



Radionuclide Report

I. PWS INFORMATION: Please refer to your DEP Water Quality Sampling Schedule (WQSS) to help complete this form

PWS ID #: **3116000** City / Town: **GROVELAND**
 PWS Name: **Groveland Water Department** PWS Class: COM NTNC TNC

DEP LOCATION (LOC) ID#	DEP Location Name	Sample Information		Date Collected	Collected By
10004	Well #4	<input type="checkbox"/> (M)ultiple <input checked="" type="checkbox"/> (S)ingle	<input type="checkbox"/> (R)aw <input checked="" type="checkbox"/> (F)inished	7/1/2015	C. Stokes
Routine or Special Sample	Original, Resubmitted or Confirmation Report	If Resubmitted Report, list below:			
		(1) Reason for Resubmission		(2) Collection Date of Original Sample	
<input checked="" type="checkbox"/> RS <input type="checkbox"/> SS	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Resubmitted <input type="checkbox"/> Confirmation	<input type="checkbox"/> Resample <input type="checkbox"/> Ranalysis <input type="checkbox"/> Report Correction			
SAMPLE NOTES – (Such as, if a Manifold/Multiple sample, list any sources that were on-line line during sample collection).					

II. ANALYTICAL LABORATORY INFORMATION:

Primary Lab MA Cert. #: **MA026** Primary Lab Name: **Biomarine Inc** Subcontracted? (Y/N)

Was this sample composited by the Lab? <input type="checkbox"/>	COMPOSITE SAMPLE NOTES List the composited source by DEP Source Code (XXXXXXX-XXX) and dates collected, up to four consecutive quarterly samples per single entry point.
LAB SAMPLE NOTES	

Contaminant	RESULT	Std Dev (+/-)	MCL	MDL	Lab Method	Date Analyzed	Lab Sample ID#	Analysis Lab MA Cert#	Analysis Lab Name
GROSS ALPHA (pCi/L)									
URANIUM – activity (pCi/L)									
Report Uranium result and MDL in (pCi/L) as analyzed, otherwise use formula to calculate [Uranium µg/L x 0.67 = Uranium pCi/L]. Check this box if result is calculated <input type="checkbox"/>									
ADJUSTED GROSS ALPHA (pCi/L)		----	15		The MCL for <i>Adjusted Gross Alpha</i> (Gross Alpha minus Uranium) is 15 pCi/L. A gross alpha measurement may be substituted for the uranium analysis, if the gross alpha result is equal to or less than 15 pCi/L. If gross alpha exceeds 15 pCi/L, uranium must also be measured.				
URANIUM – mass (µg/L)			30						
Report Uranium result and MDL in (µg/L) as analyzed, otherwise use formula to calculate [Uranium pCi/L / 0.67 = Uranium µg/L]. Check this box if result is calculated <input type="checkbox"/>									
RADIUM-226 (pCi/L)	ND	+/-0.05		0.980	EPA 903.0	7/17/15	E507275-2-59887B	-	SET LAB
RADIUM-228 (pCi/L)	ND	+/-0.82		0.900	EPA 904.0	7/16/15	E507275-2-59887B	-	SET LAB
COMBINED RADIUM (pCi/L)	ND	----	5		The MCL for <i>Combined Radium</i> (Radium-226 plus Radium-228) is 5 pCi/L. A gross alpha measurement may be substituted for the radium-226 analysis, if the gross alpha result is equal to or less than 5 pCi/L. If gross alpha exceeds 5 pCi/L, radium-226 must also be measured.				
GROSS BETA (pCi/L)			*						
*The MCL for gross beta is 4 mrem/year. If gross beta exceeds 50 pCi/L, analysis of the sample for Photon Activity shall be performed to identify the major radioactive constituents. Gross Beta testing is optional, unless specifically required by DEP.									
RADON (pCi/L)			**						
**Radon testing is optional, unless specifically required by DEP. The MA guideline for Radon is 10,000 pCi/L. The EPA has proposed a radon MCL of 300 – 4000 pCi/L.									

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature: _____

Date: 7/28/15

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting period, whichever is sooner.

DEP REVIEW STATUS (Initial & Date)	Review Comments	<input type="checkbox"/> WQTS Data Entered
<input type="checkbox"/> Accepted _____ <input type="checkbox"/> Disapproved _____		



Massachusetts Department of Environmental Protection - Drinking Water Program
Perchlorate Report

CIO 4

I. PWS INFORMATION: Please refer to your DEP Water Quality Sampling Schedule (WQSS) to help complete this form

PWS ID #: City / Town: Gloucester
 PWS Name: Biomarine Laboratory PWS Class: COM NTNC TNC

DEP LOCATION (LOC) ID#	DEP Location Name	59886B	Sample Information	Date Collected	Collected By
			<input type="checkbox"/> (M)ultiple <input checked="" type="checkbox"/> (S)ingle <input type="checkbox"/> (R)aw <input type="checkbox"/> (F)inished	7/1/2015	TF
Routine or Special Sample	Original or Resubmitted Report		If resubmitted Report, list below:		
<input checked="" type="checkbox"/> RS <input type="checkbox"/> SS	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Resubmitted <input type="checkbox"/> Resample <input type="checkbox"/> Reanalysis <input type="checkbox"/> Report Correction		(1) Reason for Resubmission	(2) Collection Date of Original Sample	
SAMPLE NOTES - (Such as, if a Manifold/Multiple sample, list any sources that were on-line during collection.)					

II. ANALYTICAL LABORATORY INFORMATION:

Primary Lab MA Cert. #: M-MA009 Primary Lab Name: Barnstable County Health Laboratory Subcontracted? (Y/N) N
 Analysis Lab MA Cert. #: Analysis Lab Name:

CONTAMINANT	Result	UOM	MCL	MDL	MRL	Lab Method	Date Analyzed	Lab Sample ID#
PERCHLORATE	ND	ug/L	2.0	0.050	1.0	EPA 314.0	7/9/2015	158821302
CONDUCTIVITY	370	umhos/cm	--	1.0	2.0	EPA 120.1	7/7/2015	158821302

Perchlorate analysis requires the use of a Massachusetts DEP approved laboratory.

Perchlorate concentrations between the Minimum Detection Limit (MDL) and the Minimum Reporting Level (MRL) must be reported as estimated (J) values. (i.e. perchlorate is positively present but tentatively quantified).

All field samples with measured native perchlorate concentrations between 0.8 ug/L and 2.0 ug/L must be tested with and without a perchlorate spike approximately equal to the native perchlorate concentration.

LAB SAMPLE NOTES

Reanalysis and Spike Recovery (required for results between 0.8ug/L and 2.0 ug/L or samples subject to pretreatment in method EPA 314.0)

Compound	Result (ug/L)	MDL (ug/L)	MRL (ug/L)	Spike Concentration (ug/L)	Spike Recovery %	Lab Method	Date Analyzed
Perchlorate (Reanalysis)							
Perchlorate (Spike)							

I certify, under penalties of law, that I am the person authorized to fill out this form, and the information contained herein is true, accurate, and complete to the best extent of my knowledge.

Primary Lab Director Signature:

[Signature]
 Date: 7/14/2015

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report, or no later than 10 days after the end of the reporting period, whichever is sooner.

DEP REVIEW STATUS (Initial and Date) Accepted Disapproved WQTS Data Entered

Review Comments