

Water Quality Reports

2004

Crysler

Bacti Analysis
Chemical Analysis
Annual Report
Summary Report and Resolution of Council
Performance Assesment
Annual Rate of Water Taking
Meter Calibrations
Adverse Water Reports
Chemical Aquisitions

Water Quality Reports

2004

Crysler

Bacti Analysis
Chemical Analysis
Annual Report
Summary Report and Resolution of Council
Performance Assesment
Annual Rate of Water Taking
Meter Calibrations
Adverse Water Reports
Chemical Aquisitions



TOWNSHIP OF NORTH STORMONT

Resolution

Moved By: _____

Date: March 22, 2005

Seconded By: _____

Resolution #: _____

That this Council, having deliberated 2004 Summary Water Reports for Crysler, Finch and Moose Creek with Ontario Clean Water Agency (Blair Henderson), hereby accepts said reports as presented.

CERTIFIED A TRUE COPY
[Signature]
Clerk and
Commissioner of Oaths
Township of North Stormont

Recorded Vote:

FOR

AGAINST

CARRIED

[Signature]
Mayor

DEFEATED

Mayor

Declaration Of Conflict Of Interest: _____

☐ Disclosed His/Her/Their Interest

☐ Vacated His/Her/Their Seat

☐ Abstained From Discussion & Did Not Vote On The Question

Clerk



Dave Markell
03/11/2005 04:20 PM

To: "Norstor" <admin@townshipofnorthstormont.on.ca>
cc: Blair Henderson/OCWA@OCWA

Subject: **Crysler Summary Report**

Rheal, attached find the **2004 Summary Report** for Chrysler as per the following excerpts of Schedule 22 of O.Reg 170. Blair says if you want, he will come and present this to council. If not the regulations state this must be "given to the members of the municipal council". This should be documented in some way eg: a resolution of council.

Report

22-2. (1) The owner of a drinking-water system shall ensure that, not later than March 31 of each year after 2003, a report is prepared in accordance with subsections (2) and (3) for the preceding calendar year and is given to,

(a) in the case of a drinking-water system owned by a municipality, the members of the municipal council;

(2) The report must,

(a) list the requirements of the Act, the regulations, the system's approval and any order that the system failed to meet at any time during the period covered by the report and specify the duration of the failure; and

(b) for each failure referred to in clause (a), describe the measures that were taken to correct the failure.

(3) The report must also include the following information for the purpose of enabling the owner of the system to assess the capability of the system to meet existing and planned uses of the system:

1. A summary of the quantities and flow rates of the water supplied during the period covered by the report, including monthly average and maximum daily flows and daily instantaneous peak flow rates.

2. A comparison of the summary referred to in paragraph 1 to the rated capacity and flow rates approved in the system's approval.



2004-CRW-PARS.pdf 2004 Annual Record of Water Taking-Well#1. 2004 Summary Report Chrysler Water.



2004 Annual Record of Water Taking-Stand By.

dave

SUMMARY REPORTS FOR MUNICIPALITIES

Report

This report is a summary of water quality information for the **Crysler WTF**, published in accordance with Schedule 22 of Ontario's Drinking-Water Systems Regulation for the reporting period of January 1, 2004 to December 31, 2004. The Chrysler WTF is categorized as a Large Municipal Residential Drinking Water System.

This report was prepared by The Ontario Clean Water Agency on behalf of The Township of North Stormont.

Who gets a copy of the Report:

- in the case of a drinking-water system owned by a municipality, the members of the municipal council;
- in the case of a drinking-water system owned by a municipal service board established under section 195 of the *Municipal Act, 2001*, the members of the municipal service board; or
- in the case of a drinking-water system owned by a corporation, the board of directors of the corporation.

What must the Report contain?

The report must,

- (a) list the requirements of the Act, the regulations, the system's approval and any order that the system **failed to meet** at any time during the period covered by the report and specify the duration of the failure; and
- (b) for each failure referred to in clause (a), describe the measures that were taken to correct the failure.

The following table lists the requirements that the system failed to meet and the measures taken to correct the failure:

Drinking Water Legislation	List the requirement(s) the system failed to meet	Specify the duration of the failure (i.e. date(s))	Describe the measures taken to correct the failure	Status (complete or outstanding)
Safe Drinking Water Act	N/A			
Ontario Regulations (eg. O.Reg 170/03, O.Reg 435/93, O.Reg 903)	Free chlorine residual monitoring was not carried out near a location where the intended contact time has just been completed as per O.Reg 170/03 Schedule 7-2.	January 1, 2004 to November 24, 2004	An amendment to the Certificate of Approval was requested from the Ministry of the Environment to install a vessel to simulate the intended contact time. The vessel has been installed.	Complete
System Certificate of Approval #4011-5QVPDL	N/A			
Provincial Officer's Order No.	4802-5T9M2R (provide a work plan detailing steps to comply with O.Reg 170/03 Schedule 7-2. Free chlorine residual monitoring was not carried out near a location where the intended contact time has just been completed)	N/A	A work plan was submitted February 2, 2004	Complete

What else must the Report contain?

The report must also include the following information for the purpose of enabling the owner of the system to assess the capability of the system to meet existing and planned uses of the system:

1. A summary of the quantities and flow rates of the water supplied during the period covered by the report, including monthly average and maximum daily flows and daily instantaneous peak flow rates.
2. A comparison of the summary referred to in paragraph 1 to the rated capacity and flow rates approved in the system's approval.

Attached please find a copy of the 2004 ~~Performance Assessment Report~~ and 2004 ~~Annual Record of Water Taking~~ for the Chrysler WTF, which contains all required flow information.

When Does the Report Get Submitted?

If a report is prepared for a system that supplies water to a municipality under the terms of a contract, the owner of the system shall give a copy of the report to the municipality by March 31.

Personal information contained on this form is collected under the authority of the Ontario Water Resources Act, Section 20. The Purpose of the form is to record details and information about the taking of water annually. Questions should be directed to the Ministry of the Environment's Regional Office in your area.

Les renseignements personnelles qui figurent dans le présent formulaire sont recueillis en vertu de l'article 20 de la Loi sur les ressources en eau de l'Ontario. La présente sert à consigner aux dossiers les détails et les renseignements concernant la prise d'eau annuelle. Prière d'adresser toute question au bureau régional du ministère de l'Environnement le Plus proche.

Year(Année): 2004 Permit No.(N° de permis): 93-P-4006

Location: RW2 - CRYSLER WELL NO 2 (STANDBY)

Source: Groundwater

Name of Permittee: TOWNSHIP OF FINCH (CRYSLER)

Nom du titulaire du permis

Mailing Address: O.C.W.A. 5 INDUSTRIAL DRIVE CHESTERVILLE

Adresse postale

Location Of Taking: Lieu de la prise d'eau	Twp. or Municipality: Canton ou municipalité	Concession:	Lot:
15642 COUNTY ROAD 13	TOWNSHIP OF NORTH STORMONT	CON. 9	LOT 20

Date Of Taking Date de la prise d'eau	Total Hours Of Taking (Hour) Heure	Avg. Daily Rate Of Taking (L/sec) Débit de prise d'eau	Total Amount Of Taking (m³) Volume des prises	Peak Daily Flow (m³/day) Prélèvement maximum journalier	Max. Daily Rate of Taking (L/sec) Débit de pointe journalier
JAN	0.11	17.00	7		18
FEB	0.16	16.50	10		18
MAR	0.07	16.40	4		18
APR	0.30	16.80	19		15
MAY	1.00	17.80	64		18
JUN	0.13	17.00	8		17
JUL	0.18	16.90	11		17
AUG	0.44	15.20	24		17
SEP	0.83	15.00	40		17
OCT	0.77	16.60	46		17
NOV	0.97	16.50	59		18
DEC	0.49	17.00	30		18
Total:			322		
Criteria:		19.50			20

I certify that the above information is true, complete and accurate.

Signature

Date

J'atteste que les renseignements ci-dessus sont vrais, complets et exacts.

Personal information contained on this form is collected under the authority of the Ontario Water Resources Act, Section 20. The Purpose of the form is to record details and information about the taking of water annually. Questions should be directed to the Ministry of the Environment's Regional Office in your area.

Les renseignements personnels qui figurent dans le présent formulaire sont recueillis en vertu de l'article 20 de la Loi sur les ressources en eau de l'Ontario. La présente sert à consigner aux dossiers les détails et les renseignements concernant la prise d'eau annuelle. Prière d'adresser toute question au bureau régional du ministère de l'Environnement le Plus proche.

Year(Année): 2004

Permit No.(N° de permis): 93-P-4006

Location: RW1 - CRYSLER WELL NO 1

Source: Groundwater

Name of Permittee: TOWNSHIP OF FINCH (CRYSLER)

Nom du titulaire du permis

Mailing Address: O.C.W.A. 5 INDUSTRIAL DRIVE CHESTERVILLE

Adresse postale

Location Of Taking:

Lieu de la prise d'eau

15642 County rd. 13

Twp. or Municipality:

Canton ou municipalité

TOWNSHIP OF NORTH STORMONT

Concession:

9

Lot:

20

Date Of Taking Date de la prise d'eau	Total Hours Of Taking (Hour) Heure	Avg. Daily Rate Of Taking (L/sec) Débit de prise d'eau	Total Amount Of Taking (m³) Volume des prises	Peak Daily Flow (m³/day) Prélèvement maximum journalier	Max. Daily Rate of Taking (L/sec) Débit de pointe journalier
JAN	110.19	17.60	6,840.00	452.00	19.27
FEB	96.94	18.10	6,866.00	680.00	19.30
MAR	104.72	17.04	6,426.00	619.00	19.21
APR	114.47	16.80	6,927.00	570.00	18.40
MAY	123.56	16.64	7,406.90	792.00	19.00
JUN	100.05	18.30	6,596.00	569.00	18.20
JUL	117.66	16.50	6,986.00	635.00	17.95
AUG	111.45	16.60	6,649.00	655.00	17.70
SEP	110.48	15.65	6,421.00	615.00	17.60
OCT	114.31	16.39	6,751.00	789.00	17.60
NOV	142.92	18.21	8,222.00	1,528.00	18.90
DEC	105.90	16.88	6,723.00	443.00	18.50
Total:			82,813.90		
Criteria:		19.50		1,684.00	19.50

I certify that the above information is true, complete and accurate.

Signature

Date

J'atteste que les renseignements ci-dessus sont vrais, complets et exacts.

ONTARIO CLEAN WATER AGENCY

WATER PLANT PERFORMANCE ASSESSMENT REPORT

MUNICIPALITY: TOWNSHIP OF NORTH STORMONT
 PROJECT: CRYSLER WATER SUPPLY
 PROJ. NUM.: 7-0719
 WORKS NUM.: 220008649

YEAR: 2004
 WATER SOURCE: GROUNDWATER
 DESIGN CAP.: 1.685 X 1000 m3/d

DESCRIPTION: Two deep wells equipped with submersible pumps capable of delivering 19.5 L/s, a sodium hypochlorination disinfection system, fluoride feed/injection system, and an elevated storage tank.

MONTH	SYSTEM FLOWS (TREATED)				TREATED		DISTRIBUTION		BACTI (INDICATE NO. OF SAMPLES)				RAW WATER	
	TOTAL	AVG DAY	MAX DAY	AVG	MIN FREE	MAX FREE	MIN FREE	MAX FREE	SAFE		ADVERSE		E.COLI.	E.COLI.
	FLOW	FLOW	FLOW	Fluoride	CL2 Resid.	CL2 Resid.	CL2 Resid.	CL2 Resid.	TREAT	DIST	TREAT	DIST	ABSENT	PRESENT
	m3	m3	m3	Resid.(mg/L)	Treated (mg/l)	Treated (mg/l)	Distrib. (mg/l)	Distrib. (mg/l)						
JAN	6840	221	452	0.50	0.60	1.93	0.90	1.20	12	20	0	0	8	0
FEB	6866	236	680	0.60	0.30	2.00	1.09	1.40	12	20	0	0	8	0
MAR	6426	207	619	0.58	0.30	2.00	0.65	1.23	15	25	0	0	8	0
APR	6927	231	570	0.55	0.21	1.93	1.01	1.32	12	20	0	0	6	0
MAY	7407	239	792		0.42	1.93	1.00	1.30	15	28	1	0	11	0
JUN	6596	220	569		0.21	1.93	1.00	1.31	12	20	0	0	8	0
JUL	6986	225	635		0.43	1.93	0.98	1.35	12	20	0	0	8	0
AUG	6649	215	655		0.22	1.93	0.85	1.31	15	26	1	0	10	0
SEP	6421	214	615		0.21	1.93	0.82	1.32	14	23	1	0	9	0
OCT	6751	218	789		0.20	1.93	0.87	1.10	12	20	0	0	8	0
NOV	8222	274	1528		0.21	3.19	0.77	2.10	15	28	0	0	10	0
DEC	6723	232	443		0.51	3.75	1.21	1.51	13	21	0	1	8	0
TOTAL	82814								159	271	3	1	102	0
AVG		227.67		0.56										
MIN					0.200		0.650							
MAX			1528			3.75		2.10						
CRITERIA			1685	0.5-0.8	0.20		0.20							

COMMENTS:

Fluoride off Line as instructed
 Peak flow day May and Oct. due to hydrant flushing
 Peak flow day Nov. due to tower refill after inspection.
 Avg. day flow Nov. because of tower inspection and cleaning.
 Installed cl2 contact simulation tank and cl2 analyzer Nov. 18.
 Max. day flows not actual. Well pump runs every other day



Dave Markell
02/24/2005 01:51 PM

To: Reg170_FormSubmission@ene.gov.on.ca
cc: "Norstor" <admin@townshipofnorthstormont.on.ca>

Subject: Annual Report-Crysler,220008649

Annual Report-Crysler,220008649



Annual report -2004-Crysler.DC

dave markell
448-3098

Drinking-Water Systems Regulation O. Reg. 170/03

Part III Form 2

Section 11. ANNUAL REPORT.

Drinking-Water System Number:
Drinking-Water System Name:
Drinking-Water System Owner:
Drinking-Water System Category:
Period being reported:

220008649
Crysler
Township of North Stormont
Large Municipal Residential
January 1 to December 31, 2004

Complete if your Category is Large Municipal Residential or Small Municipal Residential

Does your Drinking-Water System serve more than 10,000 people? Yes [] No [x]

Is your annual report available to the public at no charge on a web site on the Internet? Yes [x] No []

Location where Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.

Available at the Township of North Stormont Office, 2 Victoria Street, Berwick, Ontario and on their website www.townshipofnorthstormont.on.ca

Complete for all other Categories.

Number of Designated Facilities served:

Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [] No [] N/A []

Number of Interested Authorities you report to:

Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [] No [] N/A []

List Drinking-Water Systems, which receive all of their drinking water from your system:

None

Did you provide a copy of your annual report to all Drinking-Water System owners that are connected to you and to whom you provide all of its drinking water? Yes [] No [] N/A [x]

Indicate how you notified system users that your annual report is available, and is free of charge.

- [x] Public access/notice via the web
- [x] Public access/notice via Government Office
- [] Public access/notice via a newspaper
- [] Public access/notice via Public Request
- [] Public access/notice via a Public Library
- [] Public access/notice via other method _____

Drinking-Water Systems Regulation O. Reg. 170/03

Describe your Drinking-Water System

Groundwater is pumped from the source well through the well house where Sodium Hypochlorite and Fluoride are added. As water is used throughout the distribution system and the level of the water tower falls to a preset limit, a well pump starts. The water is directed through a feeder main to refill the tower.

List all water treatment chemicals used over this reporting period

Sodium Hypochlorite was used at an average dosage rate of 1.6 mg/L.
Hydrofluorosilicic Acid was used at an average dosage rate of 0.53 mg/L.

Were any significant expenses incurred to?

- ☒ Install required equipment
- ☒ Repair required equipment
- ☒ Replace required equipment

Describe

Purchased and installed chlorine analyzer at well pumphouse. Performed an interior inspection of Wells #1 and #2. Replaced torque – arrestor, o-ring on pitless adaptor & repaired electrical wires at Well #2. Purchased and installed chlorine contact simulation tank. Cleaned and inspected elevated water tower. Completed corrosion protection study of the water distribution system.

Provide details on the notices submitted in accordance with subsection 18(1) of the Safe Drinking-Water Act or section 16-4 of Schedule 16 of O.Reg.170/03 and reported to Spills Action Centre?

Incident Date	Parameter	Result	Unit of Measure	Corrective Action	Corrective Action Date
May 11/04	Total Coliform	1	Cts/100ml	Resample	May 12/04
Aug. 10/04	HPC	>500	Cts/1ml	Resample	Aug. 22/04
Sept. 22/04	HPC	>500	Cts/1ml	Resample	Sept. 22/04
Dec. 22/04	Total Coliform	1	Cts/100ml	Resample	Dec.22/04

Microbiological testing done under section 8 (2) during this reporting period

	Number of Samples	Range of E.Coli or Fecal Results (#-#)	Range of Total Coliform Results (#-#)	Number of HPC Samples	Range of HPC Results (#-#)	Number of Background Samples	Range of Background Samples (#-#)
Raw	301	0-0	0-20	1	>500	97	0->200
Treated	162	0-0	0-1	42	0->500	14	0-0
Distribution	272	0-0	0-8	41	0-450	22	0-1

Drinking-Water Systems Regulation O. Reg. 170/03

Operational testing done under Schedule 7, 8 or 9 during the period covered by this Annual Report.

