



Colorado Department  
of Public Health  
and Environment

**Haloacetic Acids Certified Laboratory Report Form**  
**WQCD - Drinking Water CAS**  
Submit Online at <http://www.wqcdcompliance.com/login>

Revision: 4/13/2015

**HAA5**

Section I (to be completed by the Public Water Systems only)					Section II (to be completed by Laboratories only)					
Public Water System Information					Laboratory Information					
PWSID#: CO0115685			Facility ID: DS001		Laboratory ID: CO015					
System Name: Rogers Mesa Domestic Water					Laboratory Name: Colorado Analytical Laboratory					
Contact Person: James Firor			Phone #:		Contact Person: Customer Service			Phone: 303-659-2313		
Comments:					Comments:					
Section III (Supplied or Completed by PWS)			Section IV (Supplied or Completed by Certified Laboratory)							
Sample Date	Sample Pt ID On Schedule	Address - Location	Lab Receipt Date	Lab Analysis Date	Laboratory Sample ID #	Analyte	Analytical Method	MCL (ug/L)	Lab MRL (ug/L)	Result (ug/L)
10/21/24	DBP001	SM2	10/23/24	10/30/24	241023056-01	Monochloroacetic Acid	EPA 552.2	N/A	2.0	BDL
						Monobromoacetic Acid	EPA 552.2	N/A	1.0	BDL
						Dichloroacetic Acid	EPA 552.2	N/A	1.0	15.80
						Trichloroacetic Acid	EPA 552.2	N/A	1.0	21.50
						Dibromoacetic Acid	EPA 552.2	N/A	1.0	BDL
Total Haloacetic Acids						EPA 552.2	60	1.0	37.3	

NT: Not Tested  
Lab MRL: Laboratory Minimum Reporting Level  
BDL: Below Laboratory MRL. A less than (<) may also used.

ug/L: Micrograms per Liter  
MCL: Maximum Contaminant Level

# Drinking Water Chain of Custody



<b>Report To Information</b>		<b>Bill To Information (If different from report to)</b>		<b>Project Information</b>	
Company Name: <u>Rogers Mesa Domest</u>		Company Name: <u>RMPWC</u>		PWSID:	
Contact Name: <u>James Fira</u>		Contact Name: <u>Diane Perry</u>		System Name:	
Address: <u>PO Box 428</u>		Address: <u>PO Box 428</u>		Compliance Samples: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
City: <u>Hatchkiss</u> State: <u>CO</u> Zip: <u>81419</u>		City: <u>Hatchkiss</u> State: <u>CO</u> Zip: <u>81419</u>		Send Results to CDPHE: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Phone: <u>970 424-2409</u>		Phone: <u>970 424-2250</u>		Task Number (Lab Use Only)  <b>CAL Task</b> <b>241023056</b>  <b>RMB</b>	
Email: <u>badrabit@tds.net</u>		Email: <u>rogersmesadomesticwater@gmail.com</u>			
Sample Collector: <u>JF</u>		PO Number:			
Sample Collector Phone: <u>same</u>					

**Commerce City Lab**  
10411 Heinz Way  
Commerce City CO 80640

**Lakewood Service Center**  
610 Garrison Street, Unit E  
Lakewood CO 80215

Phone: 303-659-2313

[www.coloradolab.com](http://www.coloradolab.com)

	PHASE I, II, V Drinking Water Analyses (check requested analysis)	Subcontract Analyses
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Date	Time	Client Sample ID / Sample Pt ID	No. of Containers	Residual Chlorine (mg/L) P/A Samples Only	Total Coliform P/A	504.1 EDB/DBCP	505 Pests/PCBs	515.4 Herbicides	524.2 VOCs	525.2 SOCs-Pest	531.1 Carbamates	547 Glyphosate	548.1 Endothal	549.2 Diquat	524.2 TTHMs	552.2 HAA5s	Lead/Copper	Nitrate	Nitrite	Fluoride	Inorganics	Alk./Lang. Index (Circle)	TOC, DOC (Circle)	SUVA, UV 254 (Circle)	Gross Alpha/Beta	Radium 226/228	Radon	Uranium	Chlorite					
10/21/24	12:40	DBP-1 / SM2													✓	✓																		

<b>Instructions:</b>				C/S Info:				Seals Present Yes <input type="checkbox"/> No <input type="checkbox"/> Headspace Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>							
Relinquished By: <u>James Fira</u>				Date/Time: <u>10/21/10:45</u>				Received By: _____				Date/Time: _____			
Delivered Via: <u>UPS</u>				C/S Charge: <input checked="" type="checkbox"/>				Temp: <u>8</u> °C/Ice <u>Y</u>				Sample Pres. Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>			
Relinquished By: _____				Date/Time: _____				Received By: <u>Adama</u>				Date/Time: <u>10/23/24</u>			

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