



Administrative Package Cover Page

This file contains the following documents:

1. Summary of application (in plain language)
 - English
 - Alternative Language (Spanish)
 2. First Notice (NORI-Notice of Receipt of Application and Intent to Obtain a Permit)
 - English
 - Alternative Language (Spanish)
 3. Application materials
-



Portada de Paquete Administrativo

Este archivo contiene los siguientes documentos:

1. Resumen en lenguaje sencillo (PLS, por sus siglas en inglés) de la actividad propuesta
 - Inglés
 - Idioma alternativo (español)
2. Primer aviso (NORI, el Aviso de Recepción de Solicitud e Intención de Obtener un Permiso)
 - Inglés
 - Idioma alternativo (español)
3. Solicitud original

Aransas Bay WQ000495600 Plain Language Summary

English

CSWR-Texas Utility Operating Company, LLC (CN605844786) operates Aransas Bay Utilities Water Treatment Plant (RN101201309), a drinking water treatment plant that removes contaminants from groundwater using a reverse osmosis treatment device that results in the discharge of treated reject water. The facility is located at 119 Live Oak Drive, in Rockport, Aransas County, Texas 78382. This application is for renewal of the existing 65,000 gallons per day discharge of reverse osmosis reject water.

Discharges from the facility are expected to contain total dissolved solids, chloride and sulfate. Backwash or reject water is discharged to a lift station prior to discharge to the receiving water.

Spanish

CSWR-Texas Utility Operating Company, LLC (CN605844786) opera la Planta de Tratamiento de Agua de Aransas Bay Utilities (RN101201309), una planta de tratamiento de agua potable que elimina los contaminantes del agua subterránea mediante un dispositivo de tratamiento de ósmosis inversa que resulta en la descarga de agua rechazada tratada. La instalación está ubicada en 119 Live Oak Drive, en Rockport, condado de Aransas, Texas 78382. Esta solicitud es para la renovación de la descarga existente de 65,000 galones por día de agua rechazada por ósmosis inversa.

Se espera que las descargas de la instalación contengan sólidos disueltos totales, cloruro y sulfato. El agua de retrolavado o rechazo se descarga a una estación de bombeo antes de descargarse al agua receptora.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY



NOTICE OF RECEIPT OF APPLICATION AND INTENT TO OBTAIN WATER QUALITY PERMIT RENEWAL

PERMIT NO. WQ0004956000

APPLICATION. CSWR-Texas Utility Operating Company, LLC, 1630 Des Peres Road, Suite 140, Des Peres, Missouri 63131, which owns a reverse osmosis water treatment facility, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0004956000 (EPA I.D. No. TX0133051) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 61,000 gallons per day. The facility is located at 119 Live Oak Drive, near the city of Rockport, in Aransas County, Texas 78382. The discharge route is from the plant site via Outfall 001 directly to Copano Bay/Port Bay/ Mission Bay. TCEQ received this application on November 14, 2024. The permit application will be available for viewing and copying at Aransas County Public Library, near the front desk, 701 East Mimosa Street, Rockport, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.991666,28.142222&level=18>

ALTERNATIVE LANGUAGE NOTICE. Alternative language notice in Spanish is available at: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

El aviso de idioma alternativo en español está disponible en

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>.

ADDITIONAL NOTICE. TCEQ's Executive Director has determined the application is administratively complete and will conduct a technical review of the application. After technical review of the application is complete, the Executive Director may prepare a draft permit and will issue a preliminary decision on the application. **Notice of the Application and Preliminary Decision will be published and mailed to those who are on the county-wide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.**

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public

interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

OPPORTUNITY FOR A CONTESTED CASE HEARING. After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a response to all relevant and material, or significant public comments. **Unless the application is directly referred for a contested case hearing, the response to comments, and the Executive Director's decision on the application, will be mailed to everyone who submitted public comments and to those persons who are on the mailing list for this application. If comments are received, the mailing will also provide instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing.** A contested case hearing is a legal proceeding similar to a civil trial in state district court.

