



Certificate of Analysis

CH2M Hill Plateau Remediation Company
P.O. Box 1600
Mail Stop – R3-60
Richland, WA 99352

December 13, 2013

Attention: Scot Fitzgerald

SAF Number	:	W14-010
Date SDG Closed	:	December 5, 2013
Number of Samples	:	One (1)
Sample Type	:	Water
SDG Number	:	W06619A
Data Deliverable	:	15-Day / Summary

CASE NARRATIVE

I. Introduction

On December 5, 2013 a request for data recheck (Order Number: 131205TARL-R8057) of one water sample was received at TestAmerica. Upon receipt, the sample was assigned the following laboratory ID numbers to correspond with the CH2M specific IDs:

<u>CH2M ID#</u>	<u>TARL ID#</u>	<u>DATE OF RECEIPT</u>	<u>MATRIX</u>
B2R3F2	M2M65(M18L0)	12/05/13	WATER

II. Sample Receipt

The sample was received in good condition and no anomalies were noted during check-in.

III. Analytical Results/Methodology

The analytical results for this report are presented by laboratory sample ID. Each set of data includes sample identification information, analytical results and the appropriate associated statistical errors.

CH2M Hill Plateau Remediation Company
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The requested analyses were:

Chemical Analysis
Total Coliform by method 9223

IV. Quality Control

The analytical results for each analysis performed includes a minimum of one laboratory control sample (LCS), one method (reagent) blank, and one duplicate sample analysis. Any exceptions have been noted in the "Comments" section.

QC and sample results are reported in the same units.

V. Comments

Chemical Analysis
Total Coliform by method 9223

The data were reviewed for typographical, calculation and reporting errors. No data discrepancies or anomalies were found regarding sample B2R3F2, as reported from the analysis data on November 20, 2013.

I certify that this Certificate of Analysis is in compliance with the SOW, both technically and for completeness, for other than the conditions detailed above. Release of the data contained in this hard copy data package has been authorized by the Laboratory Manager, or a designee as verified by the following signature.

Reviewed and approved:


Sandra Seger
Project Manager

DECEMBER 13, 2013

RECHECK, RECOUNT, OR REANALYSIS ORDER

12/05/2013

Order Number: 131205TARL-R8057

TestAmerica Incorporated, Richland

2800 George Washington Way

Richland, WA 99354

Sample Delivery Group:W06619

Sample(s):

Method Name:9223_COLIFORM

Sample#: B2R3F2

Sample Date:10/14/2013 9:37:00 AM

SAF #:W14-010

Lab Sample ID	RDR Action Start Date	Constituent	Action	TAT (Hardcopy/EDD)
9M18L010	12/5/2013 1:15:46 PM	Coliform Bacteria	RECHECK	15 Days / 15 Days
Special Instructions:	Data inconsistent with historical results - please recheck for anomalies. SLF 12/05/2013			

W06619A

RCV'D 12-05-13

DUE 12-20-13

J3L060407
mambs

Deliver Report Results to:CHPRC

P.O. Box 1600

Richland, WA 99352

C/O Mr.Scot Fitzgerald



Seger, Sandra

From: Fitzgerald, Scot L [Scot_L_Fitzgerald@rl.gov]
Sent: Thursday, December 05, 2013 1:16 PM
To: Seger, Sandra
Cc: Ayres, Doris E; Douglas, James G (Jim); Evans, Robert T; Faight, William R; Fitzgerald, Scot L; Todak, David; Trent, Stephen J; Waters-husted, Karen S
Subject: Request for Recheck, or Reanalysis Order / R8057 SAF W14-010
Attachments: RDR8057_LabOrder.rtf
See Attachment