	Number of Grab Samples	Range of Results (#-#)
Turbidity Raw	24	0.09-0.45 NTU's
Turbidity Treated	8760	0.04-5.0 NTU's
Chlorine	8760	0.2-3.75
Fluoride (If the DWS provides fluoridation)	8760	0.5-0.7

NOTE: For continuous monitors use 8760 as the number of samples.

NOTE: Record the unit of measure if it is not milligrams per litre.

Summary of additional testing and sampling carried out in accordance with the requirement of an approval or order.

Date of order or C of A	Parameter	Date Sampled	Result	Unit of Measure
N/A				

Summary of Inorganic parameters tested during this reporting period or most recent

Parameter	Minimum Sample Date	Maximum Sample Date	Minimum Value	Maximum Value	Unit of Measure	Exceedance
Antimony	12/09/03	12/09/03	<0.6	<0.6	ug/L	No
Arsenic	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Barium	01/20/03	01/20/03	0.38	0.38	mg / L	No
Boron	01/20/03	01/20/03	0.17	0.17	mg / L	No
Cadmium	01/20/03	01/20/03	<0.0001	<0.0001	mg / L	No
Chromium	01/20/03	01/20/03	0.002	0.002	mg / L	No
Copper	01/20/03	01/20/03	0.033	0.033	mg / L	No
Iron	01/20/03	01/20/03	0.01	0.01	mg / L	No
Lead	01/15/04	01/15/04	<0.001	<0.001	mg / L	No
Mercury	01/20/03	01/20/03	<0.0001	<0.0001	mg / L	No
Selenium	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Uranium	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Fluoride	04/24/03	01/20/03	0.45	0.5	mg / L	No
Nitrite	01/15/04	11/08/04	<0.1	<0.1	mg / L	No
Nitrate	11/08/04	01/15/04	<0.1	0.33	mg / L	No

Summary of Organic parameters sampled during this reporting period or most recent

Parameter	Minimum Sample Date	Maximum Sample Date	Minimum Value	Maximum Value	Unit of Measure	Exceedance
Alachlor	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Aldicarb	12/09/03	04/24/03	<0.3	<9	ug / L	No
Aldrin + Dieldrin	01/20/03	01/20/03	<0.012	<0.012	ug / L	No
Atrazine + N-dealkylated metabolites	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Azinphos-methyl	01/20/03	01/20/03	<2	<2	ug / L	No
Bendiocarb	01/20/03	01/20/03	<2	<2	ug / L	No

Drinking-Water Systems Regulation O. Reg. 170/03

Benzene	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Benzo(a)pyrene	12/09/03	12/09/03	<0.6	<0.6	ug / L	No
Bromoxynil	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Carbaryl	01/20/03	01/20/03	<5	<5	ug / L	No
Carbofuran	01/20/03	01/20/03	<5	<5	ug / L	No
Carbon Tetrachloride	01/20/03	01/20/03	<0.9	<0.9	ug / L	No
Chlordane (Total)	01/20/03	04/24/03	<0.012	<0.015	ug / L	No
Chlorpyrifos	01/20/03	01/20/03	<1	<1	ug / L	No
Cyanazine	01/20/03	01/20/03	<1	<1	ug / L	No
Diazinon	01/20/03	01/20/03	<1	<1	ug / L	No
Dicamba	01/20/03	01/20/03	<1	<1	ug / L	No
1,2-Dichlorobenzene	01/20/03	01/20/03	<0.4	<0.4	ug / L	No
1,4-Dichlorobenzene	01/20/03	01/20/03	<0.4	<0.4	ug / L	No
Dichlorodiphenyltrichloroethane (DDT) + metabolites	01/20/03	01/20/03	<0.024	<0.024	ug / L	No
1,2-Dichloroethane	01/20/03	01/20/03	<0.7	<0.7	ug / L	No
1,1-Dichloroethylene (vinylidene chloride)	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Dichloromethane	01/20/03	01/20/03	<4	<4	ug / L	No
2,4-Dichlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
2,4-Dichlorophenoxy acetic acid (2,4-D)	01/20/03	01/20/03	<1	<1	ug / L	No
Diclofop-methyl	01/20/03	01/20/03	<0.9	<0.9	ug / L	No
Dimethoate	01/20/03	01/20/03	<2.5	<2.5	ug / L	No
Dinoseb	01/20/03	01/20/03	<1	<1	ug / L	No
Diquat	01/20/03	01/20/03	<7	<7	ug / L	No
Diuron	01/20/03	01/20/03	<10	<10	ug / L	No
Glyphosate	01/20/03	01/20/03	<10	<10	ug / L	No
Heptachlor + Heptachlor Epoxide	01/20/03	01/20/03	<0.012	<0.012	ug / L	No
Linadane (Total)	01/20/03	01/20/03	<0.006	<0.006	ug / L	No
Malathion	01/20/03	01/20/03	<5	<5	ug / L	No
Methoxychlor	01/20/03	01/20/03	<0.024	<0.024	ug / L	No
Metolachlor	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Metribuzin	01/20/03	01/20/03	<5	<5	ug / L	No
Monochlorobenzene	01/20/03	01/20/03	<0.2	<0.2	ug / L	No
Paraquat	01/20/03	01/20/03	<1	<1	ug / L	No
Parathion	01/20/03	01/20/03	<1	<1	ug / L	No
Pentachlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Phorate	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Picloram	01/20/03	01/20/03	<5	<5	ug / L	No
Polychlorinated Biphenyls(PCB)	01/20/03	04/24/03	<0.05	<0.1	ug / L	No
Promethyne	01/20/03	01/20/03	<0.25	<0.25	ug / L	No
Simazine	01/20/03	04/24/03	<1	<0.25	ug / L	No
THM (NOTE: show latest quarterly average)	11/08/04	01/15/04	5.0	7.8	ug / L	No
Temephos	01/20/03	01/20/03	<10	<10	ug / L	No
Terbufos	12/09/03	01/20/03	<0.12	<0.7	ug / L	No
Tetrachloroethylene	01/20/03	01/20/03	<0.3	<0.3	ug / L	No
2,3,4,6-Tetrachlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Triallate	01/20/03	01/20/03	<1	<1	ug / L	No
Trichloroethylene	01/20/03	01/20/03	<0.3	<0.3	ug / L	No

Drinking-Water Systems Regulation O. Reg. 170/03

2,4,6-Trichlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)	01/20/03	01/20/03	<1	<1	ug / L	No
Trifluralin	01/20/03	01/20/03	<1	<1	ug / L	No
Vinyl Chloride	01/20/03	01/20/03	<0.5	<0.5	ug / L	No

List any Inorganic or Organic parameter(s) that exceeded half the standard prescribed in Schedule 2 of Ontario Drinking Water Quality Standards.

Parameter	Result Value	Unit of Measure	Date of Sample
N/A			

(Only if category is large municipal residential, small municipal residential, large municipal non residential, small municipal non residential, large non municipal non residential)

C.O.C.: 00558

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-8565

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: JOB/PROJECT NO.: 

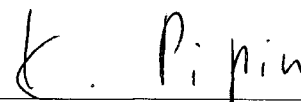
DATE REPORTED: 21-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:		Fluoride				
Units:		mg/L				
M.D.L.:		0.1				
Reference Method:		EPA 300.0				
Date Analyzed:		20-Apr-2004				
Client I.D.	Sample I.D.	Date Collected				
CRW-100 Crysler Well #1 Raw	B04-8565-1	19-Apr-04	0.2 ✓			



Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from
Caduceon Environmental Laboratories.

C.O.C.: 00558

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-8565

Report To:

Ontario Clean Water Agency - Crysler

5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 526-0123

Fax 526-1244

DATE SUBMITTED: 19-Apr-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 21-Apr-04

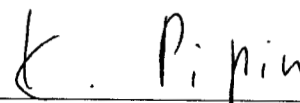
P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:		Fluoride				
Units:		mg/L				
M.D.L.:		0.1				
Reference Method:		EPA 300.0				
Date Analyzed:		20-Apr-2004				
Client I.D.	Sample I.D.	Date Collected				
CRW-100 Crysler Well #1 Raw	B04-8565-1	19-Apr-04	0.2 ✓			

Dave
Apr. 30/04
Raw water.
Not Regulated.

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

24 hr Comp.				Treated	Treated	Distribution	Distribution	Well Head	Well Head
BOD	SS	TP	TKN	NO2	NO3	THM	Lead	Inspection	Monitoring

January	101	142	3.43	23	<0.1	0.33	7.8	0.002		
February	61	86	2.92	29.1						
March	88	140	3.7	34.1						
April	87	100	3.18	20.3						
May	104	140	3.44	20.6						
June	72	110	2.22	2.85						
July	118	180	5.33	44						
August	100	140	4.73	46						
September	71	200	2.6	25						
October	115	225	4.73	30						
November	170	366	3.06	39						
December	96	114	3.02	25.2						

Schedule 23	Treated Water
Schedule 24	Treated Water
Sodium	Treated Water
Fluoride	Treated Water

last collected	Apr.2003	due2006
last collected	Apr.2003	due2006
last collected	Feb.2002	due2007
last collected	Jan.2003	due2008

(PENDING)Wellhead Monitoring as per Genivar's recommendations

REPORT OF ANALYSIS

Client: CRYSLER WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2400811
Date: 2004-01-21
Date Submitted: 2004-01-16
MOE DWIS UPLOAD: 2400345
Project: Chrysler Treated & System

P.O. Number:
Matrix:

LAB ID:		296757	296759	Supply Water	
Sample Date:		2004-01-15	2004-01-15	GUIDELINE	
Sample ID:		CRW-001	CRW-003	MOE REG 170/03	
PARAMETER	UNITS	MDL	TREATED	DISTRIBUTION	TYPE
N-NO2 (Nitrite)	mg/L	0.10	0.10	0.002	MAC
N-NO3 (Nitrate)	mg/L	0.10	0.33	0.002	MAC
Lead	mg/L	0.001			MAC

Do not correct for Pexed

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

8-146 Colonnade Road, Ottawa, ON, K2E 7Y1

608 Norris Court, Kingston, ON, K7P 2R9

1 of 1

APPROVAL:

[Signature]
Ewan McRobbie
Inorganic Lab Supervisor

Client: CRYSLER WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2400811
Date: 2004-01-21
Date Submitted: 2004-01-16
MOE DWIS UPLOAD: 2400345
Project: Chrysler Treated & System

P.O. Number:
Matrix: Supply Water

				Matrix:				Supply Water					
LAB ID: 296758								GUIDELINE					
Sample Date: 2004-01-15													
Sample ID: CRW-002								MOE REG 170/03					
PARAMETER				UNITS	MDL	DISTRIBUTION					TYPE	LIMIT	UNITS
VOLATILE ORGANIC COMPOUNDS - VOCs													
Bromodichloromethane				ug/L	0.3	2.1							
Bromoform				ug/L	0.4	<0.4							
Chloroform				ug/L	0.5	4.9							
Dibromochloromethane				ug/L	0.3	0.8							
Trihalomethanes (total)				ug/L	2.0	7.6	✓						
VOC SURROGATES													
Toluene-d8				%		101					MAC	100	ug/L

for Dave Jan 24/04

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration
Comment:

APPROVAL: 
Mina Nasir
Organic Lab Supervisor

Client: CRYSLER WELL SUPPLY
5 Industrial Drive
Chesleville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2408706
Date: 2004-05-26
Date Submitted: 2004-05-17
MOE DWTS UPLOAD: 2402978
Project: Chrysler Wells

P.O. Number:
Matrix:

Supply Water

LAB ID:		318188		GUIDELINE		
Sample Date:		2004-05-13		MOE REG 170003		
Sample ID:		CRW-02				
		Pumping Station #1				
PARAMETER	UNITS	MDL	DISTRIBUTION	TYPE	LIMIT	UNITS
VOLATILE ORGANIC COMPOUNDS - VOCs						
Bromodichloromethane	ug/L	0.3	1.9	MAC	100	ug/L
Bromoform	ug/L	0.4	<0.4			
Chloroform	ug/L	0.5	4.5			
Dibromochloromethane	ug/L	0.3	0.7			
Trihalomethanes (total)	ug/L	2.0	7.1			
VOC SURROGATES						
Toluene-08	%		100			

2 pages

David May 2004

2 pages

Due May 26/04

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

APPROVAL:

Mina Nasir

Organic Lab Supervisor

Results relate only to the parameters tested on the samples submitted for analysis.

Client: CRYSLER WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2413071
Date: 2004-07-15
Date Submitted: 2004-07-12
MOE DWIS UPLOAD: 2404360
Project:

P.O. Number:

Supply Water

Matrix:

LAB ID: 330299				GUIDELINE		
Sample Date: 2004-07-08				MOE REG 170/03		
Sample ID: CRWQ-003						
PARAMETER	UNITS	MDL	DISTRIBUTION	TYPE	LIMIT	UNITS
N-NO2 (Nitrite)	mg/L	0.10	<0.10 ✓	MAC	1.0	mg/L
N-NO3 (Nitrate)	mg/L	0.10	0.16 ✓	MAC	10.0	mg/L

Flow 9/04
John

AW 9/08
JBM

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration
Comment:

APPROVAL:

Ewan McRobbie
Inorganic Lab Supervisor

Client: CRYSLER WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2413071
Date: 2004-07-15
Date Submitted: 2004-07-12
MOE DWIS UPLOAD: 2404360
Project:

P.O. Number:

Matrix: Supply Water

PARAMETER	LAB ID:		UNITS	MDL	DISTRIBUTION	TYPE	LIMIT	UNITS
	Sample Date:	Sample ID:						
VOLATILE ORGANIC COMPOUNDS - VOCs								
Bromodichloromethane			ug/L	0.3	1.5			
Bromoform			ug/L	0.4	<0.4			
Chloroform			ug/L	0.5	3.5			
Dibromochloromethane			ug/L	0.3	0.8			
Trihalomethanes (total)			ug/L	2.0	5.8	MAC	100	ug/L
VOC SURROGATES								
Toluene-d8			%		99			
MOE REG 170/03								

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration
Comment:

APPROVAL:

Mina Nasirai
Organic Lab Supervisor

Attention: Mr. Blair Henderson

Matrix:

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

Ewan McRobbie
Inorganic Lab Supervisor

Client: CRYSLER WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2421609 ✓
Date: 2004-11-11
Date Submitted: 2004-11-08
MOE DWIS UPLOAD: 2406998
Project: Crysler Wells

P.O. Number:

Matrix: Supply Water

			LAB ID:	353667					GUIDELINE			
			Sample Date:	2004-11-08					MOE REG 170/03			
			Sample ID:	CrW-02 Pumping Station #1 Dist								
PARAMETER			UNITS	MDL	DISTRIBUTION					TYPE	LIMIT	UNITS
VOLATILE ORGANIC COMPOUNDS - VOCs												
Bromodichloromethane			ug/L	0.3	1.5					MAC	100	ug/L
Bromoform			ug/L	0.4	<0.4							
Chloroform			ug/L	0.5	2.8							
Dibromochloromethane			ug/L	0.3	0.7							
Trihalomethanes (total)			ug/L	2.0	5.0 ✓							
VOC SURROGATES												
Toluene-d8			%		98							
Dave Nov 18/04												

Dave
Nov 18/04

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration
Comment:

APPROVAL: _____

Mina Nasirai
Organic Lab Supervisor

C.O.C.: C-00218

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-133

Report To:Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 06-Jan-04

DATE REPORTED: 08-Jan-04

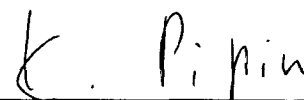
SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.:

P.O. NUMBER: Crysler WTP

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			06-Jan-2004	06-Jan-2004	06-Jan-2004	06-Jan-2004	06-Jan-2004
Client I.D.	Sample I.D.	Date Collected					
Well #1 Raw CRW 01	B04-133-1	05-Jan-04	< 1 ✓	30 ✓	< 1 ✓	--	--
Well #1 Treated - CRW 02	B04-133-2	05-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.28 ✓
Post Office CRW 03	B04-133-3	05-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.07 ✓
SPS CRW 04	B04-133-4	05-Jan-04	< 1 ✓	< 1	< 1 ✓	--	--
Crysler Well #2 Standby Raw CRW 05	B04-133-5	05-Jan-04	< 1 ✓	--	< 1 ✓	--	--

Dave
Jan 8/04
FAXEDKrystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00219

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-743

Rev. 1

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 13-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 19-Jan-04

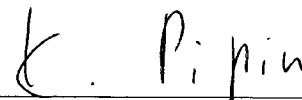
P.O. NUMBER: Crysler WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	2.20
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004
Client I.D.	Sample I.D.	Date Collected					
Well #1 Raw	B04-743-1	12-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #1 Treated - 15642 County Rd 13	B04-743-2	12-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.41 ✓
Dist. Tower	B04-743-3	12-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.99 ✓
Dist. Ecole	B04-743-4	12-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	1.04 ✓
Crysler Well #2 Standby Raw	B04-743-5	12-Jan-04	< 1 ✓	--	< 1 ✓	--	--

*Dave
Jan. 21
Revised
Faxed
Jan. 21*

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00219

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-743

Report To:

Ontario Clean Water Agency - Crysler

5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 526-0123

Fax 526-1244

DATE SUBMITTED: 13-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 16-Jan-04

P.O. NUMBER: Crysler WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	2.20
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004
Client I.D.	Sample I.D.	Date Collected					
Well #1 Raw	B04-743-1	12-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #1 Treated - 15642 County Rd 13	B04-743-2	12-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.41
Dist. Tower	B04-743-3	12-Jan-04	< 1 ✓	Q	< 1 ✓	< 2 ✓	0.90
Dist. Ecole	B04-743-4	12-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well #2 Standby Raw	B04-743-5	12-Jan-04	< 1	-- ✓	< 1 ✓	--	1.04

Jan 16/04
BH

Fated.

