



Environmental and Laboratory Services

Dover Location:

90 1/2 West Blackwell St., Dover, NJ 07801
Phone: (973) 989-0010, Fax (973) 989-0156

Marlboro Location:

8A Railroad Ave, Marlboro, NJ 07746
Phone: (732) 308-3500, Fax (732) 308-3503

Date: August 17, 2023
Client: Lake Conway
Address: 7 Meadow Ln
Vernon, NJ 07462

Analytical Results

Sample Matrix:	Lake	Lab Sample Number:	230816015-001
Sample Location:	Lake Conway Beach		
Sampled By:	S. Trojanowski		
Sample Date/Time:	8/15/2023	12:00	

Parameters	Method	Results	Units	NJDOH WQS	Date Analyzed	Time Analyzed	Analyst	Reporting Limit	Dilution Factor
E. Coli	Colilert-18 Multiwell	21	MPN/100ml	320	8/15/2023	15:49	THN	1	1

NJ Lab ID# 14013 (Dover)
NJ Lab ID# 13033 (Marlboro)

WQS = Water Quality Standard
cfu = colony forming units

Any method followed by an asterisk (*) was analyzed by the Agra-Marlboro laboratory.
All other methods, unless otherwise specified, were analyzed by the Agra-Dover laboratory.

I certify that these samples were analyzed in accordance with procedures approved by the New Jersey Department of Environmental Protection.

Michael J Furrey, President

August 17, 2023



CHAIN OF CUSTODY / SAMPLE ANALYSIS REQUEST

Customer Name:	Lake Conway	Report to:		Agra Environmental Services	# _____ Asc./HCl Vials pH: _____
Address:	7 Meadow Ln			90 ½ West Blackwell Street	# _____ HCl Vials pH: _____
	Vernon, NJ 07462			Dover, NJ 07801	# <u>1</u> Na ₂ S ₂ O ₃ Cl ₂ : _____
Project Location:				Phone: (973) 989-0010	# _____ HNO ₃ pH: _____
Customer Contact:				Fax: (973) 989-0156	# _____ H ₂ SO ₄ pH: _____
Phone - Work/Cell:					# _____ NaOH pH: _____
					# _____ unpreserved _____
					# _____ other _____
					# _____ other _____

Matrix Abbreviations: DW - Drinking water GW - Ground Water RAW-GW - DW RAW GW WW/NPW - Wastewater SL - Sludge P - Pool L - Lake Page 1 of 1

Project:	Collection	PWSID#							for laboratory use only	Field Analysis	
Sample ID	Location	Date	Time	Grab	Comp	Matrix	# of Bottles	Preservative	ANALYSIS REQUESTED	pH / Temp	Cl ₂ or PO ₄
<i>230816015</i>											
<i>001</i>	<i>Lake Beach</i>	<i>8/15/23</i>	<i>1200</i>	<i>X</i>		<i>L</i>	<i>1</i>	<i>Na2S2O3</i>	<i>E. coli</i>		

Sampled By (name/company):	Are these samples for compliance? (circle one): <u>Yes</u> or No	Indicate laboratory location where analysis request was performed
<i>S. Trojanowski</i>	NJDEP Laboratory Certification (Dover, NJ) #14013 NJDEP Laboratory Certification (Marlboro, NJ) #13033	
Reporting Requirements (Check Box):	Standard <input checked="" type="checkbox"/> <input type="checkbox"/> NJ Reduced <input type="checkbox"/> Other (Specify)	Cooler Temperature Upon Receipt at lab: <i>1.9</i>

Sample Custody Exchanges (Please use full legal signature)						Comments:
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	
<i>[Signature]</i>	<i>8/15/23</i>	<i>1505</i>	<i>[Signature]</i>	<i>8/15/23</i>	<i>1509</i>	
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	Date Faxed _____
						Invoice Number _____
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	Is sample known to be hazardous? (circle one) Yes or No