TO REQUEST A CONTESTED CASE HEARING, YOU MUST INCLUDE THE FOLLOWING ITEMS IN YOUR REQUEST: your name, address, phone number; applicant's name and proposed permit number; the location and distance of your property/activities relative to the proposed facility; a specific description of how you would be adversely affected by the facility in a way not common to the general public; a list of all disputed issues of fact that you submit during the comment period and, the statement "[I/we] request a contested case hearing." If the request for contested case hearing is filed on behalf of a group or association, the request must designate the group's representative for receiving future correspondence; identify by name and physical address an individual member of the group who would be adversely affected by the proposed facility or activity; provide the information discussed above regarding the affected member's location and distance from the facility or activity; explain how and why the member would be affected; and explain how the interests the group seeks to protect are relevant to the group's purpose.

Following the close of all applicable comment and request periods, the Executive Director will forward the application and any requests for reconsideration or for a contested case hearing to the TCEQ Commissioners for their consideration at a scheduled Commission meeting.

The Commission may only grant a request for a contested case hearing on issues the requestor submitted in their timely comments that were not subsequently withdrawn. **If a hearing is granted, the subject of a hearing will be limited to disputed issues of fact or mixed questions of fact and law relating to relevant and material water quality concerns submitted during the comment period.**

TCEQ may act on an application to renew a permit for discharge of wastewater without providing an opportunity for a contested case hearing if certain criteria are met.

MAILING LIST. If you submit public comments, a request for a contested case hearing or a reconsideration of the Executive Director's decision, you will be added to the mailing list for this specific application to receive future public notices mailed by the Office of the Chief Clerk. In addition, you may request to be placed on: (1) the permanent mailing list for a specific applicant name and permit number; and/or (2) the mailing list for a specific county. If you wish to be placed on the permanent and/or the county mailing list, clearly specify which list(s) and send your request to TCEQ Office of the Chief Clerk at the address below.

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at www.tceq.texas.gov/goto/cid. Search the database using the permit number for this application, which is provided at the top of this notice.

AGENCY CONTACTS AND INFORMATION. All public comments and requests must be submitted either electronically at <https://www14.tceq.texas.gov/epic/eComment/>, or in writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will become part of the agency's public record. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at www.tceq.texas.gov/goto/pep. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from CSWR-Texas Utility Operating Company, LLC at the address stated above or by calling Ms. Mandy Sappington, EHS Manager, at 314-464-3976.

Issuance Date: December 9, 2024

Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD Y EL INTENTO DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA RENOVACION

PERMISO NO. WQooo4956000

SOLICITUD. CSWR-Texas Utility Operating Company, LLC, 1630 Des Peres Road, Suite 140, Des Peres, Missouri 63131ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQooo4956000 (EPA I.D. No. TX0133051) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 61,000 galones por día. La planta está ubicada 119 Live Oak Drive, cerca de la ciudad de Rockport, en el Condado de Aransas, Texas 78382. La ruta de descarga es del sitio de la planta a Emisario 001 directamente a Copano Bay/Port Bay/Mission Bay. La TCEQ recibió esta solicitud el 14 de noviembre de 2024. La solicitud para el permiso está disponible para leerla y copiarla en Aransas Biblioteca Pública del Condado, cerca de la recepción, 701 East Mimosa Street, Rockport, Texas. La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web:

<https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.991666,28.142222&level=18>

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar comentarios públicos o pedir una reunión pública sobre esta solicitud. El

propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO

CONTENCIOSO. Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. **A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso.** Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS: su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión. La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya presentado en sus comentarios oportunos que no fueron retirados

posteriormente. Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Ademas, puede pedir que la TCEQ ponga su nombre en una o mas de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos de el solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envia por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

CONTACTOS E INFORMACIÓN DE LA TCEQ. Todos los comentarios escritos del público y los para pedidos una reunión deben ser presentados a la Oficina del Secretario Principal, MC 105, TCEQ, P.O. Box 13087, Austin, TX 78711-3087 o por el internet at www.tceq.texas.gov/about/comments.html. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Si necesita más información en Español sobre esta solicitud para un permiso o el proceso del permiso, por favor llame a El Programa de Educación Pública de la TCEQ, sin cobro, al 1-800-687-4040. La información general sobre la TCEQ puede ser encontrada en nuestro sitio de la red: www.tceq.texas.gov.