CHAIN OF CUSTODY/SAMPLE ANALYSIS REQUEST C.O.C.# W14-010-039 Page 1 of 1	
Company: CH2M Hill Plateau Remediation Company	Telephone No. 509-376-4650
Collector: Frank Hill	Contact/Requester: Karen Waters-Husted
Project No.: W14-010	Purchase Order/Charge Code: 30007IES20
Project Title: RCRA, OCTOBER 2013	Ice Chest No.: N/A
Shipped To (Lab): TestAmerica Incorporated, Richland	Bill of Lading/Air Bill No.: N/A
Protocol: RCRA	Offsite Property No.: N/A
Priority: 30 Days	Total Activity Exemption: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
SPECIAL INSTRUCTIONS: PRIORITY Site Wide Generator Knowledge Information Form applies. The CACN for all analytical work at WSCF is 401647. FY13 and FY14 samples cannot be in the same SDG.	Hold Time:
POSSIBLE SAMPLE HAZARDS/REMARKS ** ** Certain Radioactive Material at concentrations that are not regulated for transportation per 49 CFR but are not releasable per DOE Order 5400.5 (1990/1993)	Holding Time: 6 Hours
Filter: *	Sample Analysis: Na2S2O3/Cool-4C
No/Type Container: 1x500-ml P	Preservative: None
Time: 19/14/13 0937	Date/Time:
Date: 10/14/13	Date/Time:
Sign: [Signature]	Date/Time:
Sign: [Signature]	Date/Time:

M2M65 SRS 2-6-13

335140418
W066619

Relinquished By: Frank Hill	Received By: J. B. [Signature]	Date/Time: OCT 14 2013 12:15	Date/Time: OCT 14 2013 12:15
Relinquished By:	Received By:	Date/Time:	Date/Time:
Relinquished By:	Received By:	Date/Time:	Date/Time:
Relinquished By:	Received By:	Date/Time:	Date/Time:
FINAL SAMPLE DISPOSITION	Disposal Method (e.g., Return to customer, per lab procedure, used in process)	Disposed By:	Date/Time:

A-6004-842 (REV 2)

PRINTED ON 9/4/2013



Sample Check-in List

Date/Time Received: 10-14-13/1215 Container GM Screen Result: (Airlock) 20 cpm Initials []
Sample GM Screen Result (Sample Receiving) 40 cpm Initials []

Client: Pkw SDG #: W00619 SAF #: W514-010 NA []

Lot Number: 535140418

Chain of Custody # W514-010-037; 039; 040

Shipping Container ID or Air Bill Number: Hand deliv NA []

Samples received inside shipping container/cooler/box Yes [] Continue with 1 through 4. Initial appropriate response.
No [] Go to 5, add comment to #16.

- 1. Custody Seals on shipping container intact? Yes [] No [] No Custody Seal []
- 2. Custody Seals dated and signed? Yes [] No [] No Custody Seal []
- 3. Cooler temperature: 9.4 °C on Ice NA []
- 4. Vermiculite/packing materials is NA [] Wet [] Dry []

Item 5 through 16 for samples. Initial appropriate response.

- 5. Chain of Custody record present? Yes [] No []
- 6. Number of samples received (Each sample may contain multiple bottles): 3
- 7. Containers received: 3 x vial 20; 3 x 500 mlp

- 8. Sample holding times exceeded? NA [] Yes [] No []
- 9. Samples have: _____ tape _____ hazard labels [] custody seals [] appropriate sample labels
- 10. Matrix: _____ A (FLT, Wipe, Solid, Soil) [] I (Water) _____ S (Air, Niosh 7400) _____ T (Biological, Ni-63)
- 11. Samples: [] are in good condition _____ are leaking _____ are broken
_____ have air bubbles (Only for samples requiring no head space) Other _____
- 12. Sample pH appropriate for analysis requested Yes [] No [] NA [] 2x5 10-15-13
(If acidification is necessary go to pH area & document sample ID, initial pH, amount of HNO₃ added and pH after addition on table)
- 13. Were any anomalies identified in sample receipt? Yes [] No []
- 14. Description of anomalies (include sample numbers): NA []
- 15. Sample Location, Sample Collector Listed on COC? * Yes [] No []
*For documentation only. No corrective action needed.
- 16. Additional Information: W/A

[] Client/Courier denied temperature check. [] Client/Courier unpack cooler.

Sample Check-in List completed by Sample Custodian:
Signature: [] Date: 10-14-13

Client Notification needed? Yes [] No []
Date: _____
By: _____
Person contacted: _____

[] No action necessary; process as is
Project Manager: [] Date 10-15-13