPS / FedEx / AB Express / Field Svcs / Mail / Walk-In / Other: _____

Custody Seal: Present: Intact / Broken Absent: X Seal No: _____

Seal Name: _____ Seal Date: _____

Seal matches Chain of Custody: Yes / No / N/A

Type of Packing Material: Blue Ice / Ice / Melted Ice / Bubble / Foam / Paper / Peanuts / Vermiculite / None / Other: _____

Cooler Temperature (°C): Original Reading (°C) 3.7 Corrected Reading (°C) 2.2

mu
9,24/15

Temperature. By: Temperature Blank Surface Temperature

Thermo. ID No.: 505 Thermo. Correction Factor (°C): -0.5

Evidence of Cooling and date received = date sampled

Sample Receipt Discrepancies: No Yes (See below for discrepancies.)

Note: If discrepancies are present, CAS will proceed with analyses until/unless directed otherwise by the client.

- | | |
|--|---|
| <input type="checkbox"/> Chain of Custody not present - information taken from:
Cover Letter <input type="checkbox"/> Container <input type="checkbox"/>
PO <input type="checkbox"/> CAS Proj. Mgr. <input type="checkbox"/> | <input type="checkbox"/> Sample excluded from Chain of Custody |
| <input type="checkbox"/> Container label absent | <input type="checkbox"/> Sample listed on Chain of Custody, not received |
| <input type="checkbox"/> Chain of Custody incomplete [see detail below] | <input type="checkbox"/> Sample identification on container and Chain of Custody do not agree |
| <input type="checkbox"/> Chain of Custody missing date/time sampled (excl. TB or Dup.) | <input type="checkbox"/> Air bubbles in Aqueous VOA vials larger than pea-size [approx. 6 mm] |
| <input type="checkbox"/> Date or Time sampled obtained from container label | <input type="checkbox"/> Cooler temperature exceeded 0.1 - 6.0 °C requirement
[Do not mark if samples do not require cooling to 0.1 - 6.0 °C.] |
| <input type="checkbox"/> Chain of Custody missing sampler's name | <input type="checkbox"/> Broken or leaking containers (detail actions below) |
| <input checked="" type="checkbox"/> Chain of Custody missing matrix (sample type) | <input type="checkbox"/> Sample container type or labeled chemical preservation inappropriate |
| <input type="checkbox"/> Missing relinquished information: signature date time | <input type="checkbox"/> Other discrepancies: _____ |

Detail to discrepancies/comments: NO tests on COC, tests off shipping
Order received with samples

Completed by: [Signature] Date Completed: 9/25/15