Phoned
lab.
Jan 19/04

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00220

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-1183

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 19-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 21-Jan-04

P.O. NUMBER: Crysler WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	19-Jan-2004	19-Jan-2004	19-Jan-2004	19-Jan-2004	19-Jan-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Well #1 Raw	B04-1183-1	19-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #1 Treated - 15642 County Rd 13	B04-1183-2	19-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.02
Dist. Crysler Satellite	B04-1183-3	19-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.03
Dist. Home Hardware	B04-1183-4	19-Jan-04	< 1 ✓	--	< 1 ✓	--	--
Crysler Well #2 Standby Raw	B04-1183-5	19-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

*Dave
Jan 24/04
Faxed.*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00221

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-1700

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 26-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 28-Jan-04

P.O. NUMBER: **Crysler WTP**

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-Jan-2004	26-Jan-2004	26-Jan-2004	26-Jan-2004	26-Jan-2004

Client I.D.	Sample I.D.	Date Collected					
Well #1 Raw	B04-1700-1	26-Jan-04	2 ✓	7 ✓	<1 ✓	--	--
Well #1 Treated - 15642 County Rd 13	B04-1700-2	26-Jan-04	<1 ✓	--	<1 ✓	2 ✓	1.15
Dist. Sun Gas	B04-1700-3	26-Jan-04	<1 ✓	--	<1 ✓	<2 ✓	1.07
Dist. SPS	B04-1700-4	26-Jan-04	<1 ✓	<1 ✓	<1 ✓	--	--
Crysler Well #2 Standby Raw	B04-1700-5	26-Jan-04	<1 ✓	--	<1 ✓	--	1.08

1. fungus growth

*Dave
Jan-28/04
faxed*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00222

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-2232

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 02-Feb-04

JOB/PROJECT NO.:

DATE REPORTED: 04-Feb-04

P.O. NUMBER: Crysler WTP

SAMPLE MATRIX: Drinking Water

220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	02-Feb-2004	02-Feb-2004	02-Feb-2004	02-Feb-2004	02-Feb-2004

Client I.D.	Sample I.D.	Date Collected					
Well #1 Raw	B04-2232-1	02-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #1 Treated	B04-2232-2	02-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.98
Crysler Satellite	B04-2232-3	02-Feb-04	< 1 ✓		< 1 ✓	< 2 ✓	1.09
SPS	B04-2232-4	02-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	1.40
Crysler Well #2 Standby Raw	B04-2232-5	02-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

*Dave Feb 6/04
Hand delivered to municipality*

M.D.L. = Method Detection Limit

Krystyna Pipin
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00223

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-2782

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 09-Feb-04

DATE REPORTED: 11-Feb-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.:

P.O. NUMBER: Crysler WTP

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	09-Feb-2004	09-Feb-2004	09-Feb-2004	09-Feb-2004	09-Feb-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Well #1 Raw	B04-2782-1	09-Feb-04	< 1 ✓	8 ✓	< 1 ✓	--	--
Well #1 Treated - 15642 County Rd 13	B04-2782-2	09-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.32
Dist. Ecole Notre Dame	B04-2782-3	09-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.27
Dist. Home Hardware	B04-2782-4	09-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	1.23
Crysler Well #2 Standby Raw	B04-2782-5	09-Feb-04	< 1 ✓	--	< 1 ✓	--	--

*Dave
Feb 13/04*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00224

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-3317

Rev. 1

Report To:

Ontario Clean Water Agency - Chrysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 16-Feb-04

DATE REPORTED: 19-Feb-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.:

P.O. NUMBER: Chrysler WTP

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	17-Feb-2004	17-Feb-2004	17-Feb-2004	17-Feb-2004	17-Feb-2004

Client I.D.	Sample I.D.	Date Collected					
Well #1 Raw	B04-3317-1	16-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #1 Treated - 15642 County Rd 13	B04-3317-2	16-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.40 ✓
Dist. Post Office	B04-3317-3	16-Feb-04	< 1 ✓	--	< 1 ✓	450 ✓	1.29
Dist. SPS	B04-3317-4	16-Feb-04	< 1 ✓	--	< 1 ✓	--	1.21
Chrysler Well #2 Standby Raw	B04-3317-5	16-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

faxed

*Dave
Feb 19/04*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00225

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-3886

Report To:

Ontario Clean Water Agency - Chrysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 23-Feb-04

JOB/PROJECT NO.: Chrysler WTP

DATE REPORTED: 25-Feb-04

P.O. NUMBER: Chrysler WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	23-Feb-2004	23-Feb-2004	23-Feb-2004	23-Feb-2004	23-Feb-2004

Client I.D.	Sample I.D.	Date Collected					
Well #1 Raw ✓	B04-3886-1	23-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #1 Treated ✓	B04-3886-2	23-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.72
Dist. Tower ✓	B04-3886-3	23-Feb-04	< 1 ✓	(circled < 1)	< 1 ✓	< 2 ✓	1.20
Dist. SPS ✓	B04-3886-4	23-Feb-04	< 1 ✓	(circled < 1)	< 1 ✓	--	1.17
Chrysler Well #2 Standby Raw ✓	B04-3886-5	23-Feb-04	< 1 ✓	(circled < 1)	< 1 ✓	--	--

*Dave
Feb 26/04*

Faxed.

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00226

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-4391

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 01-Mar-04

DATE REPORTED: 03-Mar-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			01-Mar-2004	01-Mar-2004	01-Mar-2004	01-Mar-2004	01-Mar-2004
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-4391-1	01-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-4391-2	01-Mar-04	< 1 ✓	--	< 1 ✓	2 ✓	1.31
Tower S. Tap	B04-4391-3	01-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.20
SPS S. Tap	B04-4391-4	01-Mar-04	< 1 ✓	--	< 1 ✓	--	1.21
Crysler Well No. 2 (Standby) - Raw	B04-4391-5	01-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

*Dave
Mar 3/04
Faxed*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00227

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-4975

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 08-Mar-04

DATE REPORTED: 10-Mar-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	08-Mar-2004	08-Mar-2004	08-Mar-2004	08-Mar-2004	08-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-4975-1	08-Mar-04	< 1 ✓	2 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-4975-2	08-Mar-04	< 1 ✓	--	< 1 ✓	2 ✓	1.34
Post Office	B04-4975-3	08-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.11
Satellite	B04-4975-4	08-Mar-04	< 1 ✓	--	< 1 ✓	--	1.09
Crysler Well No. 2 (Standby) - Raw	B04-4975-5	08-Mar-04	< 1 ✓	3 ✓	< 1 ✓	--	--

Dave Markell

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C00564

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-5599

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 15-Mar-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 17-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	15-Mar-2004	15-Mar-2004	15-Mar-2004	15-Mar-2004	15-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-5599-1	15-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-5599-2	15-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.42
Sun Gas W.R Tap	B04-5599-3	15-Mar-04	< 1 ✓	--	< 1 ✓	4 ✓	1.09
SPS S. Tap	B04-5599-4	15-Mar-04	< 1 ✓	--	< 1 ✓	--	1.14
Crysler Well No. 2 (Standby) - Raw	B04-5599-5	15-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

*Dave
Mar 15*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: 00563

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-6185

Report To:

Ontario Clean Water Agency - Crysler

5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 526-0123

Fax 526-1244

DATE SUBMITTED: 22-Mar-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 24-Mar-04

P.O. NUMBER: -

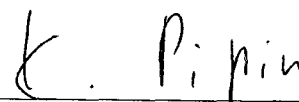
SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	22-Mar-2004	22-Mar-2004	22-Mar-2004	22-Mar-2004	22-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw CRW-01	B04-6185-1	22-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated CRW-02	B04-6185-2	22-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.40
Home Hardware W.R. Tap	B04-6185-3	22-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.08
Post Office W.R. Tap CRW-04	B04-6185-4	22-Mar-04	< 1 ✓	--	< 1 ✓	--	1.09

Mar 26/04
Dave - E-mailed.
SB. well pump
out of service



Krystyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C- 00562

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-6734

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 29-Mar-04

DATE REPORTED: 31-Mar-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	29-Mar-2004	29-Mar-2004	29-Mar-2004	29-Mar-2004	29-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-6734-1	29-Mar-04	< 1 ✓	4 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated S Tap	B04-6734-2	29-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.39
SPS S. Tap	B04-6734-3	29-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.17
Tower S Tap	B04-6734-4	29-Mar-04	< 1 ✓	--	< 1 ✓	--	1.00

*Dave
Mar 31/04*

emailed

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00561

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-7365

Report To:Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 05-Apr-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 07-Apr-04

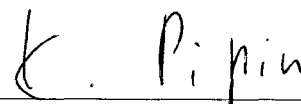
P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	05-Apr-2004	05-Apr-2004	05-Apr-2004	05-Apr-2004	05-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-7365-1	05-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-7365-2	05-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.32
Ecole WR Tap	B04-7365-3	05-Apr-04	< 1 ✓	--	< 1 ✓	2 ✓	1.03
Sun Gas WR Tap	B04-7365-4	05-Apr-04	< 1 ✓	--	< 1 ✓	--	1.01

April 8/04
JHKrystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: 00560

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-8071

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 13-Apr-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 15-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	14-Apr-2004	14-Apr-2004	14-Apr-2004	14-Apr-2004	14-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-8071-1	13-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-8071-2	13-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.51
W.R.TAP HOME HARDWARE	B04-8071-3	13-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.17
SPS S. Tap	B04-8071-4	13-Apr-04	< 1 ✓	--	< 1 ✓	--	1.22

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00559

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-8571

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 19-Apr-04

DATE REPORTED: 21-Apr-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			19-Apr-2004	19-Apr-2004	19-Apr-2004	19-Apr-2004	19-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-8571-1	19-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-8571-2	19-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.50
Crysler Satellite WR Tap	B04-8571-3	19-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.19
SPS S. Tap	B04-8571-4	19-Apr-04	< 1 ✓	--	< 1 ✓	--	1.18

Dave
Apr 21/04
e-mailed

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: 00557

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-8911

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 21-Apr-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 22-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	Background	E coli		
Units:			cts/100mL	cts/100mL	cts/100mL		
M.D.L.:			1	1	1		
Reference Method:			MOE E3371	MOE E3371	MOE E3371		
Date Analyzed:			21-Apr-2004	21-Apr-2004	21-Apr-2004		
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 2 (Standby) - Raw	B04-8911-1	21-Apr-04	<1 ✓	<1 ✓	<1 ✓		

Stand-by well pulled (would not run) wire broken in well - Richer cameraed. - Jean done @ 50 mg/L. - Flushed & sampled.

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: ---

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-9228

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 26-Apr-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 28-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-Apr-2004	26-Apr-2004	26-Apr-2004	26-Apr-2004	26-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-9228-1	26-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-9228-2	26-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.39
Post Office W.R. Tap	B04-9228-3	26-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.20
Tower S. Tap	B04-9228-4	26-Apr-04	< 1 ✓	--	< 1 ✓	--	1.32
Crysler Well No. 2 (Standby) - Raw	B04-9228-5	26-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

April 29/04
SA

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00555

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-9869

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 03-May-04

DATE REPORTED: 05-May-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	03-May-2004	03-May-2004	03-May-2004	03-May-2004	03-May-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Crysler Well No. 1 - Raw	B04-9869-1	03-May-04	< 1 ✓	1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-9869-2	03-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.50
Ecole Washroom Tap	B04-9869-3	03-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.17
SPS S. Tap	B04-9869-4	03-May-04	< 1 ✓	--	< 1 ✓	--	1.20
Crysler Well No. 2 (Standby) - Raw	B04-9869-5	03-May-04	< 1 ✓	14	< 1 ✓	--	--

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: ---

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-10595

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 10-May-04

DATE REPORTED: 12-May-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	10-May-2004	10-May-2004	10-May-2004	10-May-2004	10-May-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-10595-1	10-May-04	< 1 ✓	< 1	< 1	--	--
Crysler Well No. 1 - Treated	B04-10595-2	10-May-04	1	--	< 1	< 2	1.58
Home Hardware WR. Tap	B04-10595-3	10-May-04	< 1	--	< 1	< 2	1.16
Post office WR. Tap	B04-10595-4	10-May-04	< 1	--	< 1	--	1.24
Crysler Well No. 2 (Standby) - Raw	B04-10595-5	10-May-04	< 1	< 1	< 1	--	--

*Adverse
May 11 Reported.
May 12 Resampled
3 driven in*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00551

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-11320

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 17-May-04

DATE REPORTED: 19-May-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			17-May-2004	17-May-2004	17-May-2004	17-May-2004	17-May-2004
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-11320-1	17-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-11320-2	17-May-04	< 1 ✓	--	< 1 ✓	4 ✓	1.43
Crysler Satalite Kit Tap	B04-11320-3	17-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.13
SPS Tap	B04-11320-4	17-May-04	< 1 ✓	--	< 1 ✓	--	1.17
Crysler Well No. 2 (Standby) - Raw	B04-11320-5	17-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

*Dave
May 20
e-mailed*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: ---

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-12093

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 25-May-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 27-May-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-May-2004	26-May-2004	26-May-2004	26-May-2004	26-May-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-12093-1	25-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-12093-2	25-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.44
Home Hardware WR Tap	B04-12093-3	25-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.07
Tower S Tap	B04-12093-4	25-May-04	< 1 ✓	--	< 1 ✓	--	1.18
Crysler Well No. 2 (Standby) - Raw	B04-12093-5	25-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00549

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-12690

Report To:Ontario Clean Water Agency - Chrysler
5 Industrial Dr
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 31-May-04

JOB/PROJECT NO.: Chrysler WTP

DATE REPORTED: 02-Jun-04

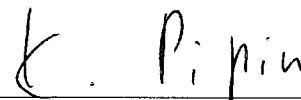
P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	31-May-2004	31-May-2004	31-May-2004	31-May-2004	31-May-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-12690-1	31-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-12690-2	31-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.32
Sungas WR Tap	B04-12690-3	31-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.16
Ecloe WR Tap	B04-12690-4	31-May-04	< 1 ✓	--	< 1 ✓	--	1.09
Crysler Well No. 2 (Standby) - Raw	B04-12690-5	31-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

Dave
June 3/04Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00548

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-13425

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 07-Jun-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 09-Jun-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	E coli	Total Coliform	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	07-Jun-2004	07-Jun-2004	07-Jun-2004	07-Jun-2004	07-Jun-2004

Client I.D.	Sample I.D.	Date Collected					
CRW-01 Crysler Well No. 1 - Raw	B04-13425-1	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
CRW-02 Crysler Well No. 1 - Treated	B04-13425-2	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	< 2 ✓	1.57
CRW-03 Crysler Satellite K Tap	B04-13425-3	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	< 2 ✓	1.22
CRW-04 SPS S. Tap	B04-13425-4	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	1.10
CRW-05 Crysler Well No. 2 (Standby) - Raw	B04-13425-5	07-Jun-04	< 1 ✓	< 1 ✓	1 ✓	--	--

EA
June 11/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00547

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-14159

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 14-Jun-04

DATE REPORTED: 16-Jun-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	E coli	Total Coliform	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	14-Jun-2004	14-Jun-2004	14-Jun-2004	14-Jun-2004	14-Jun-2004

Client I.D.	Sample I.D.	Date Collected	E coli	Total Coliform	Background	Heterotrophic Plate Count	Free Chlorine
Crysler Well No. 1 - Raw	B04-14159-1	14-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 -S- Tap - Treated	B04-14159-2	14-Jun-04	< 1 ✓	< 1 ✓	--	4 ✓	1.36
Ecole WR Tap	B04-14159-3	14-Jun-04	< 1 ✓	< 1 ✓	--	2 ✓	1.22
Home Hardware WR Tap	B04-14159-4	14-Jun-04	< 1 ✓	< 1 ✓	--	--	1.21
Crysler Well No. 2 (Standby) - Raw	B04-14159-5	14-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

