

1126 North Front St. ~ New Ulm, MN 56073 ~ 800-782-3557 ~ Fax 507-359-2890 2616 East Broadway Ave. ~ Bismarck, ND 58501 ~ 800-279-6885 ~ Fax 701-258-9724 1201 Lincoln Hwy. ~ Nevada, IA 50201 ~ 515-382-5486 ~ Fax 515-382-3885 www.MVTL.com



 Workorder:
 Water (78393)

 Account #:
 8131

Client:Hutchinson, City ofPO:Eric Levine

Eric Levine Hutchinson, City of 111 Hassan St SE Hutchinson, MN 55350-2522

Certificate of Analysis

Approval

All data reported has been reviewed and approved by:

nela Szen

Angela Fischer, Inorganic Chemistry/Feed Lab Assistant Manager New Ulm, MN

Analyses performed under Minnesota Department of Health Accreditation conforms to the current TNI standards.

NEW ULM LAB CERTIFICATIONS: MN LAB # 027-015-125ND WW/DW # R-040

BISMARCK LAB CERTIFICATIONS: MN LAB # 038-999-267ND W/DW # ND-016

Workorder Comments

All samples were preserved with nitric acid upon receipt at the laboratory.

MVTL guarantees the accuracy of the analysis done on the sample submitted for testing. It is not possible for MVTL to guarantee that a test result obtained on a particular sample will be the same on any other sample unless all conditions affecting the sample are the same, including sampling by MVTL. As a mutual protection to clients, the public and ourselves, all reports are submitted as the confidential property of clients, and authorization for publication of statements, conclusions or extracts from or regarding our reports is reserved pending our written approval.

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Workorder:	Water (78393)		С	lient:	Hutchinson, City	of	
Analytica	I Results						
Lab ID: Sample ID: Temp @ Rece	78393001 1000 5th Ave SE i pt (C):	Date Collected: Date Received:	02/13/2025 02/13/2025		Matrix:	Potable Water	
Parameter Lead		Results <0.5	Units ug/L	MCL 15	Method EPA 200.8	Analyzed 02/17/2025 08:42	Qual

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Workorder: Water (78393)

Client: Hutchinson, City of

MV	LABORATO 1126 North F New Ulm, MN Phone: (507) 354-8	ront Street			C	ha	in	o	f C	Cus	sto	ody	y F	Re	co	ord	Pageof	
Toll Fre	ee: (800) 782-3557	Fax: (507) 359-2	890							Wo	ork	Or	de	r #		,	18393	
ompany	Name and Address:				Ac	coui	nt #	:							-	Pho	one #:	
	Hutchinson v 111 Ha	Vater Department Issan St SE			008131						_		320-234-4222					
Hutchinson, MN 55350					Contact: Eric Levine										Fax #: 320-234-9420			
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	City Center, La	aboratory Services			Qu	ote	Nur	nbei								Dat	te Submitted:	
		ssan St SE on, MN 55350			Pro	ject	Na	me/	Nur	mbe	r:		-			Pur	rchase Order #:	
		Information					_		De	441 -	T							
									БО	ottle	: TY	pe				Analysis		
Lab Number	Sample ID	Sample Type (Food, Soil, Water, Etc.)	Date Sampled	Time Sampled	VOC Vials	500 ml unpres.	1000 ml unpres	500 ml HNO3	1000 mI HNO3	500 ml H2SO4	1000 ml H2SO4	Sterile plastic	Amber H2SO4	500 ml NaOH	Filtered? Y or N	Other:	Analysis Required	
100	1000 5th Ave SE	Potable	2/3/25	7:20A		X					-	"	-	47		0		
		Water			,	\neg						-					Lead	
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(2/13/25	9:45 xm	InFr	de	re	-	1	H	th.	N	Æ	£	Z	_	131	Feb25 1020 Refrictlye.	
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						Ro	77	E C	N	11:	3F	eb	2	51	114	61	1142 417 cth1938	

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Client:

nt: Hutchinson, City of

Sample Condition C	hecklist		
Date: 13FCb25 Account Name: HUTChinson Winter den	_ Time: <u>[[40][42]</u> AM #Tment Ac	r: (M) .count # 8/3/	
Bill of Lading #:	<u>Co</u>	ooler #:	
Temp:°C	ROI Ambient Tra	acking #:	
тм#: <u>938</u>	Ice Crystals Present in Sample		
MVTL COURIER: FICH SCANCE	Oti	iher:	
MVTL Route:	Walk-In UPS Air	FedEx Air	SpeeDee
Containers Supplied by MVTL: Yes 📝 Nr	Mail UPS Ground	Fed Ex Ground	
Comments:	Designate customer supplied containers as "Other	r" in container size column	
Number: Containers Size (mL)	Container Type	Preservation	pH
(100) (120) (125) (250) (290) (500) (1000) Other	(G) (P) (AG) (AP) NaHSO4 Na2O3S2 (ONI	E) HNO3 H2SO4 NaOH HCI SUB*	<2 >9 >12 (N/A) Add
(100) (120) (125) (250) (290) (500) (1000) Other	(G) (P) (AG) (AP) NaHSO ₄ Na ₂ O ₃ S ₂ NONI	E HNO ₃ H ₂ SO ₄ NaOH HCI SUB*	<2 >9 >12 N/A Add
(100) (120) (125) (250) (290) (500) (1000) Other	(G) (P) (AG) (AP) NaHSO ₄ Na ₂ O ₃ S ₂ NON	E HNO ₃ H ₂ SO ₄ NaOH HCI SUB*	<2 >9 >12 N/A Add
(100) (120) (125) (250) (290) (500) (1000) Other	(G) (P) (AG) (AP) NaHSO ₄ Na ₂ O ₃ S ₂ NONE	E HNO ₃ H ₂ SO ₄ NaOH HCI SUB*	<2 >9 >12 N/A Add
(100) (120) (125) (250) (290) (500) (1000) Other	(G) (P) (AG) (AP) NaHSO4 Na2O3S2 NONE	E HNO ₃ H ₂ SO ₄ NaOH HCI SUB*	<2 >9 >12 N/A Add
(100) (120) (125) (250) (290) (500) (1000) Other	(G) (P) (AG) (AP) NaHSO4 Na2O3S2 NONE	E HNO ₃ H ₂ SO ₄ NaOH HCI SUB*	<2 >9 >12 N/A Add
(100) (120) (125) (250) (290) (500) (1000) Other	(G) (P) (AG) (AP) NaHSO4 Na2O3S2 NONE	E HNO ₃ H ₂ SO ₄ NaOH HCI SUB*	<2 >9 >12 N/A Add
Low Level Mercury Kit	**!!DO NOT OPEN THE PLA	ASTIC BAGS HOLDING THE SAMPLE BOTTLE	
4 oz Jar	Clear Amber MeOH	None	n/a
2 oz Jar	Clear Amber MeQH	None	n/a
Vials Individual Set of 2 Set of 3		PO ₄ H ₂ SO ₄ None	n/a
Vials Individual Set of 2 Set of 3	Clear Amber HCl H ₃ F	PO4 H2SQ4 None	n/a
Trip Blank Individual Set of 2 Set of 3		n/a	
Moisture Vial		n/a	
Manure Bottle		n/a	

Form # 30-911001-0

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Effective Date: 29 September 2021

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