Received By Courier (Signature) DUUMU TCEQ 20679 (Rev 01/2018)	Chain of Custody Relinguished By (Signature)	Richard Worsham	Name of Authorized PWS Representative (Print)	Parameters. This includes, under state and/or federal	I acknowledge that informa				DS01 LCR008		1	Facility ID (e.g. (e.g. DS01, DSTWQP, PBCU001) EWQP)		Samp	S		TREATMENT	Inhibitor or Sta	PWS Contact Phone	PWS Co	PWS Address:	PWS	I SMd		<b>8</b>
ture LADOUS			S Representative (Print) Signature /VV	Parameters. This includes, but not limited to the measurement of pH and temperature/immediately upon collection. Falsification of this form or tampering with water samples is a crime punishable under state and/or federal law. (Texas Penal Code, Title 8, Chapter 37.10)	ation on this form is true and correct and sites selegte				008 Cafeteria		) ip	ple	Temperature and pH (Y or N): Y Laboratory Approval Form on file at the TCEQ?	Sample Collector (1): X Public Water System	Sample Type (V): X Compliance	Rate:	NT Dosage	Inhibitor or Stablizer Used (1): Phosphate	me #: 409-882-2483	contact: Kyle Gillam	4647 Farm Road 1006	s ID#: TX1810007	PWS Name: Orange Plant		
0	3		W W WA	rature/mmediately/upon collectio	d for sampling follow the instructi				121119 08:34	97:20 biller	Date Time - 24 hr (MMDDYY) (HHMM)	Sample Collection	file at the TCEQ?	Accredited Lab	Non-compliance	Sample Information	Inhibitor Dosage Rate:	Silica			5			Completed by PWS (or Agent)	TEXA WATER Q
Received By Lab (Signature)	Relinquished By Courier (Signature)	ARLANXEO	Organization	. Falsification of this form or tamperin	ions in the TCEQ Monitoring and Samp				4 7.46 17.8	to 7.92 19.5	14 hr M) pH Temp (°C)	Field Measurements	Collection?	3rd Party Contractor> ID				Calcium carbonate						nt)	TEXAS COMMISSION ON ENVIRONMENTAL QUALITY WATER QUALITY PARAMETER MONITORING FORM 2
Dorwel Parte Parte	Date /		Date 12-11-12	ng with water samples is a crime punish	le Collection Guidance for Water Ouality						Replacem () Original Sample Sample Date ID # (MMDDYY)	ent?	sured in the field within 15 minutes of sample	AL			Laboratory Contact Phone		Laboratory Contact:	Laboratory Address:		TCEQ Lab ID #:	Laboratory Name:		NMENTAL QUALITY ITORING FORM 20679
10' motals dig, 02.	Laboratory Comr	(Acidified):		Samples received					201912226-206	00(912)226- 005	n ate Y) Lab Sample ID			these parameters should a	Parameters Requested:		me 409-746-3284		Pollie Holtham	Orange, Texas	1895 I-P Way	<b>#</b> : 48155	Sabine River	Comp	
ples h	4 0as	Thermometer ID #:	Actual / Corrected sample temperature:	Iced	Sample Conditions Upon Béceiot (-/)	\[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[	V V V V V V	\[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[         \]     \[	V V V V V V V	< <tr></tr>	Calcium (19 Chloride (10 Conductivity Hardness (1) Iron (1028)	Alkalinity (1927) Calcium (1919) Chloride (1017) Conductivity (1064) Hardness (1915) Iron (1028) Manganese (1032)		these parameters should also be analyzed depending on which is in	Parameters Requested: Analyses are required for the parameters								thority	Completed by Laboratory	
>1 turbiditys at		9	12.9/12.9%	Ambient							Sulfate (1053 TDS (1930) O-Phosphate Silica (1049)	5) e (1044) *		on which is in	he parameters				-				3		