Dave
June 17/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00546

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-14906

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 21-Jun-04

DATE REPORTED: 24-Jun-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	21-Jun-2004	21-Jun-2004	21-Jun-2004	21-Jun-2004	21-Jun-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-14906-1	21-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-14906-2	21-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.56
Tower S Tap	B04-14906-3	21-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.21
Post Office	B04-14906-4	21-Jun-04	< 1 ✓	< 1 ✓	--	--	1.31
Crysler Well No. 2 (Standby) - Raw	B04-14906-5	21-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

*Dave
June 23/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00545

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-15594

Report To:Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 28-Jun-04

DATE REPORTED: 30-Jun-04

SAMPLE MATRIX: Drinking Water

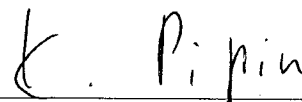
JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	29-Jun-2004	29-Jun-2004	29-Jun-2004	28-Jun-2004	28-Jun-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-15594-1	28-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-15594-2	28-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.58
Sun Gas W.R Tap	B04-15594-3	28-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.37
SPS S. Tap	B04-15594-4	28-Jun-04	< 1 ✓	< 1 ✓	--	--	1.14
Crysler Well No. 2 (Standby) - Raw	B04-15594-5	28-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--

Done
JUN 2/04Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00864

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-16130

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 05-Jul-04

DATE REPORTED: 07-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:			05-Jul-2004	05-Jul-2004	05-Jul-2004	05-Jul-2004	05-Jul-2004
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-16130-1	05-Jul-04	< 1	< 1	< 1	--	--
Crysler Well No. 1 - Treated	B04-16130-2	05-Jul-04	< 1	< 1	--	< 2	1.40
Ecole WR Tap	B04-16130-3	05-Jul-04	< 1	< 1	--	< 2	1.11
SPS S. Tap	B04-16130-4	05-Jul-04	< 1	< 1	--	--	1.35
Crysler Well No. 2 (Standby) - Raw	B04-16130-5	05-Jul-04	< 1	< 1	< 1	--	--

*Btt
July 8/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00863

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-16797

Report To:Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 14-Jul-04

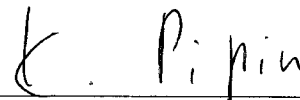
P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Total Coliform	E coli	Background
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3407	MOE E3407	MOE E3371
Date Analyzed:	12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	E coli	Total Coliform	E coli	Background
Crysler Well No. 1 - Raw	B04-16797-1	12-Jul-04	< 1 ✓	< 1 ✓	--	--	4 ✓
Crysler Well No. 1 - Treated	B04-16797-2	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
Crysler Satellite K Tap	B04-16797-3	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
Home Hardware W.R. Tap	B04-16797-4	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
Crysler Well No. 2 (Standby) - Raw	B04-16797-5	12-Jul-04	< 1 ✓	< 1 ✓	--	--	58

Dave
Jul 15/04Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00863

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-16797

Report To:

Ontario Clean Water Agency - Chrysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

DATE REPORTED: 14-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chrysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	12-Jul-2004	12-Jul-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-16797-1	12-Jul-04	--	--		
Crysler Well No. 1 - Treated	B04-16797-2	12-Jul-04	< 2 ✓	1.30		
Crysler Satellite K Tap	B04-16797-3	12-Jul-04	< 2 ✓	1.16		
Home Hardware W.R. Tap	B04-16797-4	12-Jul-04	--	1.05		
Crysler Well No. 2 (Standby) - Raw	B04-16797-5	12-Jul-04	--	--		

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00863

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-16797

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

DATE REPORTED: 14-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Total Coliform	E coli	Background
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3407	MOE E3407	MOE E3371
Date Analyzed:	12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	E coli	Total Coliform	E coli	Background
Crysler Well No. 1 - Raw	B04-16797-1	12-Jul-04	< 1	< 1	--	--	4
Crysler Well No. 1 - Treated	B04-16797-2	12-Jul-04	--	--	< 1	< 1	--
Crysler Satellite K Tap	B04-16797-3	12-Jul-04	--	--	< 1	< 1	--
Home Hardware W.R. Tap	B04-16797-4	12-Jul-04	--	--	< 1	< 1	--
Crysler Well No. 2 (Standby) - Raw	B04-16797-5	12-Jul-04	< 1	< 1	--	--	58

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00863

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-16797

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 14-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	12-Jul-2004	12-Jul-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-16797-1	12-Jul-04	--	--		
Crysler Well No. 1 - Treated	B04-16797-2	12-Jul-04	< 2	1.30		
Crysler Satellite K Tap	B04-16797-3	12-Jul-04	< 2	1.16		
Home Hardware W.R. Tap	B04-16797-4	12-Jul-04	--	1.05		
Crysler Well No. 2 (Standby) - Raw	B04-16797-5	12-Jul-04	--	--		

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00865

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-17442

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 19-Jul-04

DATE REPORTED: 21-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	19-Jul-2004	19-Jul-2004	19-Jul-2004	19-Jul-2004	19-Jul-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	E coli	Background	Total Coliform	E coli
Crysler Well No. 1 - Raw	B04-17442-1	19-Jul-04	< 1 ✓	< 1 ✓	26 ✓	--	--
Crysler Well No. 1 - Treated	B04-17442-2	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
SPS South Tap	B04-17442-3	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Sun Gas WR Tap	B04-17442-4	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-17442-5	19-Jul-04	< 1 ✓	< 1 ✓	38 ✓	--	--

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00865

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-17442

Report To:

Ontario Clean Water Agency - Crysler

5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: (613)526-0123

Fax (613)526-1244

DATE RECEIVED: 19-Jul-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 21-Jul-04

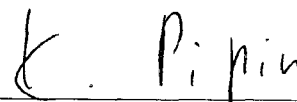
P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	19-Jul-2004	19-Jul-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-17442-1	19-Jul-04	--	--		
Crysler Well No. 1 - Treated	B04-17442-2	19-Jul-04	2 ✓	1.37		
SPS South Tap	B04-17442-3	19-Jul-04	< 2 ✓	1.14		
Sun Gas WR Tap	B04-17442-4	19-Jul-04	--	1.12		
Crysler Well No. 2 (Standby) - Raw	B04-17442-5	19-Jul-04	--	--		

Dave
JUL 22/04Krystyna Pipin, M. Sc.
Lab SupervisorChlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00866

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18098

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 26-Jul-04

DATE REPORTED: 28-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	26-Jul-2004	26-Jul-2004	26-Jul-2004	26-Jul-2004	26-Jul-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-18098-1	26-Jul-04	< 1 ✓	< 1 ✓	9 ✓	--	--
Crysler Well No. 1 - Treated	B04-18098-2	26-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Post Office	B04-18098-3	26-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Water Tower	B04-18098-4	26-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-18098-5	26-Jul-04	< 1 ✓	< 1 ✓	62 ✓	--	--

Dave July 28/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00866

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18098

Report To:

Ontario Clean Water Agency - Crysler

5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: (613)526-0123

Fax (613)526-1244

DATE RECEIVED: 26-Jul-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 28-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1mL	mg/L			
M.D.L.:			2				
Reference Method:			MOE E3371	n/a			
Date Analyzed:			26-Jul-2004	26-Jul-2004			
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-18098-1	26-Jul-04	--	--			
Crysler Well No. 1 - Treated	B04-18098-2	26-Jul-04	< 2 ✓	1.41			
Post Office	B04-18098-3	26-Jul-04	< 2 ✓	0.98			
Water Tower	B04-18098-4	26-Jul-04	--	1.09			
Crysler Well No. 2 (Standby) - Raw	B04-18098-5	26-Jul-04	--	--			

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00867

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18736

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 05-Aug-04

JOB/PROJECT NO.: WTP

DATE REPORTED: 05-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	03-Aug-2004	03-Aug-2004	03-Aug-2004	03-Aug-2004	03-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-18736-1	03-Aug-04	< 1 ✓	< 1 ✓	9 ✓	--	--
Crysler Well No. 1 - Treated	B04-18736-2	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Home Hardware	B04-18736-3	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓
SPS Treated	B04-18736-4	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-18736-5	03-Aug-04	< 1 ✓	< 1 ✓	32 ✓	--	--

Aug 6/04
BH

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00867

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18736

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 03-Aug-04

JOB/PROJECT NO.: Crysler Well

DATE REPORTED: 03-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	03-Aug-2004	03-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-18736-1	03-Aug-04	--	--		
Crysler Well No. 1 - Treated	B04-18736-2	03-Aug-04	< 2 ✓	1.49		
Home Hardware	B04-18736-3	03-Aug-04	< 2 ✓	0.99		
SPS Treated	B04-18736-4	03-Aug-04	--	1.13		
Crysler Well No. 2 (Standby) - Raw	B04-18736-5	03-Aug-04	--	--		

*Aug 6/04
BHT*

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00868

REPORT No. B04-19310

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 09-Aug-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 11-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	09-Aug-2004	09-Aug-2004	09-Aug-2004	09-Aug-2004	09-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-19310-1	09-Aug-04	< 1 ✓	< 1 ✓	16 ✓	--	--
Crysler Well No. 1 - Treated	B04-19310-2	09-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Tower S Tap	B04-19310-3	09-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Satellite WR Tap	B04-19310-4	09-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-19310-5	09-Aug-04	< 1 ✓	< 1 ✓	14 ✓	--	--

*Adverse
7500 @ Treated.
Resampled Aug. 11
Done Aug. 13/04*

K. Pipin
Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00868

REPORT No. B04-19310

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 09-Aug-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 11-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	09-Aug-2004	09-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-19310-1	09-Aug-04	--	--		
Crysler Well No. 1 - Treated	B04-19310-2	09-Aug-04	> 500 ✓	1.40		
Tower S Tap	B04-19310-3	09-Aug-04	< 2	1.03		
Crysler Satellite WR Tap	B04-19310-4	09-Aug-04	--	1.01		
Crysler Well No. 2 (Standby) - Raw	B04-19310-5	09-Aug-04	--	--		

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00869

REPORT No. B04-19616

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 11-Aug-04

DATE REPORTED: 13-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1mL	mg/L			
M.D.L.:			2				
Reference Method:			MOE E3371	n/a			
Date Analyzed:			11-Aug-2004	11-Aug-2004			
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-19616-1	10-Aug-04	> 500	--	~		
Crysler Well No. 1 - Treated	B04-19616-2	10-Aug-04	2	1.5	✓		
Tower	B04-19616-3	10-Aug-04	204	1.1	✓		

*Resample Result
Aug 13/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00870

REPORT No. B04-19964

Report To:

Ontario Clean Water Agency - Chrysler

5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 16-Aug-04

DATE REPORTED: 18-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chrysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	16-Aug-2004	16-Aug-2004	16-Aug-2004	16-Aug-2004	16-Aug-2004
Client I.D.	Sample I.D.	Date Collected			
Crysler Well No. 1 - Raw	B04-19964-1	16-Aug-04	< 1 ✓	< 1 ✓	5 ✓
Crysler Well No. 1 - Treated	B04-19964-2	16-Aug-04	--	--	--
Sun Gas Wash Room Tap	B04-19964-3	16-Aug-04	--	--	--
SPS S Tap	B04-19964-4	16-Aug-04	--	--	--
Crysler Well No. 2 (Standby) - Raw	B04-19964-5	16-Aug-04	10 ✓	< 1 ✓	> 200 ✓

Aug 19/04
B04.

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00870

REPORT No. B04-19964

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 16-Aug-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 18-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1mL	mg/L			
M.D.L.:			2	0.01			
Reference Method:			MOE E3371	n/a			
Date Analyzed:			16-Aug-2004	16-Aug-2004			
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-19964-1	16-Aug-04	--	--			
Crysler Well No. 1 - Treated	B04-19964-2	16-Aug-04	< 2 ✓	1.48			
Sun Gas Wash Room Tap	B04-19964-3	16-Aug-04	2 ✓	1.21			
SPS S Tap	B04-19964-4	16-Aug-04	--	1.08			
Crysler Well No. 2 (Standby) - Raw	B04-19964-5	16-Aug-04	--	--			

Aug 19/04
BHA

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00871

REPORT No. B04-20571

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 23-Aug-04

DATE REPORTED: 25-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	23-Aug-2004	23-Aug-2004	23-Aug-2004	23-Aug-2004	23-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-20571-1	23-Aug-04	< 1 ✓	< 1 ✓	14	--	--
Crysler Well No. 1 - Treated	B04-20571-2	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Post Office WR Tap	B04-20571-3	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Water Tower	B04-20571-4	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-20571-5	23-Aug-04	4	< 1 ✓	190 ✓	--	--

*Need to
Run SB well
larger.
Dave Aug. 26/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

CADUCEON™ CERTIFICATE OF ANALYSIS

ENVIRONMENTAL LABORATORIES

Final Report

C.O.C.: C-00871

REPORT No. B04-20571

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 23-Aug-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 25-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2	0.01			
Reference Method:	MOE E3371	n/a			
Date Analyzed:	23-Aug-2004	23-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-20571-1	23-Aug-04	--	--		
Crysler Well No. 1 - Treated	B04-20571-2	23-Aug-04	< 2 ✓	1.48		
Post Office WR Tap	B04-20571-3	23-Aug-04	< 2 ✓	1.02		
Water Tower	B04-20571-4	23-Aug-04	--	1.31		
Crysler Well No. 2 (Standby) - Raw	B04-20571-5	23-Aug-04	--	--		

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00872

REPORT No. B04-21226

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 30-Aug-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 01-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	30-Aug-2004	30-Aug-2004	30-Aug-2004	30-Aug-2004	30-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-21226-1	30-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	-- ✓	--
Crysler Well No. 1 - Treated	B04-21226-2	30-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Post Office	B04-21226-3	30-Aug-04	--	--	--	< 1 ✓	< 1 ✓
SPS	B04-21226-4	30-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-21226-5	30-Aug-04	< 1 ✓	< 1 ✓	174 ✓	--	--

*Dave
Sep 1/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00872

REPORT No. B04-21226

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 30-Aug-04

DATE REPORTED: 01-Sep-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

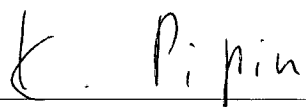
P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2	0.01			
Reference Method:	MOE E3371	n/a			
Date Analyzed:	30-Aug-2004	31-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-21226-1	30-Aug-04	--	--		
Crysler Well No. 1 - Treated	B04-21226-2	30-Aug-04	< 2 ✓	1.50		
Post Office	B04-21226-3	30-Aug-04	2 ✓	0.92		
SPS	B04-21226-4	30-Aug-04	--	1.00		
Crysler Well No. 2 (Standby) - Raw	B04-21226-5	30-Aug-04	--	--		

Chlorine results provided by client
M.D.L. = Method Detection Limit


Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: c-00873

REPORT No. B04-21934

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 07-Sep-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 09-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	07-Sep-2004	07-Sep-2004	07-Sep-2004	07-Sep-2004	07-Sep-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	E coli	Background	Total Coliform	E coli
Crysler Well No. 1 - Raw	B04-21934-1	07-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-21934-2	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Ecole WR Tap	B04-21934-3	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
SPS S Tap	B04-21934-4	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-21934-5	07-Sep-04	< 1 ✓	< 1 ✓	53 ✓	--	--

*Dave
Sept 10/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: c-00873

REPORT No. B04-21934

Report To:

Ontario Clean Water Agency - Chrysler
5 Industrial Dr
Chesterville ON K0C 1H0

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

Attention: Dave Markell

DATE RECEIVED: 07-Sep-04

JOB/PROJECT NO.: Chrysler WTP

DATE REPORTED: 09-Sep-04

P.O. NUMBER: -

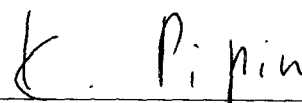
SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2	0.01			
Reference Method:	MOE E3371	n/a			
Date Analyzed:	07-Sep-2004	07-Sep-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-21934-1	07-Sep-04	--	--		
Crysler Well No. 1 - Treated	B04-21934-2	07-Sep-04	< 2 ✓	1.51		
Ecole WR Tap	B04-21934-3	07-Sep-04	2	0.83		
SPS S Tap	B04-21934-4	07-Sep-04	--	0.95		
Crysler Well No. 2 (Standby) - Raw	B04-21934-5	07-Sep-04	--	--		

Chlorine results provided by client
M.D.L. = Method Detection Limit



Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00874

REPORT No. B04-22534

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 13-Sep-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 15-Sep-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	13-Sep-2004	13-Sep-2004	13-Sep-2004	13-Sep-2004	13-Sep-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-22534-1	13-Sep-04	< 1 ✓	< 1 ✓	2 ✓	--	--
Crysler Well No. 1 - Treated	B04-22534-2	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Home Hardware W.R Tap	B04-22534-3	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Sattalite K Tap	B04-22534-4	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-22534-5	13-Sep-04	< 1 ✓	< 1 ✓	128 ✓	--	--

*Dave
Sept. 16/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00874

REPORT No. B04-22534

Report To:**Ontario Clean Water Agency - Crysler**

5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 613-526-0123

Fax 613-526-1244

DATE RECEIVED: 13-Sep-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 15-Sep-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

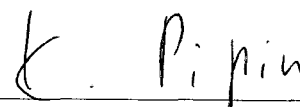
WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2	0.01			
Reference Method:	MOE E3371	n/a			
Date Analyzed:	13-Sep-2004	13-Sep-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-22534-1	13-Sep-04	--	--		
Crysler Well No. 1 - Treated	B04-22534-2	13-Sep-04	< 2 ✓	1.57		
Home Hardware W.R Tap	B04-22534-3	13-Sep-04	< 2 ✓	0.94		
Crysler Sattalite K Tap	B04-22534-4	13-Sep-04	--	0.89		
Crysler Well No. 2 (Standby) - Raw	B04-22534-5	13-Sep-04	--	--		

Chlorine results provided by client

M.D.L. = Method Detection Limit



Krystyna Pipin, M. Sc.

Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00875

REPORT No. B04-23257

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: [REDACTED]

JOB/PROJECT NO. [REDACTED]

DATE REPORTED: 22-Sep-04

P.O. NUMBER: [REDACTED]

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	20-Sep-2004	20-Sep-2004	20-Sep-2004	20-Sep-2004	20-Sep-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-23257-1	20-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Crysler Well No. 1 - Treated	B04-23257-2	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Tower S Tap	B04-23257-3	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
SPS Tap	B04-23257-4	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Crysler Well No. 2 (Standby) - Raw	B04-23257-5	20-Sep-04	< 1 ✓	< 1 ✓	78 ✓	--	--

Sept 23/04
BA

Adverse
7500 HPC
Resampled
Sept. 22/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00875

REPORT No. B04-23257

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 20-Sep-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 22-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2	0.01			
Reference Method:	MOE E3371	n/a			
Date Analyzed:	20-Sep-2004	20-Sep-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-23257-1	20-Sep-04	--	--		
Crysler Well No. 1 - Treated	B04-23257-2	20-Sep-04	> 500	1.66		
Tower S Tap	B04-23257-3	20-Sep-04	2	1.17		
SPS Tap	B04-23257-4	20-Sep-04	--	1.06		
Crysler Well No. 2 (Standby) - Raw	B04-23257-5	20-Sep-04	--	--		

*Sept 23/04
BH*

*Jean Veillaux resampled
Sept 22/04*

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-01044

REPORT No. B04-23654

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 22-Sep-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 24-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	22-Sep-2004	22-Sep-2004	22-Sep-2004	22-Sep-2004	22-Sep-2004

Client I.D.	Sample I.D.	Date Collected	Total Coliform	E coli	Background	Total Coliform	E coli
Crysler Well No. 1 - Raw	B04-23654-1	22-Sep-04	2	<1	1	--	--
Crysler Well No. 1 - Treated	B04-23654-2	22-Sep-04	--	--	--	<1	<1
Water Tower	B04-23654-3	22-Sep-04	--	--	--	<1	<1

*Dave
Sept. 27/04
Resample Results
Issue Resolution
Sept. 27/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-01044

REPORT No. B04-23654

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 22-Sep-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 24-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:		Heterotrophic Plate Count	Free Chlorine			
Units:		cts/1mL	mg/L			
M.D.L.:		2	0.01			
Reference Method:		MOE E3371	n/a			
Date Analyzed:		22-Sep-2004	22-Sep-2004			
Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-23654-1	22-Sep-04	--	--		
Crysler Well No. 1 - Treated	B04-23654-2	22-Sep-04	< 2	1.32		
Water Tower	B04-23654-3	22-Sep-04	< 2	1.23		

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 220008649

Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Friday, October 01, 2004

Date Rec. : 28 September 2004

LR Report: CA18323-SEP04

Copy: #1

Phone: 613-448-3098

Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	28-Sep-04	28-Sep-04	28-Sep-04
2: *Approved Time		--	--	16:20	16:20	16:20
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw CRW-01	27-Sep-04 11:20	19.2	--	2 ✓	0 ✓	61 ✓
5: RW Well Stand-By CRW-02	27-Sep-04 11:10	19.2	--	0 ✓	0 ✓	15 ✓
6: TW Well No. 1 Treated 15642 County Road 13 CRW-03	27-Sep-04 11:25	19.2	1.36	0 ✓	0 ✓	0 ✓
7: DW CRW-04 SPS S. Tap	27-Sep-04 11:55	19.2	0.98	0 ✓	0 ✓	0 ✓
8: DW CRW-05 Post Office W.R. Tap	27-Sep-04 11:40	19.2	0.88	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Oct 1/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler WTP
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, October 06, 2004

Date Rec. : 05 October 2004
LR Report: CA17081-OCT04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	05-Oct-04	05-Oct-04	05-Oct-04
2: *Approved Time		--	--	11:40	11:40	11:40
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw CRW 01 Production	04-Oct-04 10:35	8.6	--	12	0	86
5: RW Well Stand By CRW 02	04-Oct-04 10:25	8.6	--	1	0	0
6: TW Well No 1 Treated 15642 County Road 13 CRW 03 S Tap	04-Oct-04 10:40	8.6	1.34	0	0	0
7: DW CRW 04 Ecole WR Tap	04-Oct-04 11:00	8.6	0.88	0	0	0
8: DW CRW 05 SPS S Tap	04-Oct-04 11:15	8.6	1.01	0	0	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

12 T.C. S.B.
1 T.C. Duty


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Oct 6/04



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Thursday, October 14, 2004

Date Rec. : 13 October 2004
LR Report: CA17465-OCT04

Copy: #1

Phone: 613-448-3098
Fax: pdf

CERTIFICATE OF ANALYSIS


Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	---	13-Oct-04	13-Oct-04	13-Oct-04
2: *Approved Time		--	---	11:30	11:30	11:30
3: MAC		--	---	0	0	200
4: RW Well No 1 Raw CRW-01 Production	12-Oct-04 11:20	14.6	---	8 ✓	0 ✓	36 ✓
5: RW Well Stand By CRW-02	12-Oct-04 11:00	14.6	---	0 ✓	0 ✓	146 ✓
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	12-Oct-04 11:25	14.6	1.35 ✓	0 ✓	0 ✓	0 ✓
7: DW CRW-04 Post Office WR Tap	12-Oct-04 11:40	14.6	0.95 ✓	0 ✓	0 ✓	0 ✓
8: DW CRW-05 Home Hardware WR Tap	12-Oct-04 11:50	14.6	0.90 ✓	0 ✓	0 ✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Dave
Oct 14/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler WTP
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Thursday, October 21, 2004

Date Rec. : 19 October 2004
LR Report: CA17816-OCT04

Copy: #1

Phone: 613-448-3098
Fax: pdf

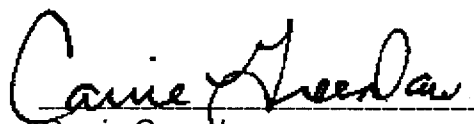
CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	19-Oct-04	19-Oct-04	19-Oct-04
2: *Approved Time		--	--	12:55	12:55	12:55
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw CRW-01	18-Oct-04 10:55	11.8	--	1	0	13
5: RW Well Stand By CRW-02	18-Oct-04 10:40	11.8	--	1	0	18
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	18-Oct-04 11:00	11.8	1.38	0	0	0
7: DW CRW-04 Crysler Satellite K Tap	18-Oct-04 11:35	11.8	0.93	0	0	0
8: DW CRW-05 SPS S Tap	18-Oct-04 11:45	11.8	1.03	0	0	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

1 TC
Duty well
SB well

Dave
Oct 21/04



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, October 27, 2004

Date Rec. : 26 October 2004
LR Report: CA18154-OCT04

Copy: #1

Phone: 613-448-3098
Fax: pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	26-Oct-04	26-Oct-04	26-Oct-04
2: *Approved Time		--	--	11:30	11:30	11:30
3: MAC		--	--	0	0	200
4: RW Well No.1 Raw CRW-01	25-Oct-04 11:40	16.4	--	20 A2C ✓	0 A2C ✓	251 A2C ✓
5: RW Well Stand-By CRW-02	25-Oct-04 11:30	16.4	--	0 ✓	0 ✓	21 ✓
6: TW Well No.1 Treated-15642 County Road 13 CRW-03	25-Oct-04 11:45	16.4	1.39	0 ✓	0 ✓	0 ✓
7: DW CRW-04 Tower S Tap	25-Oct-04 12:00	16.4	1.02	0 ✓	0 ✓	0 ✓
8: DW CRW-05 Sun Gas WR Tap	25-Oct-04 12:05	16.4	1.00	0 ✓	0 ✓	--

A2C - Approximate Result: Background Counts >200

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Dave Oct 27/04
Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Well #1 (20 TC)
Well
estimated
by lab.



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Phone: 613-448-3098
Fax:pdf

Works #: 220008649
Project : P.O. No. 008503

Thursday, November 04, 2004

Date Rec. : 02 November 2004
LR Report: CA17052-NOV04

Copy: #1

CERTIFICATE OF ANALYSIS **Final Report**

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	02-Nov-04	02-Nov-04	02-Nov-04
2: *Approved Time		--	--	11:15	11:15	11:15
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw CRW-01	01-Nov-04 09:35	13.4	--	1 ✓	0 ✓	51 ✓
5: RW Well Stand-By CRW-02	01-Nov-04 09:25	13.4	--	0 ✓	0 ✓	12 ✓
6: TW Well No. 1 Treated-15642 County Road 13 CRW-03	01-Nov-04 09:50	13.4	1.35 ✓	0 ✓	0 ✓	0 ✓
7: DW CRW-04 Ecole WR Tap	01-Nov-04 08:50	13.4	1.01 ✓	0 ✓	0 ✓	0 ✓
8: DW Crw-05 S. Tap	01-Nov-04 09:10	13.4	1.09 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

1 TC.
Well #1 Raw
Dave.
Nov 4/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, November 10, 2004

Date Rec. : 09 November 2004

LR Report: CA17425-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	09-Nov-04	09-Nov-04	09-Nov-04
2: *Approved Time		--	--	12:10	12:10	12:10
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw CRW-01 Production	08-Nov-04 11:10	8.8	--	0 ✓	0 ✓	77 ✓
5: RW Well Stand By CRW-02	08-Nov-04 11:05	8.8	--	0 ✓	0 ✓	34 ✓
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	08-Nov-04 11:15	8.8	1.30 ✓	0 ✓	0 ✓	0 ✓
7: DW CRW-04 Home Hardware WR Tap	08-Nov-04 11:40	8.8	0.91 ✓	0 ✓	0 ✓	0 ✓
8: DW CRW-05 SPS S Tap	08-Nov-04 11:50	8.8	1.28 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Nov 10



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler WTP
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Thursday, November 18, 2004

Date Rec. : 16 November 2004
LR Report: CA17753-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

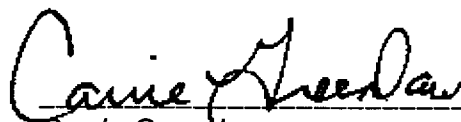
CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ok	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	---	16-Nov-04	16-Nov-04	16-Nov-04
2: *Approved Time		--	---	11:05	11:05	11:05
3: MAC		--	---	0	0	200
4: RW Well No. 1 Raw CRW-01	15-Nov-04 09:50	12.2	---	2	0	82
5: RW Well Stand-By CRW-02	15-Nov-04 09:40	12.2	---	0	0	5
6: TW Well No. 1 Treated - 15642 County Road 13 CRW-03	15-Nov-04 10:00	12.2	1.54	0	0	0
7: DW CRW-04 Post Office W.R. Tap	15-Nov-04 08:50	12.2	1.11	0	0	0
8: DW CRW-05 Tower S. Tap	15-Nov-04 09:15	12.2	0.77	0	0	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.



Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Nov 18/04

2 TC Raw

Report Number:	2422460
Date:	2004-11-19
Date Submitted:	2004-11-18
MOE DWIS UPLOAD:	2407195
Project:	

P.O. Number:

Matrix:

Supply Water

Supply Water										
LAB ID: Sample Date: Sample ID:					356315 2004-11-18 Crysler Water Tower Disinfect.		GUIDELINE MOE REG 170/03			
PARAMETER					UNITS	MDL	TREATED	TYPE	LIMIT	UNITS
Total Coliforms Escherichia Coli Background Colonies					ct/100mL		0	MAC	0	ct/100mL
					ct/100mL		0	MAC	0	ct/100mL
					ct/100mL		1	MAC	200	ct/100mL
<div>Tower disinfected by pouring 3 gallons of bleach</div>										

IMDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL:

Krista Quantrill

Microbiology Analyst
Results relate only to the parameters tested on the samples submitted for analysis.



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler WTP
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

November 25, 2004

Date Rec. : 23 November 2004
LR Report: CA18099-NOV04

Copy: #1

Phone: 613-448-3098
Fax: pdf

CERTIFICATE OF ANALYSIS

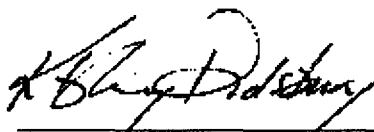
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	23-Nov-04	23-Nov-04	23-Nov-04
2: *Approved Time		--	--	11:20	11:20	11:20
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw CRW-01	22-Nov-04 11:30	12.6	--	0 ✓	0 ✓	13 ✓
5: RW Well Stand-By CRW-02	22-Nov-04 09:50	12.6	--	0 ✓	0 ✓	46 ✓
6: TW Well No. 1 Treated - 15642 County Road 13 CRW-03	22-Nov-04 11:40	12.6	1.41	0 ✓	0 ✓	0 ✓
7: DW CRW-04 SPS - S. Tap	22-Nov-04 09:00	12.6	2.0	0 ✓	0 ✓	0 ✓
8: DW CRW-05 Sun Gas - WR Tap	22-Nov-04 09:15	12.6	2.12	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

DWR
Nov 25/04


Kimberley Didsbury
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, December 01, 2004

Date Rec. : 30 November 2004
LR Report: CA18467-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	30-Nov-04	30-Nov-04	30-Nov-04
2: *Approved Time		--	--	13:10	13:10	13:10
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw CRW-01	29-Nov-04 11:35	11.2	---	0	0	2
5: RW Well Stand By CRW-02	29-Nov-04 11:00	11.2	---	0	0	32
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	29-Nov-04 11:40	11.2	1.54	0	0	0
7: DW CRW-04 Crysler Satellite K. Tap	29-Nov-04 12:10	11.2	1.36	0	0	0
8: DW CRW-05 SPS S Tap	29-Nov-04 12:20	11.2	1.34	0	0	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 2/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Phone: 613-448-3098
Fax:pdf

Crysler
Works #: 220008649
Project : P.O. No. 008503

Wednesday, December 08, 2004

Date Rec. : 07 December 2004
LR Report: CA17135-DEC04

Copy: #1

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	07-Dec-04	07-Dec-04	07-Dec-04
2: *Approved Time		--	--	10:45	10:45	10:45
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw CRW-01 Production	06-Dec-04 11:00	9.6	---	0✓	0✓	2✓
5: RW Well Stand By CRW-02	06-Dec-04 10:50	9.6	---	0✓	0✓	15✓
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	06-Dec-04 11:10	9.6	1.41✓	0✓	0✓	0✓
7: DW CRW-04 Ecole W.R. Tap	06-Dec-04 11:25	9.6	1.22✓	0✓	0✓	0✓
8: DW CRW-05 Home Hardware W.R. Tap	06-Dec-04 11:35	9.6	1.21✓	0✓	0✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 10/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville [REDACTED]

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Thursday, December 16, 2004

Date Rec. : [REDACTED] 2004

LR Report: CA [REDACTED] DEC04

Copy: #1

Phone: 613-448-3098
Fax: pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		—	—	14-Dec-04	14-Dec-04	14-Dec-04
2: *Approved Time		—	—	11:15	11:15	11:15
3: MAC		—	—	0	0	200
4: RW Well No 1 Raw CRW-01	13-Dec-04 10:45	6.4	—	[REDACTED]	[REDACTED]	[REDACTED]
5: RW Well Stand By CRW-02	13-Dec-04 10:35	6.4	—	[REDACTED]	[REDACTED]	[REDACTED]
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	13-Dec-04 10:55	6.4	—	[REDACTED]	[REDACTED]	[REDACTED]
7: DW CRW-04 Sun Gas W.R. Tap	13-Dec-04 11:15	6.4	—	[REDACTED]	[REDACTED]	[REDACTED]
8: DW CRW-05 Chrysler Satellite K. Tap	13-Dec-04 11:25	6.4	—	[REDACTED]	[REDACTED]	[REDACTED]

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Dec 17.



