



ANALYTICAL REPORT

2323 Fourth Street
P.O. Box 483
Peru, Illinois 61354
815-224-1650
800-659-4659
FAX 815-224-1688
www.testinc.com

December 04, 2024

Attn: Brian Trainor
Marseilles
209 Lincoln Street
Marseilles, IL 61341

Work Order Number: 24120015

Dear Brian Trainor,

Enclosed are the results of analyses for samples received by TEST, Inc. on 12/2/2024.

All testing conforms to the applicable TNI Standards and the laboratory's Quality Manual where applicable, unless otherwise noted in the report.

This final Analytical Report consists of this cover letter, case narrative, laboratory results, and any accompanying documentation including, but not limited to chain of custody records.

This report may not be reproduced except in full without prior written approval from TEST, Inc.

If you have any questions regarding these test results, please do not hesitate to contact me at (815) 224-1650 or (800) 659-4659.

Sincerely,

Tobi McCauley
Laboratory Manager
Total Environmental Service Technologies, Inc.





Reported To:

Brian Trainor
Marseilles
209 Lincoln Street
Marseilles, IL 61341

Project: IL0990500 - Routine Coliform
P.O. No.:

Reported Samples

Lab ID	Sample	Matrix	Qualifiers	Date Sampled	Date Received
24120015-09	WL11484	Drinking Water		12/02/2024	12/02/2024
24120015-08	WL11483	Drinking Water		12/02/2024	12/02/2024
24120015-07	C006001A3	Drinking Water		12/02/2024	12/02/2024
24120015-06	C005001P2	Drinking Water		12/02/2024	12/02/2024
24120015-05	C004001P1	Drinking Water		12/02/2024	12/02/2024
24120015-04	C003001A5	Drinking Water		12/02/2024	12/02/2024
24120015-03	C002001P2	Drinking Water		12/02/2024	12/02/2024
24120015-02	C001001P2	Drinking Water		12/02/2024	12/02/2024
24120015-01	TP05	Drinking Water		12/02/2024	12/02/2024



Reported To:

Brian Trainor
 Marseilles
 209 Lincoln Street
 Marseilles, IL 61341

Project: IL0990500 - Routine Coliform
P.O. No.:

Laboratory Results

Sample: TP05 24120015-01 [Drinking Water] Finished **Collected 12/02/24 10:45**

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
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General Chemistry Analyses

Chlorine, Free	1.4		0.020	mg/L	12/2/24 10:45	C	4500CL-G
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Microbiological Analyses

E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA

Sample: C001001P2 24120015-02 [Drinking Water] Distribution **Collected 12/02/24 09:15**

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
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General Chemistry Analyses

Chlorine, Free	0.80		0.020	mg/L	12/2/24 9:15	C	4500CL-G
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Microbiological Analyses

E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA

Sample: C002001P2 24120015-03 [Drinking Water] Distribution **Collected 12/02/24 09:35**

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
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General Chemistry Analyses

Chlorine, Free	1.2		0.020	mg/L	12/2/24 9:35	C	4500CL-G
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Microbiological Analyses

Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA

Sample: C003001A5 24120015-04 [Drinking Water] Distribution **Collected 12/02/24 09:50**

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
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General Chemistry Analyses

Chlorine, Free	1.0		0.020	mg/L	12/2/24 9:50	C	4500CL-G
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Reported To:

Brian Trainor
 Marseilles
 209 Lincoln Street
 Marseilles, IL 61341

Project: IL0990500 - Routine Coliform
P.O. No.:

Laboratory Results
 (Continued)

Sample: C003001A5 24120015-04 [Drinking Water] Distribution (Continued) **Collected**
12/02/24 09:50

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
Microbiological Analyses							
E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA

Sample: C004001P1 24120015-05 [Drinking Water] Distribution **Collected**
12/02/24 10:35

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
General Chemistry Analyses							
Chlorine, Free	1.2		0.020	mg/L	12/2/24 10:35	C	4500CL-G
Microbiological Analyses							
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA

Sample: C005001P2 24120015-06 [Drinking Water] Distribution **Collected**
12/02/24 10:25

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
General Chemistry Analyses							
Chlorine, Free	1.2		0.020	mg/L	12/2/24 10:25	C	4500CL-G
Microbiological Analyses							
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA

Sample: C006001A3 24120015-07 [Drinking Water] Distribution **Collected**
12/02/24 09:25

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
General Chemistry Analyses							
Chlorine, Free	1.2		0.020	mg/L	12/2/24 9:25	C	4500CL-G
Microbiological Analyses							
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA



Reported To:

Brian Trainor
 Marseilles
 209 Lincoln Street
 Marseilles, IL 61341

Project: IL0990500 - Routine Coliform
P.O. No.:

Laboratory Results
 (Continued)

Sample: C006001A3 24120015-07 [Drinking Water] Distribution (Continued) **Collected**
12/02/24 09:25