También se puede obtener información adicional del CSWR-Texas Utility Operating Company, LLC en a la dirección indicada anteriormente o llamando al Sra. Mandy Sappington, Gerente de EHS, al 314-464-3976.

Fecha de emisión 9 de diciembre de 2024



November 13, 2024

Texas Commission on Environmental Quality
Water Quality Division
Applications Review and Processing Team (MC148)
P.O. Box 13087
Austin, Texas 78711-3087

Re: Aransas Bay Utilities Water Treatment Facility
Permit Renewal WQ0004956000, TX0133051

Dear Reviewing and Processing Team:

Central States Water Resources (CSWR) – Texas Utility Operating Company is pleased to submit the attached application for renewal of NPDES permit TX0133051 for the Aransas Bay Water Treatment Reverse Osmosis system located at 119 Live Oak Drive near the City of Rockport in Aransas County, Texas 78382.

This is a recent acquisition by CSWR-Texas and we appreciate your patience as we gather all the necessary information for renewal. Patterson Professional Services operates this plant on behalf of CSWR-Texas. They assisted us in gathering plant information and sample collection. The laboratory did not provide the necessary minimum analytical levels on the analyses. As the application is past due, I am submitting the data collected and will wait for additional guidance from permitting staff on whether additional sampling should be completed.

I will also ensure payment of the \$315 fee early next week. Thank you for considering our renewal application. We welcome your feedback and are available to provide additional information or documentation. Should you have any questions about this submission, please feel free to contact me directly at 314-464-3976 or msappington@cswrgroup.com.

Sincerely,

A handwritten signature in blue ink that reads "Mandy Sappington".

Amanda Sappington
EHS Compliance Manager
Central States Water Resources





November 13, 2024

Texas Commission on Environmental Quality
Water Quality Division
Applications Review and Processing Team (MC148)
P.O. Box 13087
Austin, Texas 78711-3087

Re: Aransas Bay Utilities Water Treatment Facility
Permit Renewal WQ0004956000, TX0133051

Dear Reviewing and Processing Team:

Central States Water Resources (CSWR) – Texas Utility Operating Company is pleased to submit the attached application for renewal of NPDES permit TX0133051 for the Aransas Bay Water Treatment Reverse Osmosis system located at 119 Live Oak Drive near the City of Rockport in Aransas County, Texas 78382.

This is a recent acquisition by CSWR-Texas and we appreciate your patience as we gather all the necessary information for renewal. Patterson Professional Services operates this plant on behalf of CSWR-Texas. They assisted us in gathering plant information and sample collection. The laboratory did not provide the necessary minimum analytical levels on the analyses. As the application is past due, I am submitting the data collected and will wait for additional guidance from permitting staff on whether additional sampling should be completed.

I will also ensure payment of the \$315 fee early next week. Thank you for considering our renewal application. We welcome your feedback and are available to provide additional information or documentation. Should you have any questions about this submission, please feel free to contact me directly at 314-464-3976 or msappington@cswrgroup.com.

Sincerely,

A handwritten signature in blue ink that reads "Mandy Sappington".

Amanda Sappington
EHS Compliance Manager
Central States Water Resources



TCEQ Core Data Form

For detailed instructions on completing this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission (<i>If other is checked please describe in space provided.</i>)	
<input type="checkbox"/> New Permit, Registration or Authorization (<i>Core Data Form should be submitted with the program application.</i>)	
<input checked="" type="checkbox"/> Renewal (<i>Core Data Form should be submitted with the renewal form</i>)	
<input type="checkbox"/> Other	
2. Customer Reference Number (<i>if issued</i>)	
Follow this link to search for CN or RN numbers in Central Registry**	
CN 605844786	
3. Regulated Entity Reference Number (<i>if issued</i>)	
RN 101201309	