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (P)

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, December 22, 2004

Date Rec. :
LR Report: CA1 DEC04

Copy: #1

Phone: 613-448-3098
Fax: pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	21-Dec-04	21-Dec-04	21-Dec-04
2: *Approved Time		--	--	11:10	11:10	11:10
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw CRW-01	20-Dec-04 10:50	4.8	--			
5: RW Well Stand By CRW-02	20-Dec-04 10:35	4.8	--			
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	20-Dec-04 10:55	4.8	1.42			
7: DW CRW-04 Tower S Tap	20-Dec-04 11:05	4.8	1.28			
8: DW CRW-05 SPS S Tap	20-Dec-04 11:20	4.8	1.30			

The AWQI # assigned by the MOE for the adverse result was:51280

ODWS - Above Drinking Water Standard

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Adverse
Tower
Bill Resampled
Plant, Tower & SPS
Dec 22/04
Prove sent sample to
Accutest.

Dave

Client: **[REDACTED]**
 5 Industrial Drive
 Chesterville, ON
 K0C 1H0
 Attention: Mr. Blair Henderson

Report Number: 2424578
 Date: 2004-12-23
 Date Submitted: 2004-12-22
 MOE DWIS UPLOAD: 2407902
 Project: **[REDACTED]**

P.O. Number:
 Matrix:

LAB ID:			Supply Water			GUIDELINE		
Sample Date:								
Sample ID:						MOE REG. 170/03		
PARAMETER	UNITS	MDL	362180		362181		362182	
	ct/100mL		DISTRIBUTION	DISTRIBUTION	DISTRIBUTION	DISTRIBUTION	DISTRIBUTION	DISTRIBUTION
Total Coliforms			2004-12-22	2004-12-22	2004-12-22	2004-12-22	2004-12-22	2004-12-22
			CRW-4P-01	CRW-SAME-	CRW-SAME-	CRW-SAME-	CRW-DOWN-	CRW-DOWN-
				02	02	02	03	03
	</							

Total Coliforms

*Is sample
from
Address
all
OK
and
no
residuals*

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration
 Comment:



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Crysler WTP
Works #: 220008649
Project : P.O. No. 008503

OCWA-Chesterville (Crysler WTP)

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Friday, December 31, 2004

Date Rec. : 30 December 2004

LR Report: CA18138-DEC04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		—	—	30-Dec-04	30-Dec-04	30-Dec-04
2: *Approved Time		—	—	11:45	11:45	11:45
3: MAC		—	—	0	0	200
4: RW Well No 1 Raw CRW-01	29-Dec-04 10:50	9.0	—	0 ✓	0 ✓	0 ✓
5: RW Well Stand By CRW-02	29-Dec-04 10:45	9.0	—	0 ✓	0 ✓	121 ✓
6: TW Well No 1 Treated 15642 County Road 13 CRW-03	29-Dec-04 11:00	9.0	1.41 ✓	0 ✓	0 ✓	0 ✓
7: DW CRW-04 Post Office WR Tap	29-Dec-04 11:10	9.0	1.34 ✓	0 ✓	0 ✓	0 ✓
8: DW CRW-05 Home Hardware WR Tap	29-Dec-04 11:20	9.0	1.33 ✓	0 ✓	0 ✓	—

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Dave
Dec 31/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

TO <i>Dave</i>		539357	
DATE <i>FEB 19/64</i>			
ADDRESS		FOR	
SHIP TO		DATE REQUIRED	
QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	TRANSFER of 8 CARBOUNYS		
2	Sodium Hypo from FINCH		
3	WTP to CRYSLER WTP.		
4			
5	TRANSFER of 1 CARBOUNY		
6	Sodium Hypo from FINCH		
7	WTP to MORNINGSIDE		
8			
9			
REF. NO.	ORDERED BY <i>Bill</i>	APPROVED BY	

REQUISITION
(NOT A PURCHASE ORDER)

Blueform DC 11

F

REQUISITION
(NOT A PURCHASE ORDER)

TO		Kim - Dave		539355	
ADDRESS				DATE	
SHIP TO				Apr 21/04	
FOR					
QUANTITY	PLEASE SUPPLY	DATE REQUIRED	PRICE	AMOUNT	
1	TRANSFERRED 8 CB's				
2	of Sodium Hypo				
3	from FINCH → CRYSLEK				
4	UTP's				
5					
6					
7					
8					
9					
REF. NO.	13112	ORDERED BY		APPROVED BY	

BlueLine DC 11

539364

TO Worm 14 may Concern DATE June 25/04 FOR

ADDRESS		DATE REQUIRED		AMOUNT
PLEASE SUPPLY		PRICE		
SHIP TO	from Finch Ch21			
QUANTITY				
1	6 CRYS 1 → CRYSLER			
2	5 → MC			
3				
4				
5				
6				
7				
8				
9				

APPROVED BY [Signature]

REF. NO. ORDERED BY

REQUISITION
(NOT A PURCHASE ORDER)

EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF CARRIER'S TARIFFS AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COUS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE OCWA FINCH WTP ADDRESS 20 WILLIAM STREET FINCH, ON KOC 1K0 Canada		SHIPPER EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc. STREET ADDRESS 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada	
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine PQ		CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 13905	ORDER NO. N° DE COMMANDE 1427328
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.		REQUIRED / DEMANDÉE 3	DATE SHIPPED EXPÉDIÉ LE 26.05.2004
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load		INVOICE TO / BUYER-FACTURE À / ACHETEUR OCWA	
ROUTING / ITINÉRAIRE 45328363		PAGE NO. N° DE PAGE 1	
NO. AND DESCRIPTION OF PACKS NBRE ET DESCRIPTION DE COLIS D.G.		DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	
1.00 each 32.00 DELCAN		PALLET WOODEN RETURNABLE X HYPOCHLORITE SOLUTIONS, CLASS 8, UN1791, PK GP II SODIUM HYPO10.8%(12% TR)DCN RET18.9L NSF TOTAL WEIGHT	
		0 KILOGRAMS 773 KILOGRAMS 773 KILOGRAMS	
***** *** CAMION AVEC TAIL GATE REQUIS *** * * COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-3098 OU LE 1-613-223-0333 * AVANT LA LIVRAISON ***** 2438 to Finch 3 to Cryslar ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211			
GROSS BRUT TARE NET	TOTAL NO. OF PIECES/PKGS. NBRE TOTAL DE COLIS IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ" PREPAID	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE <u>TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.</u> LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA <u>LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).</u>	
		DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE \$	

FORWARD INVOICE FOR PREPAID FREIGHT
QUOTING OUR B/L NO. TO:
FAIRE SUIVRE FACTURE POUR EXPÉDITION PORT
PAYÉ EN RÉFÉRENT À NOTRE NUMÉRO DE

BRENTAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1C8

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.
RESPONSABILITÉ MAXIMALE POUR PERTE OU DOMMAGE:
2 \$ LA LIVRE OU 4,41 \$ LE KILO, SAUF STIPULATION AU
CONTRAIRE PAR LA VALEUR DÉCLARÉE.

Brenntag Canada Inc.

AGENT

DESTINATAIRE/CONSIGNEE

PER
PAR

PER
PAR

PER
PAR

4 MEMORANDUM
MÉMORANDUM

THESE PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMÉMENT AUX CONDITIONS
APPARAISSANT AU VERSO DE LA PRÉSENTE.

CES PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMÉMENT AUX CONDITIONS
APPARAISSANT AU VERSO DE LA PRÉSENTE.

REQUISITION
(NOT A PURCHASE ORDER)


TO <i>Dave</i>		DATE <i>Oct 15/04</i>	
ADDRESS		FOR <i>#</i>	
SHIP TO		DATE REQUIRED	
QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1 <i>8</i>	<i>CB's of Clr from Finch</i>		
2	<i>WTP delivered to</i>		
3	<i>Crysler WTP</i>		
4			
5			
6			
7			
8			
9			
REF. NO.	ORDERED BY <i>Bill</i>	APPROVED BY	

Blueline DC 11

REQUISITION
(NOT A PURCHASE ORDER)

TO <i>Dave</i>		DATE <i>FEB 19/04</i>	
ADDRESS		FOR	
SHIP TO		DATE REQUIRED	
QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	<i>TRANSFER of 8 CARBOXY</i>		
2	<i>Sodium Hypo from Finch</i>		
3	<i>WTP to CRYSLER WTP</i>		
4			
5	<i>TRANSFER of 1st CARBOXY</i>		
6	<i>Sodium Hypo from Finch</i>		
7	<i>WTP to MORNINGSIDE</i>		
8			
9			
REF. NO.	ORDERED BY <i>Bill</i>	APPROVED BY <i>CTX done AB</i>	

Blueline DC 11

TO		D m		539369	
ADDRESS		DATE		Nov 29/04	
SHIP TO		FOR			
DATE REQUIRED		DATE REQUIRED			
QUANTITY		PLEASE SUPPLY		PRICE AMOUNT	
1		-8 CB's. from Fitch		WTP	
2		to CRYSLER. WTP			
3					
4	1				
5					
6					
7		1			
8					
9					
REF. NO.		APPROVED BY		APPROVED BY	
					

REQUISITION
(NOT A PURCHASE ORDER)

539371

TO *DAVE MARKELL* DATE *Dec 22/04*

FOR

ADDRESS

SHIP TO

DATE REQUIRED

AMOUNT

PRICE

PLEASE SUPPLY

QUANTITY

1	10	CB'S of Sodium Hypo		
2		from French delivered		
3		to Crystal		
4				
5				
6				
7				
8				
9				

ORDERED BY

off Richards

REF. NO.

APPROVED BY

REQUISITION
(NOT A PURCHASE ORDER)

Flowmeter Verification Certificate

Customer _____

Order code
PROMAG 50 DN100

Device type
3a00c516000

Serial number
V1.02.01

Software Version Transmitter
17.06.2004

Verification date _____

Plant / _____

Tag Description
1.2082/1.2082

K-Factor
2

Zero point
V1.02.00

Software Version I/O-Module
16:06

Verification time _____

Verification result: Passed

Test item	Result	Applied Limits
Amplifier	Passed	0.5 %
Current Output 1	Passed	0.05 mA
Pulse Output 1	Not tested	0 P
Test Sensor	Passed	

FieldCheck Details

103601

Serial number
1.01.00

Software Version
20.02.2004

Last Calibration Date _____

Simubox Details

85396

Serial number
1.00.00

Software Version
24.02.2004

Last Calibration Date _____

Date 17/06/04

Operator's Sign _____

Inspector's Sign [Signature]

Endress+Hauser
The Power of Know How



FieldCheck - Result Tab

Customer	
Order code	
Device type	PROMAG 50 DN100
Serial number	3a00c516000
Software Version Transmitter	V1.02.01
Verification date	17.06.2004

Plant	
Tag Description	-----
K-Factor	1.2082/1.2082
Zero point	2
Software Version I/O-Module	V1.02.00
Verification time	16:06

Verification Flow end value (100 %): 47.000 l/s

Passed/Failed	Test item	Simul. Signal	Limit Value	Deviation
	Test Transmitter			
✓	Amplifier	2.350 l/s (5%)	0.5 %	-0.22 %
✓		4.700 l/s (10.0%)	0.5 %	-0.11 %
✓		23.500 l/s (50.0%)	0.5 %	-0.07 %
✓		47.000 l/s (100%)	0.5 %	-0.06 %
✓	Current Output 1	4.000 mA (0%)	0.05 mA	0.003 mA
✓		4.800 mA (5%)	0.05 mA	0.004 mA
✓		5.600 mA (10.0%)	0.05 mA	0.004 mA
✓		12.000 mA (50.0%)	0.05 mA	0.006 mA
✓		20.000 mA (100%)	0.05 mA	0.008 mA
—	Pulse Output 1	---	---	---
		Start value	Limits range	Measured value
	Test Sensor			
✓	Coil Curr. Rise	5.000 ms	0.000..10.250 ms	6.090 ms
✓	Coil Curr. Stability		---	---
✓	Electrode Integrity	mV	0.0..0.059 mV	0.003 mV



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Calibration / Inspection Check

Project: <u> </u>		Description: <u> </u>	
Equipment ID: 0000101100		Make: <u>ENDRES</u>	
Model#: 30FH80-7DIED11F218		Type: <u>MAG</u>	
Serial#: 12274502		Project Org.: 6054	
INT.DIA: 3"		Work Order Ref.: <u> </u>	
Cal. FS: <u> </u> liter/s		Range: 4800m ³ /d	
Customer FS: 55.55 liter/s		Sensor Factors: .9105/-4	

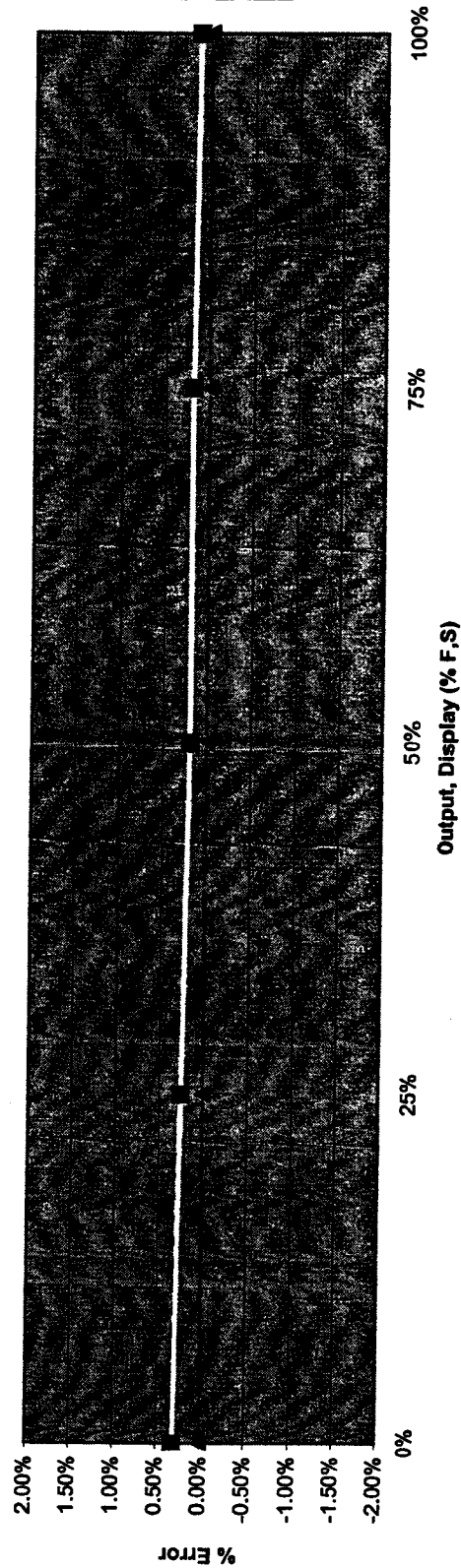
Technician: Tom K.

Signature: [Signature]

Date: 17/06/04

No.	V. Setting (%)	P (psi)	Head (in)	Head (m/w.c)	Flow (l/sec)	CAL. Standard	Display Before	Display After	Display error (%)	O/P. Theo (mAdc)	O/P. Before CAL.(mAdc)	O/P. After CAL.(mAdc)	O/P Bef. %Err (%F.S)	O/P Aft. %Err (%F.S)
1	0				0.00					4.00	4.05	4.05	0.31%	0.31%
2	25				13.89					8.00	8.04	8.04	0.25%	0.25%
3	50				27.75					12.00	12.03	12.03	0.19%	0.19%
4	75				41.66					16.00	16.03	16.03	0.19%	0.19%
5	100				55.55					20.00	20.02	20.02	0.12%	0.12%

Calibration Characteristic



Comment:



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date _____

Number of Pages 2 (including this page)
Subject: Adverse Water

AWQI# 25901

Cryder Well Supply Works 22000B649

Done

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
				CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: TC 1	
Oral Notification to SPILLS ACTION CENTRE				
Date May 11/04	Time 16:35	AWQI Notification No (s) 25901		
Person Contacted Valerie		DWS EMERGENCY CONTACT		
DWS Name Crysler Well Supply		Name Dave Markell		
DWS (Waterworks) # 220008649		Position Process Tech		
DWS Person Providing Oral Notification Dave Markell		Phone # (613) 448-3098	Fax # (613) 449-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date May 11/04	Time 16:33	Resample/Re-test		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Person Contacted Answering Machine		Disinfectant Restored/ Increased		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Flushing Mains/Pipes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Position		Users Advised to Boil/Seek Alternate		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Phone # (800) 267-7120	Fax # (613) 933-7930	OTHER - Describe:		
DWS Person Providing Oral Notification Dave Markell		Other information attached <input type="checkbox"/>		
Initial DWS Notification Prepared by: Dave Markell				
Signature Dave Markell		Date May 12/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:	Signature:	Date:
For Ministry Use Only: Report No.		

