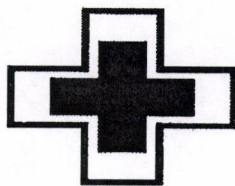


TCEQ MICROBIAL MONITORING POSITIVE RESULT REPORT FORM

RECEIVED
FEB 10 2020
TCEQ
CENTRAL FILE ROOM

Use one (1) form per microbial positive result. Make sure to print legibly and mark all pertinent check boxes.

IMMEDIATELY FAX ALL POSITIVE RESULTS TO: 1-800-252-0237

Lab Name: Upper Guadalupe River Authority

Lab ID : 48145

Faxed by: Jay Savary Amy Bryant 1-17-13

Date and Time faxed: 1/17/13 3:00 PM 2:10pm

Lab Phone : 830-896-5445

Lab Sample ID : 1301186-1A

Public Water System (PWS) ID : 1330095

PWS Name : VA Hospital Kerrville TX

Collected by : Tony Schuder

Collection Date/Time : 1/16/13 2:10 PM

Collection Point : G1330095A

Disinfectant Residual (mark the type) :

Chlorine (Free) ☒

Chloramine (Total) ☐

0.0 mg/L

Sample Type: Routine ☐ *Repeat ☐ *Raw (source id: G1330095A) ☒

If the sample type is a Repeat or a Raw, include the lab sample id for the originating positive.

*Lab Sample ID (of the Originating Positive Sample): N/A

Result: Total coliform ☒ Fecal indicator ☐ Test Method: Colilert-18 ; SM 9223B

REQUIRED Information:

Did your Lab call the PWS to notify them about the POSITIVE RESULT?

YES ☒ *NO ☐

*If NO, provide the PWS Contact Information from the Microbial Monitoring Form (i.e. PWS Contact NAME and PHONE NUMBER).

*PWS Contact Info: Phone 830-792-2634. Customer notified by E mail.

For questions regarding POSITIVE samples, contact: Mike Howell (512-239-1108) or Ask for a member of the Total Coliform Rule Program at 512/239-4691

PWS 1330095 CO 20130117 RTCR