

Ryan Weers

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Main Number

Lab Report Fax No:

Lab Report Contact 1:

Lab Report Contact 2:

Customer ID No: 8799

Customer PO No:

Collected By: Client

Invoice No: 40604

Ron Weers Construction  
2076 5 Foske Ct.

Bucyrs, KS

## Report of Analysis

Laboratory Report ID No:

**17054**

### Project Name:

Item No.	Cat NO	ANALYSIS	COLLECTED	ANALYZED	REPORTING LIMIT	RESULTS
	Line NO	SAMPLE TYPE	SAMPLE SITE NOTES		TEST METHOD	
1	6191	Bacteria, P/A E. Coli	6/5/18	6/5/18	1	ABSENT
	102935		FIRE COLEMAN D1		SM9223 B	
2	6191	Bacteria, P/A E. Coli	6/6/18	6/6/18	1	ABSENT
	102937		FIRE COLEMAN D2		SM9223 B	
3	6190	Bacteria, P/A T. Coliform	6/5/18	6/5/18	1	ABSENT
	102934		FIRE COLEMAN D1		SM9223 B	
4	6190	Bacteria, P/A T. Coliform	6/6/18	6/6/18	1	ABSENT
	102936		FIRE COLEMAN D2		SM9223 B	

### Comments, if present, concern this Lab Work Order:

The reported analytical results relate only to the sample submitted.

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