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
May 12 2004 8:41am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
May 12	8:38am	Fax Sent	1 613 933-7930	0:30	2	OK
May 12	8:39am	Fax Sent	1 800 268-6061	0:31	2	OK
May 12	8:40am	Fax Sent	1 416 314-5455	0:52	2	OK



Ministry of the Environment
Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg. 170/03

NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS and NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard	CofA/Order <input type="checkbox"/> Exceeds Limit
Oral Notification to SPILLS ACTION CENTRE					
Person Contacted: Don Hayes		Date: 2004/05/11		Time: 16:29	
Person Notifying: Karen Warburton		AWQI Notification No (s) 25901			
Laboratory Name: Caduceon Environmental Labs		Laboratory Emergency Contact Name Krystyna Pipin			
Address 2378 Holly Lane		Position Lab Supervisor			
Telephone # of Lab (613) 526-0123		Phone # (613) 526-0123		Fax # (613) 526-1244	
Drinking-Water System (DWS) Name Crysler		DWS Emergency Contact OCWA			
DWS (Waterworks) # 220000049		Name Dave Markell			
Location Crysler Well No. 1 - Treated		Position			
Telephone # of DWS (613) 448-3098		Phone # (613) 448-3098		Fax # (613) 448-1616	
Oral Notification to Drinking-Water System Owner			Oral Notification to Local Medical Officer of Health		
Person Contacted Kim			Person Contacted Idalla		
Position			Position		
Date 2004/05/11		Time 16:21		Date 2004/05/11	
				Time 16:22	
Laboratory Written Notification Prepared by: (Lab Results must be attached using Section 3 of this form) Karen Warburton					
Signature			Date May 11/04		


 Ministry of the Environment
 Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg 170/03

Adverse Analytical Results

For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Membrane Filtration Count / 100 mL				P-A / 100mL Confirmed	HPC / 1mL	Date - Data Approved (yyyy/mm/dd)
				U Untreated*	T Treated**	Total Coliforms	Total Coliform Background	E. Coli Fecal C.	EC FC			
				D Distribution								
25901		B04-10595-1	2004/05/10	Crysler Well No. 1 - Treated	<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D	1			<input type="checkbox"/> EC <input type="checkbox"/> FC	<input type="checkbox"/> TC <input type="checkbox"/> EC <input type="checkbox"/> FC		2004/05/10
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D				<input type="checkbox"/> EC <input type="checkbox"/> FC	<input type="checkbox"/> TC <input type="checkbox"/> EC <input type="checkbox"/> FC		
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D				<input type="checkbox"/> EC <input type="checkbox"/> FC	<input type="checkbox"/> TC <input type="checkbox"/> EC <input type="checkbox"/> FC		

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CofA or Order

Physical/Chemical/Radiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Parameter	Result(s)***	Unit of Measure	Standard	Date - Data Approved (yyyy/mm/dd)
				U Untreated*	T Treated**					
				D Distribution						
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D					
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D					
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D					

Authorization

Signature X	Name Karen Warburton	Date YYYY MM DD 2004 05 11
----------------	-------------------------	----------------------------------

* Only for Drinking Water Systems that are not currently required under O.Reg.170/03 to treat their drinking-water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

Notice of Adverse Test Results and Other Problems
 Notice of Issue Resolution at Drinking Water Systems



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date May 16/04

Number of Pages 2 (including this page)

Subject: Adverse Water

AWOI# 25901 Issue Resolution
Cryder Well Supply Works 220008649

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
				CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: TC 1	
Oral Notification to SPILLS ACTION CENTRE				
Date	May 11/04	Time	16:35	AWQI Notification No (s)
Person Contacted		Valerie		
DWS Name		Crysler Well Supply		
DWS (Waterworks) #		220008649		
DWS Person Providing Oral Notification		Dave Markell		
		Phone #	(613) 448-3098	Fax # (613) 448-1616
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	May 11/04	Time	16:33	Resample/Re-test <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Person Contacted		Answering Machine		
		Disinfectant Restored/ Increased <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
		Flushing Mains/Pipes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Position		Users Advised to Boil/Seek Alternate <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Phone #	(800) 267-7120	Fax #	(613) 933-7930	OTHER - Describe:
DWS Person Providing Oral Notification		Dave Markell		
Initial DWS Notification Prepared by:		Dave Markell		
Signature	Dave Markell	Date	May 12/04	

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	May 14/04	Date Resolution Notice Provided:	May 17/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
<ul style="list-style-type: none"> - Resamples collected. - Results attached. 			
Prepared By:	Dave Markell	Signature:	Dave Markell
		Date:	May 17/04
For Ministry Use Only:		Report No.	

C.O.C.: C- 00552

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-10972

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 12-May-04

DATE REPORTED: 14-May-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	12-May-2004	12-May-2004	12-May-2004	12-May-2004	12-May-2004

Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-10972-1	12-May-04	< 1	23	< 1	--	--
Crysler Well No. 1 - Treated S Tap	B04-10972-2	12-May-04	< 1	--	< 1	2	1.56
25 Station Rd DS Tap	B04-10972-3	12-May-04	< 1	--	< 1	< 2	1.25

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
May 17 2004 8:28am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
May 17	8:26am	Fax Sent	1 613 933-7930	0:41	3	OK
May 17	8:27am	Fax Sent	1 800 268-6061	0:42	3	OK
May 17	8:28am	Fax Sent	1 416 314-5455	0:00	0	Cancel



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date Aug. 10/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# 30931

Cryphon 7500 HPC (220008649)

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
				CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)		Details: HPC > 500		
Oral Notification to SPILLS ACTION CENTRE				
Date Aug 10/04	Time 10:26	AWQI Notification No (s) 30931		
Person Contacted Micheala		DWS EMERGENCY CONTACT		
DWS Name Cryster		Name Dave Markell		
DWS (Waterworks) # 220008649		Position Process Tech		
DWS Person Providing Oral Notification Dave Markell		Phone # (613) 448-3098	Fax # (613) 449-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date Aug 10/04	Time 10:20	Resample/Re-test		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Person Contacted Adalia		Disinfectant Restored/ Increased		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
		Flushing Mains/Pipes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Position Special Projects		Users Advised to Boil/Seek Alternate		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Phone # (800) 367-7120	Fax # (613) 933-7930	OTHER - Describe:		
DWS Person Providing Oral Notification Dave Markell		Other information attached <input type="checkbox"/>		
Initial DWS Notification Prepared by: Dave Markell				
Signature Dave Markell		Date Aug 10/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:	Signature:	Date:
For Ministry Use Only:		Report No.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Aug 10 2004 10:50am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Aug 10	10:48am	Fax Sent	1 613 933-7930	0:32	2	OK
Aug 10	10:49am	Fax Sent	1 800 268-6061	0:34	2	OK
Aug 10	10:50am	Fax Sent	1 416 314-5455	0:53	2	OK



Ministry of the Environment / Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg. 170/03

NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS and NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
Water Quality		CofA/Order <input type="checkbox"/> Exceeds Limit		
Oral Notification to SPILLS ACTION CENTRE				
Person Contacted: Karen		Date: 2004/08/10		Time: 10:45
Person Notifying: Yuliana Kang		AWQI Notification No (s) 30933		
Laboratory Name: Caduceon Environmental Labs		Laboratory Emergency Contact Name Krystyna Pipin		
Address: 2378 Holly Lane Ottawa		Position: Lab Supervisor		
Telephone # of Lab (613) 526-0123		Phone # (613) 526-0123		Fax # (613) 526-1244
Drinking-Water System (DWS) Name: Chrysler WTP		DWS Emergency Contact: OCWA		
DWS (Waterworks) # 220608649		Name: Dave Markell		
Location: Chrysler Well No. 1 Treated		Position:		
Telephone # of DWS (613) 448-3098		Phone # (613) 448-3098		Fax # (613) 448-1616
Oral Notification to Drinking-Water System Owner		Oral Notification to Local Medical Officer of Health		
Person Contacted: Dave Markell		Person Contacted: Idalia		
Position:		Position:		
Date: 2004/08/10		Time: 9:50		Date: 2004/08/10
Time: 10:00				
Laboratory Written Notification Prepared by: Yuliana Kang (Lab Results must be attached using Section 3 of this form)				
Signature: [Signature]		Date: 2004/08/10		



Ministry of the
Environment

Drinking-Water Systems Regulation O. Reg 170/03

Adverse Analytical Results

For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Membrane Filtration Count / 100 mL			P-A / 100mL Confirmed	HPC / mL	Date - Data Approved (yyyy/mm/dd)
				Unfiltered* Treated** Distribution	Coliforms	Total Coliforms	E. Coli	EC			
30933		BC4-19310-2	2004/08/10	Canister drinking water not treated						> 500	2004/08/10

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CoFA or Order

Physical/Chemical/Radiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Parameter	Result(s)**	Unit of Measure	Standard	Date - Data Approved (yyyy/mm/dd)
				Unfiltered* Treated** Distribution	D					

Authorization

Signature	Name	Date
X	Juliana Kang	yyyymmdd 20040810

* Only for Drinking Water Systems that are not currently required under O.Reg.170/03 to treat their drinking water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

Notice of Adverse Test Results and Other Problems
Notice of Issue Resolution at Drinking Water Systems

(PIBS 4444E Version February 3, 2004)



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date Aug. 13/04

Number of Pages 3 (including this page)

Subject: Adverse Water

AWOI# 30931

Cryslin 7500 HPC (220008649)
Issue Resolution

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
				CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: HPC > 500	
Oral Notification to SPILLS ACTION CENTRE				
Date	Aug 10/04	Time	10:26	AWQI Notification No (s)
Person Contacted		DWS EMERGENCY CONTACT		
DWS Name		Name		
DWS (Waterworks) #		Position		
DWS Person Providing Oral Notification		Phone #	Fax #	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	Aug 10/04	Time	10:20	Resample/Re-test
Person Contacted		Disinfectant Restored/ Increased		
Position		Flushing Mains/Pipes		
Phone #		Users Advised to Boil/Seek Alternate		
Fax #		OTHER - Describe:		
DWS Person Providing Oral Notification		Other information attached <input type="checkbox"/>		
Initial DWS Notification Prepared by:				
Signature		Date		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Aug 13/04	Date Resolution Notice Provided:	Aug 13/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
<ul style="list-style-type: none"> - Resamples Collected. - Raw Collected for upstream sample but > 500 HPC - Treated & Downstream OK. Raw NOT Reportable. 			
Prepared By:	Signature:	Date:	
For Ministry Use Only:	Report No.		

CADUCEON™ CERTIFICATE OF ANALYSIS

ENVIRONMENTAL LABORATORIES

Final Report

C.O.C.: C-00869

REPORT No. B04-19616

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 11-Aug-04

JOB/PROJECT NO.: Crysler WTP

DATE REPORTED: 13-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	11-Aug-2004	11-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
Crysler Well No. 1 - Raw	B04-19616-1	10-Aug-04	> 500	--		
Crysler Well No. 1 - Treated	B04-19616-2	10-Aug-04	2	1.5		
Tower	B04-19616-3	10-Aug-04	204	1.1		

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Aug 13 2004 4:05pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Aug 13	4:01pm	Fax Sent	1 613 933-7930	0:43	3	OK
Aug 13	4:02pm	Fax Sent	1 800 268-6061	0:42	3	OK
Aug 13	4:03pm	Fax Sent	1 416 314-5455	1:12	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date Sept 22/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# 33175
HPC > 500
CRYSLER WATER

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
				CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: HPC > 500	
Oral Notification to SPILLS ACTION CENTRE				
Date	Time	AWQI Notification No (s)		
SEPT 22/04	0945	33175		
Person Contacted		DWS EMERGENCY CONTACT		
MARY				
DWS Name		Name		
CRYSLER WATER		DAVE MARKELL		
DWS (Waterworks) #		Position		
220008649		PROCESS & COMP. TECH		
DWS Person Providing Oral Notification		Phone #	Fax #	
BLAIR HENDERSON		(613) 448-3098	(613) 448-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	Time	Resample/Re-test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
SEPT. 22/04	0941			
Person Contacted		Disinfectant Restored/ Increased	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
ADALIA		Flushing Mains/Pipes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Position		Users Advised to Boil/Seek Alternate	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
SPECIAL PROJECTS		OTHER - Describe:		
Phone #	Fax #			
(800) 267-7120	(613) 933-7930			
DWS Person Providing Oral Notification		Other information attached <input type="checkbox"/>		
BLAIR HENDERSON				
Initial DWS Notification Prepared by: BLAIR HENDERSON				
Signature		Date		
Blair Henderson		SEPT. 22/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:	Signature:	Date:
For Ministry Use Only:		Report No.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Sep 22 2004 10:50am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Sep 22	10:47am	Fax Sent	1 613 933-7930	0:32	2	OK
Sep 22	10:48am	Fax Sent	1 800 268-6061	0:32	2	OK
Sep 22	10:49am	Fax Sent	1 416 314-5455	0:53	2	OK

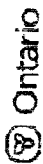

 Ministry of the Environment
 Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg. 170/03

NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS
and
NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse Micro <input checked="" type="checkbox"/> Exceeds Standard Phys/Chem <input type="checkbox"/> Exceeds Standard Radiological <input type="checkbox"/> Exceeds Standard Water Quality CofA/Order <input type="checkbox"/> Exceeds Limit	
Oral Notification to SPILLS ACTION CENTRE	
Person Contacted: Emily Stewart	Date: 2004/09/22 Time: 09:30
Person Notifying: Yuliana Kang	AWQI Notification No (s) 33175
Laboratory Name: Caduceon Environmental Laboratories	Laboratory Emergency Contact Name: Krystyna Pipin
Address: 2378 Holly Lane, Ottawa	Position: Lab Supervisor
Telephone # of Lab (613) 526-0123	Phone # (613) 526-0123 Fax # (613) 526-1244
Drinking-Water System (DWS) Name: Crysler	DWS Emergency Contact: OCWA
DWS (Waterworks) # 220008649	Name: Dave Markell
Location: Well No. 1	Position:
Telephone # of DWS (613) 448-3098	Phone # (613) 448-3098 Fax # (613) 448-1616
Oral Notification to Drinking-Water System Owner	
Person Contacted: Kim Baker	Person Contacted: Idalia
Position:	Position:
Date: 2004/09/22 Time: 09:15	Date: 2004/09/22 Time: 09:21
Laboratory Written Notification Prepared by: (Lab Results must be attached using Section 3 of this form) Yuliana Kang	
Signature:	Date: 2004/09/22



Ministry of the
Environment & Climate Change

Drinking-Water Systems Regulation O. Reg 170/03

Adverse Analytical Results

For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Membrane Filtration Count / 100 mL				P-A / 100mL Confirmed	HPC / 1mL	Date - Data Approved (yyyy/mm/dd)
				Total Coliforms	Total Coliform Background	E. Coli	FC			
33175		B04-23257-2	2004/09/20	U T D	Crysler Well No. 1	U T D	EC FC	TC EC FC	>500	2004/09/22

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CoIA or Order

Physical/Chemical/Radiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Parameter	Result(s)**	Unit of Measure	Standard	Date - Data Approved (yyyy/mm/dd)
				U T D	U T D					
				U T D	U T D					

Authorization

Signature 

Name
Yuliana Kang

Date

YYYY
2004

MM
09

DD
22

* Only for Drinking Water Systems that are not currently required under O. Reg. 170/03 to treat their drinking-water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

Notice of Adverse Test Results and Other Problems
Notice of Issue Resolution at Drinking Water Systems

(PIBS-4444E Version February 3, 2004)



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date Sept ~~22/04~~ 27/04

Number of Pages 4 (including this page)
Subject: Adverse Water

AWOI# 33175 Issue Resolution.
HPC > 500
CRYSLER WATER

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard	CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: HPC > 500		
Oral Notification to SPILLS ACTION CENTRE					
Date	Time	AWQI Notification No (s)			
SEPT 22/04	0945	33175			
Person Contacted			DWS EMERGENCY CONTACT		
MARY			Name		
DWS Name			DAVE MARKELL		
DWS (Waterworks) #			Position		
220008649			PROCESS & COMP. TECH		
DWS Person Providing Oral Notification			Phone #	Fax #	
BLAIR HENDERSON			(613) 448-3098	(613) 448-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	Time	Resample/Re-test		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
SEPT. 22/04	0941				
Person Contacted		Disinfectant Restored/ Increased		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
ADALIA		Flushing Mains/Pipes		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Position		Users Advised to Boil/Seek Alternate		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
SPECIAL PROJECTS					
Phone #	Fax #	OTHER - Describe:			
(800) 267-7120	(613) 933-7930				
DWS Person Providing Oral Notification			Other information attached <input type="checkbox"/>		
BLAIR HENDERSON					
Initial DWS Notification Prepared by:					
BLAIR HENDERSON					
Signature			Date		
Blair Henderson			SEPT. 22/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:
Sept. 24 104	Sept. 27/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)	
<ul style="list-style-type: none"> - Resamples. Collected. - Results Attached. 	
Prepared By:	Signature:
Dave Markell	Dave Markell
Date:	
Sept. 27/04	
For Ministry Use Only:	Report No.

