

Washington State Department of Health WATER BACTERIOLOGICAL ANALYSIS

Client Name: **Rolling Hills Glencairn**
1126 N Sidney
Oak Harbor, WA 98277

Reference Number: **25-10511**

Project: **Rolling Hills Glencairn Bacteria**

System Name: **ROLLING HILLS-GLENCAIRN**
System ID Number: **74000F**
DOH Source Number: **00 - Distribution Sample (Bacteria)**
Sample Type: **D - Drinking Water**
Sample Purpose: **C - Compliance**
Sample Location: **Ph Tap**
County: **Island**
Sampled By: **EWS**
Sampler Phone:

Repeat Sample Number:
Lab Number: **164-22078**
Field ID: **Rolling Hills Glencairn B**
Date Collected: **4/8/25 09:20**
Date Received: **4/8/25**
Date Set: **4/8/25 17:24**
Date Analyzed: **4/9/25 15:16**
Report Date: **4/14/25**
Comment: **CI2: 1.05**
Approved By: **jln**

Authorized by:



Ceann K Knox
Lab Manager, Bellingham

DOH#	PARAMETER	RESULT	Qualifier*	UNITS	Analyst	METHOD	Batch	COMMENT
1	TOTAL COLIFORM	Satisfactory, Coliforms Absent		per 100mL	mlp	SM9223 B	m_250408b	
3	E. COLI	Absent		per 100mL		SM9223 B	m_250408b	

If the sample is unsatisfactory you can get information on well disinfection at Washington State Department of Health:

WA DOH: <https://doh.wa.gov/community-and-environment/drinking-water/disinfection>

NOTES:

If the result is Unsatisfactory, three (3) repeat samples and groundwater source samples are required for Group A Public Water Systems. Private individuals should investigate the cause of the unsatisfactory result and resample.

If E. Coli or Fecal Coliform are present in sample do not drink the water until it is properly treated.

*If data qualifiers are present, see accompanying Qualifier Definition report.