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
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Microbiological Analyses (Continued)

E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
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Sample: WL11483 24120015-08 [Drinking Water] Raw **Collected**
12/02/24 11:00

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
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Microbiological Analyses

E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA

Sample: WL11484 24120015-09 [Drinking Water] Raw **Collected**
12/02/24 10:15

Analyte	Result	Qual	Reporting Limit	Units	Date Analyzed	Analyst	Method
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Microbiological Analyses

E. Coli by Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA
Total Coliform 24 hr Colilert	Absent		1.00	N/A	12/2/24 12:45	MMB	9223B-PA



Reported To:

Brian Trainor
Marseilles
209 Lincoln Street
Marseilles, IL 61341

Project: IL0990500 - Routine Coliform
P.O. No.:

Certified Analyses included in this Report

Analyte	CAS #	Certifications
9223B-PA in Drinking Water		
E. Coli by Colilert		IDPH 17518
Total Coliform 24 hr Colilert		IDPH 17518



Reported To:

Brian Trainor
Marseilles
209 Lincoln Street
Marseilles, IL 61341

Project: IL0990500 - Routine Coliform
P.O. No.:

Notes and Definitions

Item	Definition
Dry	Sample results reported on a dry weight basis.
ND	Analyte NOT DETECTED at or above the reporting limit.

Coliform Analysis Report Form

Facility No: 0990500

Facility Name: City of Marseilles

Sampling Period: 12/1/24 to 12/31/24

Certified Laboratory Number: 17518

Laboratory Name: T.E.S.T. Inc.

Date and Time in Lab: 12/20/24 11:50

Accepted By: MB

Date and Time Analyzed: 12/2/24 12:45

Surface Supply: YES NO

Chlorine Exempt Supply: YES NO

Samples must reach laboratory within 30 hours after collecting

1. Mail Water Supply Copy To:				3. Date Collected: <u>12/2/24</u>								
Name: <u>City of Marseilles</u>				4. Sample Collector: <u>Ryan Owens</u>								
Address: <u>209 Lincoln Street</u>			Post Office Box:			5. Sample Purpose:						
City: <u>Marseilles</u>			State: <u>IL.</u>		Zip Code: <u>61341</u>		<input checked="" type="checkbox"/> Routine <input type="checkbox"/> Replacement <input type="checkbox"/> Inv. Replacement <input type="checkbox"/> Boil Order <input type="checkbox"/> New Construction Permit No. _____ FY _____ <input type="checkbox"/> Repeat <input type="checkbox"/> Other: _____					
2. Contact Person for Unsatisfactory Results:				Orig Sample Lab No. _____ Orig Sample Lab No. _____								
Name: <u>Brian Trainor</u>		Phone Number (Include Area Code): <u>815-795-0215</u>		Orig Sample Lab No. _____ Orig Sample Lab No. _____								
6. Bacteriological Sampling			Sample Type	Time Collected	Residual Chlorine		7. Colonies Read	8. Total Coliform	9. E-Coli	10. Fecal Coliform	11. Opinion	12. Laboratory Sample Number
Btl. No.	Sample Site Number	Address: Repeat Sample			Free	Total						
1	TP 05	Wellsite #4	F	10:45	1.4	///////		N	N		S	24120015-01
2	C001001P2	880 Commercial	D	9:15	0.80	///////		N	N		S	24120015-02
3	C002001P2	209 Lincoln Str	D	9:35	1.2	///////		N	N		S	24120015-03
4	C003001A5	1195 Morris Rd	D	9:50	1.0	///////		N	N		S	24120015-04
5	C004001P1	1025 Tower Cir.	D	10:35	1.2	///////		N	N		S	24120015-05
6	C005001P2	196 Walnut Str.	D	10:25	1.2	///////		N	N		S	24120015-06
7	C006001A3	Clark-Sycamore	D	9:25	1.2	///////		N	N		S	24120015-07
8	11483	Well #4	R	11:00	///////	///////		N	N		S	24120015-08
9	11484	Well #5	R	10:15	///////	///////		N	N		S	24120015-09

Note: Completed report must be retained for minimum of five years. When contacting the Agency regarding any of these samples, be sure to list the facility number, sampling site number(s), and date collected to identify the sample.

Important: This report must be mailed to:
 ILLINOIS ENVIRONMENTAL PROTECTION AGENCY
 COMPLIANCE ASSURANCE SECTION
 DRINKING WATER COMPLIANCE UNIT #19
 P.O. BOX 19276
 SPRINGFIELD, IL 62794-9276

Method: MF Colilert

Reported By: MB Date: 12/3/24

Person Notified: _____ Date: / /

No. of Bottles: _____ Sent: _____ Date: / /

Reason for Replacement:
 Samples more than 30 hours old
 No Date / Time of collection
 Other: _____