

**Arizona Department of Environmental Quality  
Revised Total Coliform Rule Distribution System Monitoring  
Drinking Water Microbiological Analysis Report**

PWS ID Number: AZ 04 -09075	PWS Name: Misty Mountain DWID
Sample Date: 10/15/24	Owner / Contact Person: Trevor Deming
Sample Time (24-hr. clock): 1015	Phone Number: 520-827-9417

Special Purpose Sample for state information only (NOT FOR COMPLIANCE)

**Repeat Samples Only – Check One**  
Use if Initial Sample was Positive

Lab Specimen ID # of Initial Sample \_\_\_\_\_

- Original Location (Distribution System)
- Upstream Location (Distribution System)
- Downstream Location (Distribution System)
- Dual Purpose Sample Taken at Well  
(raw water) Must have regulatory agency approval

Well 55- \_\_\_\_\_ Cl<sub>2</sub> \_\_\_\_\_ mg/L (Not for MRDL reporting)

<b>Location ID:</b> RTCR-001
<b>Sampling Site/ Tap Location:</b> 9233 Misty Mountain Lane

- Report to ADEQ 10/22/24
- Do not report to ADEQ/EPA
- Report to EPA  
Initial \_\_\_\_\_

**Microbiological Analysis (To be filled out by lab personnel)**

Lab Specimen ID	3100 Total Coliform		3014 E. coli		Analysis Start		Analysis Complete	
	Method	Result	Method	Result	Date	Time	Date	Time
CH 24 - 1750	9223B	A	<del>9223B</del>	<del></del>	10/15/24	1245	10/16/24	1245
			9223B					

*If reporting for Ground Water Rule, Dual Purpose (raw water sample), must use method that provides E. coli as a result, and specify is E. Coli if detected.*

*In the case of any E. coli detect, contact your RTCR ADEQ contact by the end of the business day (5pm)*

**Laboratory Information (To be filled out by lab personnel)**

Lab Name: Mohave Environmental Laboratory	Lab Certified ID Number: AZ0037
Lab Contact, printed name: Scott Baker	Lab Phone Number: 928-524-4635
Signature:	
Date PWS Notified: _____	PWS Person Notified: _____
<b>Any positive routine or increased routine RTCR sample triggers the GWR and requires ADEQ notification.</b>	
Date ADEQ Notified: _____	ADEQ Person Notified: _____

Comments: Courier Delivered: (Y) (X)	Date/Time Recd. 10/15/24 1240
Temp Recd. @ 5.1 °C	Samples Recd. by

**Please mail completed form to:**  
Arizona Department of Environmental Quality  
Water Quality Data Unit, 5415B-1  
1110 West Washington Street  
Phoenix, AZ 85007  
OR Email to: WQD\_Compliance\_Data@azdeq.gov

**Revised Total Coliform Rule Questions:**  
Call (800) 234-5677, ext. 771-9200  
within AZ (602) 771-9200  
<http://www.azdeq.gov/environ/water/dw/rtrc.html>

*Please do not submit multiple times.*