

10/03/2023

Baltimore, City of  
Deneen Gordon  
Laboratory Technical Administrator  
Ashburton Filtration Plant  
3001 Druid Park Drive  
Baltimore, MD 21215

Subject: Finished Reservoirs/ASI #71458


Dear: Deneen Gordon, Technical Admin.

Enclosed please find the test result(s) for sample(s) received at Analytical Services, Inc. (ASI) on 09/29/2023.

This report consists of three (3) pages, including this cover page. The results reported herein relate only to the sample(s) included in this report. These results were generated under ASI's laboratory quality system, which is in accordance with the NELAC (TNI) standard. Deviations, if any, are noted. This report shall not be reproduced except in full without the written approval of the laboratory.

Thank you for using ASI for your testing needs. For additional information regarding this report, please contact ASI Client Services at 800-723-4432.

Sincerely,  
ANALYTICAL SERVICES, INC.

  
Harry D. Christman, PhD (Hm)  
Technical Director

Laboratory ID: NH-ELAP #2065



**USEPA Method 1623.1 Analytical Report**

 Baltimore, City of  
 Deneen Gordon  
 Laboratory Technical Administrator  
 Ashburton Filtration Plant  
 3001 Druid Park Drive  
 Baltimore, MD 21215

 Analysis Start: 09/29/2023 12:23  
 Analysis End: 10/02/2023 12:39  
 Analyst: Kyle Masters

**ASI Sample ID No.: 71458-01**

 Method 1623.1 Batch No.: 2526 1623.1  
 Cryptosporidium QC ID No.: 5808  
 Giardia QC ID No.: 5809

| Sample Information            |                     |
|-------------------------------|---------------------|
| PWS or Client Name:           | BALTIMORE CITY      |
| PWS ID:                       | MD0300002           |
| Facility Name:                | DRUID LAKE EFFLUENT |
| Facility ID:                  | TP3                 |
| Sample Collection Point Name: | DRUID LAKE EFFLUENT |
| Sample Collection Point ID:   | No Data             |
| Matrix:                       | Water-Finished      |
| Method:                       | EPA 1623.1          |
| Analysis Type:                | Field               |
| Date / Time Collected:        | 09/27/2023 10:03    |
| Turbidity (NTU):              | 0.3                 |

| Volume and Filtration Information                 |               |
|---------------------------------------------------|---------------|
| Filter Type:                                      | Envirochek HV |
| No of Filters Used:                               | 1             |
| Volume Filtered (L):                              | 10.39         |
| Packed Pellet Volume (mL):                        | 0.10          |
| Total Resuspended Concentrate Volume (mL):        | 5.0           |
| Total Resuspended Concentrate Volume to IMS (mL): | 5.0           |
| Number of Sub-samples:                            | 1             |
| Total Sample Volume Examined (L):                 | 10.39         |

| Analytical Results     |                    | Matrix Spike Results   |                         |                  |
|------------------------|--------------------|------------------------|-------------------------|------------------|
| Analyte                | Total (Oo) cysts/L | Recovered (Oo) cysts/L | Spike Dose (Oo) cysts/L | Percent Recovery |
| <i>Giardia</i>         | 0.00               | N/A                    | N/A                     | N/A              |
| <i>Cryptosporidium</i> | 0.00               | N/A                    | N/A                     | N/A              |

Method: Samples processed, stained and examined using USEPA Method 1623.1: Cryptosporidium and Giardia in Water by Filtration/IMS/FA (USEPA Jan. 2012: EPA 816-R-12-001) (ASI SOP 224-9).

**CHAIN OF CUSTODY RECORD**

Ship to: Analytical Services, Inc., 130 Allen Brook Lane, Williston, VT 05495, Attn: Sample Management  
 Phone: 1-800-723-4432 or 802-878-5138 • Fax: 802-878-6765 Web site: [www.analyticalservices.com](http://www.analyticalservices.com)

|                                                                                                                                         |                            |                                                                                                                                                    |                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------|----------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------|
| Submitted By: <u>City of Baltimore</u><br><u>Ashburton WA Laboratory</u><br><u>3001 Druid Park Drive</u><br><u>Baltimore, MD. 21215</u> |                            | Report To: <u>Deneen Gordon</u><br><u>City of Baltimore Ashburton WA Laboratory</u><br><u>3001 DRUID PARK DRIVE</u><br><u>Baltimore, MD. 21215</u> |                                                                                                                              |
| Phone: <u>410-376-0150</u> Email: <u>deneen.gordon@baltimorecity.gov</u>                                                                |                            | Phone: <u>410-376-0150</u> Email: <u>deneen.gordon@baltimorecity.gov</u>                                                                           |                                                                                                                              |
| Project Name                                                                                                                            | <u>CRYPTO / GIARDIA</u>    | Invoice To:                                                                                                                                        | <u>City of Baltimore</u>                                                                                                     |
| Job Site                                                                                                                                | <u>DRUID LAKE EFFLUENT</u> |                                                                                                                                                    | <u>Bureau of Accounting &amp; Payroll Services</u><br><u>401 E. Fayette Street 15th floor</u><br><u>Baltimore, MD. 21202</u> |
| P.O. Number                                                                                                                             | <u>PO-013091</u>           | Phone:                                                                                                                                             | _____ Email: _____                                                                                                           |

| Sample Identification*                                | Sample Collection |              |                  | Sample Matrix |                                     |             |           |               |       |  | Analysis Requested                              | Lab Use Only<br>Temp (°C) |
|-------------------------------------------------------|-------------------|--------------|------------------|---------------|-------------------------------------|-------------|-----------|---------------|-------|--|-------------------------------------------------|---------------------------|
|                                                       | Date (Start)      | Time (Start) | Sampler Initials | check one     |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  | Water - Raw   | Water - Finished                    | Waste Water | Biosolids | Soil/Sediment | Other |  |                                                 |                           |
| <u>DRUID LAKE</u><br><u>"FINISHED WATER" EFFLUENT</u> | <u>9/27/23</u>    | <u>10:03</u> |                  |               | <input checked="" type="checkbox"/> |             |           |               |       |  | <u>CRYPTO / GIARDIA</u><br><u>METHOD # 1623</u> | <u>2.9</u>                |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |
|                                                       |                   |              |                  |               |                                     |             |           |               |       |  |                                                 |                           |

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\*Sample ID should match ID written on the sample containers and data sheets. Sample ID will appear on the report for identification.

|                                                   |                                       |                                               |                                  |
|---------------------------------------------------|---------------------------------------|-----------------------------------------------|----------------------------------|
| Relinquished By (signature)<br><u>[Signature]</u> | Date/Time<br><u>9/27/23, 10:03 AM</u> | Received By (signature)<br><u>[Signature]</u> | Date/Time<br><u>9/29/23 1015</u> |
| Field Comments:                                   |                                       | Lab Comments:                                 |                                  |