C.O.C.: C-01044

REPORT No. B04-23654

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 22-Sep-04

DATE REPORTED: 24-Sep-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Crysler WTP

P.O. NUMBER: -

WATERWORKS NO. 220008649

Parameter Name:			Total Coliform	E coli	Background	Total Coliform	E coli
Units:			cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:			1	1	1	1	1
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:			22-Sep-2004	22-Sep-2004	22-Sep-2004	22-Sep-2004	22-Sep-2004
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-23654-1	22-Sep-04	2	< 1	1	--	--
Crysler Well No. 1 - Treated	B04-23654-2	22-Sep-04	--	--	--	< 1	< 1
Water Tower	B04-23654-3	22-Sep-04	--	--	--	< 1	< 1

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-01044

REPORT No. B04-23654

Report To:

Ontario Clean Water Agency - Crysler
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 22-Sep-04

JOB/PROJECT NO.: Crysler WTP

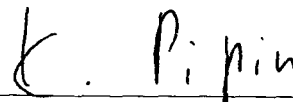
DATE REPORTED: 24-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 220008649

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1 mL	mg/L			
M.D.L.:			2	0.01			
Reference Method:			MOE E3371	n/a			
Date Analyzed:			22-Sep-2004	22-Sep-2004			
Client I.D.	Sample I.D.	Date Collected					
Crysler Well No. 1 - Raw	B04-23654-1	22-Sep-04	--	--			
Crysler Well No. 1 - Treated	B04-23654-2	22-Sep-04	< 2	1.32			
Water Tower	B04-23654-3	22-Sep-04	< 2	1.23			



Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from
Caduceon Environmental Laboratories.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Sep 27 2004 11:39am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Sep 27	11:35am	Fax Sent	1 613 933-7930	0:53	4	OK
Sep 27	11:36am	Fax Sent	1 800 268-6061	0:53	4	OK
Sep 27	11:37am	Fax Sent	1 416 314-5455	1:29	4	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date Sept 30/04

Number of Pages 3 (including this page)
Subject: Adverse Water

AWOI# 33547

Crypin

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard	CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: BACKGROUND >2400		
Oral Notification to SPILLS ACTION CENTRE					
Date SEPT. 29/04		Time 15:58		AWQI Notification No (s) 33547	
Person Contacted Nicole			DWS EMERGENCY CONTACT		
DWS Name CRYSLER WATER		Post office		Name Dave Markell	
DWS (Waterworks) # 260008649		Position Process Tech			
DWS Person Providing Oral Notification DAVE MARKELL			Phone # (613) 448-3098		Fax # (613) 449-1616
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date SEPT. 29/04		Time 15:50		Resample/Re-test <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Person Contacted Idalia		Disinfectant Restored/ Increased <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Flushing Mains/Pipes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Position Special Projects		Users Advised to Boil/Seek Alternate <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		OTHER - Describe:	
Phone # (800) 267-7120		Fax # (613) 933-7930		Other information attached <input type="checkbox"/>	
DWS Person Providing Oral Notification DAVE MARKELL					
Initial DWS Notification Prepared by: DAVE MARKELL					
Signature Dave Markell			Date SEPT. 29/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved: Sept. 29/04		Date Resolution Notice Provided: Sept. 30/04	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
<ul style="list-style-type: none"> - Lab Error - Letter Attached. 			
Prepared By: Dave Markell		Signature: Dave Markell	
Date: Sept. 30/04			
For Ministry Use Only:		Report No.	



185 Concession Street, Postal Bag 4300
Lakefield, Ontario, Canada K0L 2H0
Tel. (705) 652-2038 Fax (705) 652-6441

September 30, 2004

Mr. Dave Markell
O.C.W.A.
P.O. Box 460
Chesterville, ON
K0L 1H0

FAX: 613-448-1616

Dear Mr. Markell:

Re: Reporting Error – incorrect reporting of adverse on drinking water samples

On behalf of SGS Lakefield Research, I would like to apologize for incorrectly reporting adverse results for samples from Crysler WTP, Winchester WTP, Moose Creek WTP and Avonmore Medical Centre. All of the samples were reported to have had a background count greater than 2400 cfu/100mL. Upon further investigation these samples were found to have a large amount of particulate matter that resembles background growth. A wet mount then confirmed this for the substance found on the filters. SAC and the public health unit have been notified of our error and exceedences have been cancelled.

As with every laboratory error, a quality action form has been issued to track the error, provide an explanation and a resolution to prevent the error from recurring.

We apologize for any inconvenience this may have caused and will make every effort to prevent it from happening again. Client satisfaction and quality assurance are SGS Lakefield Research's primary focus. If you have any concerns in the future with any of our services please contact me at (705) 652-2006 or by e-mail at dgriffin@sgslakefield.com or contact, Deborah Masson-Stogran, Manager, Environmental Analytical Services at (705) 652-2041, dstogran@lakefield.com.

Best Regards,

Diane Griffin
Quality Control Coordinator - Environmental
SGS Lakefield Research Ltd.

cc: Carrie Greenlaw
Joanne Williams
Deborah Masson-Stogran

Confidential

The document(s) with this transmission is for the addressed party only and contains privileged/confidential information. Unauthorized disclosure or copying is strictly prohibited.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Sep 30 2004 3:26pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Sep 30	3:21pm	Fax Sent	1 613 933-7930	0:46	3	OK
Sep 30	3:22pm	Fax Sent	1 800 268-6061	0:45	3	OK
Sep 30	3:25pm	Fax Sent	1 416 314-5455	1:26	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date Sept 30/04

Number of Pages 3 (including this page)
Subject: Adverse Water

AWOI# 33546

Crysler

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard	CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: BACKGROUND > 2400		
Oral Notification to SPILLS ACTION CENTRE					
Date SEPT. 29/04		Time 15:54		AWQI Notification No (s) 33546	
Person Contacted Nicole			DWS EMERGENCY CONTACT		
DWS Name CRYSLER WATER SPS			Name Dave Markell		
DWS (Waterworks) # 220008649			Position Process Tech		
DWS Person Providing Oral Notification DAVE MARKELL			Phone # (613) 448-3098		Fax # (613) 449-1616
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date SEPT. 29/04		Time 15:50		Resample/Re-test <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Person Contacted Idalia			Disinfectant Restored/ Increased <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			Flushing Mains/Pipes <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Position Special Projects			Users Advised to Boil/Seek Alternate <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
Phone # (800) 267-7720		Fax # (613) 933-7930		OTHER - Describe:	
DWS Person Providing Oral Notification DAVE MARKELL			Other information attached <input type="checkbox"/>		
Initial DWS Notification Prepared by: DAVE MARKELL					
Signature Dave Markell			Date SEPT. 29/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved: Sept. 29/04		Date Resolution Notice Provided: Sept. 30/04	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
<ul style="list-style-type: none"> - Lab Error - Letter Attached. 			
Prepared By: Dave Markell		Signature: Dave Markell	
		Date: Sept. 30/04	
For Ministry Use Only:		Report No.	



185 Concession Street, Postal Bag 4300
Lakefield, Ontario, Canada K0L 2H0
Tel. (705) 652-2038 Fax (705) 652-6441

September 30, 2004

Mr. Dave Markell
O.C.W.A.
P.O. Box 460
Chesterville, ON
K0L 1H0

FAX: 613-448-1616

Dear Mr. Markell:

Re: Reporting Error – incorrect reporting of adverse on drinking water samples

On behalf of SGS Lakefield Research, I would like to apologize for incorrectly reporting adverse results for samples from Crysler WTP, Winchester WTP, Moose Creek WTP and Avonmore Medical Centre. All of the samples were reported to have had a background count greater than 2400 cfu/100mL. Upon further investigation these samples were found to have a large amount of particulate matter that resembles background growth. A wet mount then confirmed this for the substance found on the filters. SAC and the public health unit have been notified of our error and exceedences have been cancelled.

As with every laboratory error, a quality action form has been issued to track the error, provide an explanation and a resolution to prevent the error from recurring.

We apologize for any inconvenience this may have caused and will make every effort to prevent it from happening again. Client satisfaction and quality assurance are SGS Lakefield Research's primary focus. If you have any concerns in the future with any of our services please contact me at (705) 652-2006 or by e-mail at dgriffin@sgslakefield.com or contact, Deborah Masson-Stogran, Manager, Environmental Analytical Services at (705) 652-2041, dstogran@lakefield.com.

Best Regards,

Diane Griffin
Quality Control Coordinator - Environmental
SGS Lakefield Research Ltd.

cc: Carrie Greenlaw
Joanne Williams
Deborah Masson-Stogran

Confidential

The document(s) with this transmission is for the addressed party only and contains privileged/confidential information. Unauthorized disclosure or copying is strictly prohibited.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Sep 30 2004 3:10pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Sep 30	3:06pm	Fax Sent	1 613 933-7930	0:00	0	No answer
Sep 30	3:07pm	Fax Sent	1 800 268-6061	0:45	3	OK
Sep 30	3:09pm	Fax Sent	1 416 314-5455	1:17	3	OK

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Sep 30 2004 3:16pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Sep 30	3:15pm	Fax Sent	16139337930	0:50	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date DEC 22/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# 51280

CRYSLER WELL SUPPLY

WORKS# 220008649

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) – WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
		CofA/Order <input type="checkbox"/> Exceeds Limit		
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: T.C. - 8	
Oral Notification to SPILLS ACTION CENTRE				
Date	Time	AWQI Notification No (s)		
DEC 22/04	11:35	51280		
Person Contacted		DWS EMERGENCY CONTACT		
ALIM KAHN				
DWS Name		Name		
CRYSLER WATER SYSTEM		DAVE MARKELL		
DWS (Waterworks) #		Position		
220008649		PROCESS TECH		
DWS Person Providing Oral Notification		Phone #	Fax #	
BLAIR HENDERSON		(613) 448-3098	(613) 448-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	Time	Resample/Re-test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
DEC 22/04	11:31			
Person Contacted		Disinfectant Restored/ Increased	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
ADALIA		Flushing Mains/Pipes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Position		Users Advised to Boil/Seek Alternate	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
SPECIAL PROJECTS		OTHER - Describe:		
Phone #	Fax #			
(800) 267-7120	(613) 933-7930			
DWS Person Providing Oral Notification		Other information attached <input type="checkbox"/>		
BLAIR HENDERSON				
Initial DWS Notification Prepared by: BLAIR HENDERSON				
Signature		Date		
Blair Henderson		Dec 22/04		

SECTION 2 (b) – NOTICE OF ISSUE RESOLUTION – Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:	Signature:	Date:
For Ministry Use Only:		Report No.


 Ministry of the Environment
 Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg 170/03

Adverse Analytical Results

For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Membrane Filtration Count / 100 mL				P-A / 100mL Confirmed	HPC / 1mL	Date - Data Approved (yyyy/mm/dd)	
				U	T	Total Coliforms	Total Coliform Background	E. Coli Fecal C.	EC FC				
				Untreated*									
				Treated**									
				D Distribution									
51280	CA17764-Dec04	7	4/12/20 @ 11:05	DW CRW 04 Tower	<input type="checkbox"/> U <input checked="" type="checkbox"/> T <input type="checkbox"/> D	8		<input type="checkbox"/> EC <input type="checkbox"/> FC	<input type="checkbox"/> TC <input type="checkbox"/> EC <input type="checkbox"/> FC		4/12/22		
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D			<input type="checkbox"/> EC <input type="checkbox"/> FC	<input type="checkbox"/> TC <input type="checkbox"/> EC <input type="checkbox"/> FC				
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D			<input type="checkbox"/> EC <input type="checkbox"/> FC	<input type="checkbox"/> TC <input type="checkbox"/> EC <input type="checkbox"/> FC				

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CofA or Order

Physical/Chemical/Radiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Parameter	Result(s)***	Unit of Measure	Standard	Date - Data Approved (yyyy/mm/dd)
				U	T					
				Untreated*						
				Treated**						
				D Distribution						
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D					
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D					
					<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D					

Authorization

Signature X <i>Maxine Elliott</i>	Name Maxine Elliott	Date YYYY MM DD 2004 12 22
--------------------------------------	------------------------	----------------------------------

* Only for Drinking Water Systems that are not currently required under O.Reg.170/03 to treat their drinking-water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.


 Ministry of the Environment
 Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg. 170/03
**NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS
 and
 NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS**
SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse Water Quality		Micro <input type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard	CofA/Order <input type="checkbox"/> Exceeds Limit
Oral Notification to SPILLS ACTION CENTRE					
Person Contacted: Angela		Date: December 22/04		Time: 11:50	
Person Notifying: Maxine Elliott		AWQI Notification No (s) 51280			
Laboratory Name: SGS Lakefield Research		Laboratory Emergency Contact Name Joanne Williams			
Address 185 Concession St., Lakefield, ON., K0L 2H0		Position Supervisor of Microbiology			
Telephone # of Lab (705) 652 - 2000		Phone # (705) 652-2131		Fax # (705) 652-6441	
Drinking-Water System (DWS) Name Crysler WTP		DWS Emergency Contact			
DWS (Waterworks) # 220008649		Name Dave Markell			
Location		Position			
Telephone # of DWS ()		Phone # (613) 448-3098		Fax # (613) 448-1616	
Oral Notification to Drinking-Water System Owner			Oral Notification to Local Medical Officer of Health		
Person Contacted Blair Henderson			Person Contacted Eastern Ont: Idalia Milan		
Position			Position FAX: 613-933-7930		
Date December 22/04		Time 11:16		Date December 22/04	
				Time 11:19	
Laboratory Written Notification Prepared by: Maxine Elliott (Lab Results must be attached using Section 3 of this form)					
Signature <i>Maxine Elliott</i>			Date December 22/04		

hp officejet 7110
printer/fax/scanner/copier

Fax-History Report for
OCWA
(613)448-1616
Dec 22 2004 11:53am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Dec 22	11:49am	Fax Sent	1(800)268-6061	0:00	0	No answer
Dec 22	11:51am	Fax Sent	1(416)314-5455	0:45	2	OK
Dec 22	11:53am	Fax Sent	1(613)933-7930	0:23	2	OK

hp officejet 7110
printer/fax/scanner/copier

Fax-History Report for
OCWA
(613)448-1616
Dec 22 2004 12:26pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Dec 22	12:25pm	Fax Sent	14163253011	0:40	2	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date DEC 29/04

Number of Pages 2 (including this page)

Subject: Adverse Water

AWOI# 51280 Issue Resolution.

CRYSLER WHEEL SUPPLY

WORKS# 220008649

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro <input checked="" type="checkbox"/> Exceeds Standard	Phys/Chem <input type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard	CofA/Order <input type="checkbox"/> Exceeds Limit
<input type="checkbox"/> Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: T.C. - 8		
Oral Notification to SPILLS ACTION CENTRE					
Date	DEC 22/04	Time	11:35	AWQI Notification No (s) 51280	
Person Contacted	AHIM KAHN			DWS EMERGENCY CONTACT	
DWS Name	CRYSLAR WATER SYSTEM			Name DAVE MARKELL	
DWS (Waterworks) #	220008649			Position PROCESS TECH	
DWS Person Providing Oral Notification	BLAIR HENDERSON			Phone #	(613) 448-3098
			Fax # (613) 448-1616		
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	DEC 22/04	Time	11:31	Resample/Re-test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Person Contacted	ADALIA			Disinfectant Restored/ Increased	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
			Flushing Mains/Pipes	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Position	SPECIAL PROJECTS			Users Advised to Boil/Seek Alternate	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Phone #	(800) 267-7120	Fax #	(613) 933-7930	OTHER - Describe:	
DWS Person Providing Oral Notification	BLAIR HENDERSON			Other information attached <input type="checkbox"/>	
Initial DWS Notification Prepared by: BLAIR HENDERSON					
Signature	Blair Henderson			Date	Dec 22/04

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Dec 24/04	Date Resolution Notice Provided:	Dec 24/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
- resamples collected. - results attached. - no T.C. detected.			
Prepared By:	Dave Markell	Signature:	Dave Markell
		Date:	Dec 24/04
For Ministry Use Only:		Report No.	

REPORT OF ANALYSIS

Report Number:	2424578
Date:	2004-12-23
Date Submitted:	2004-12-22
MOE DWIS UPLOAD:	2407902
Project:	Crysler

Supply Water

MDL = Method Detection Limit	INC = Incomplete	AO = Aesthetic Objective	OG = Operational Guideline	MAC = Maximum Allowable Concentration	IMAC = Interim Maximum Allowable Concentration
------------------------------	------------------	--------------------------	----------------------------	---------------------------------------	--

Krista C

Results relate only to the parameters tested on the samples submitted for analysis

hp officejet 7110
printer/fax/scanner/copier

Fax-History Report for
OCWA
(613)448-1616
Dec 24 2004 11:55am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Dec 24	11:52am	Fax Sent	1(613)933-7930	0:29	3	OK
Dec 24	11:53am	Fax Sent	1(800)268-6061	0:00	0	No answer
Dec 24	11:54am	Fax Sent	1(416)314-5455	0:59	3	OK

hp officejet 7110
printer/fax/scanner/copier

Fax-History Report for
OCWA
(613)448-1616
Dec 24 2004 11:58am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Dec 24	11:57am	Fax Sent	14163253011	0:42	3	OK