SECTION II: Customer Information

4. General Customer Information		5. Effective Date for Customer Information Updates (mm/dd/yyyy)						
<input type="checkbox"/> New Customer <input checked="" type="checkbox"/> Update to Customer Information <input checked="" type="checkbox"/> Change in Regulated Entity Ownership		<input type="checkbox"/> Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)						
<i>The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).</i>								
6. Customer Legal Name (<i>If an individual, print last name first: eg: Doe, John</i>)		<i>If new Customer, enter previous Customer below:</i>						
CSWR - Texas Utility Operating Company LLC								
7. TX SOS/CPA Filing Number 803367893		8. TX State Tax ID (11 digits) 32071353422						
		9. Federal Tax ID (9 digits) 84-3250493	10. DUNS Number (<i>if applicable</i>)					
11. Type of Customer: <input checked="" type="checkbox"/> Corporation		<input type="checkbox"/> Individual	Partnership: <input type="checkbox"/> General <input type="checkbox"/> Limited					
Government: <input type="checkbox"/> City <input type="checkbox"/> County <input type="checkbox"/> Federal <input type="checkbox"/> Local <input type="checkbox"/> State <input type="checkbox"/> Other		<input type="checkbox"/> Sole Proprietorship	<input type="checkbox"/> Other:					
12. Number of Employees <input type="checkbox"/> 0-20 <input type="checkbox"/> 21-100 <input checked="" type="checkbox"/> 101-250 <input type="checkbox"/> 251-500 <input type="checkbox"/> 501 and higher		13. Independently Owned and Operated? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No						
14. Customer Role (<i>Proposed or Actual – as it relates to the Regulated Entity listed on this form. Please check one of the following</i>)								
<input checked="" type="checkbox"/> Owner <input type="checkbox"/> Operator <input type="checkbox"/> Owner & Operator <input type="checkbox"/> Occupational Licensee <input type="checkbox"/> Responsible Party <input type="checkbox"/> VCP/BSA Applicant <input type="checkbox"/> Other:								
15. Mailing Address:	1630 Des Peres Road							
	Ste. 140							
	City	Des Peres	State	MO	ZIP	63131	ZIP + 4	
16. Country Mailing Information (<i>if outside USA</i>)				17. E-Mail Address (<i>if applicable</i>)				
				msappington@cswrgroup.com				
18. Telephone Number			19. Extension or Code			20. Fax Number (<i>if applicable</i>)		

SECTION III: Regulated Entity Information

21. General Regulated Entity Information (If "New Regulated Entity" is selected, a new permit application is also required.)

New Regulated Entity Update to Regulated Entity Name Update to Regulated Entity Information

The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).

22. Regulated Entity Name (Enter name of the site where the regulated action is taking place.)

CSWR - Aransas Bay Water Treatment Facility

23. Street Address of the Regulated Entity: <u>(No PO Boxes)</u>	119 Live Oak Drive							
	City	Rockport	State	TX	ZIP	78382	ZIP + 4	
24. County	Aransas							

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:									
26. Nearest City				State	Nearest ZIP Code				
<i>Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).</i>									
27. Latitude (N) In Decimal:					28. Longitude (W) In Decimal:				
Degrees	Minutes	Seconds			Degrees	Minutes	Seconds		
29. Primary SIC Code (4 digits)	30. Secondary SIC Code (4 digits)			31. Primary NAICS Code (5 or 6 digits)			32. Secondary NAICS Code (5 or 6 digits)		
4941									
33. What is the Primary Business of this entity? (Do not repeat the SIC or NAICS description.)									
Community Drinking Water Supply									
34. Mailing Address:	1630 Des Peres Road								
	Ste. 140								
	City	Des Peres	State	MO	ZIP	63131	ZIP + 4		
35. E-Mail Address:		msappington@CSWRGroup.com							
36. Telephone Number			37. Extension or Code			38. Fax Number (if applicable)			
(314) 464-3976						() -			

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

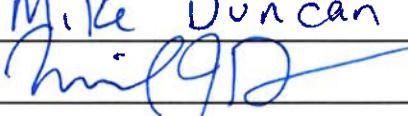
<input type="checkbox"/> Dam Safety	<input type="checkbox"/> Districts	<input type="checkbox"/> Edwards Aquifer	<input type="checkbox"/> Emissions Inventory Air	<input type="checkbox"/> Industrial Hazardous Waste
<input type="checkbox"/> Municipal Solid Waste	<input type="checkbox"/> New Source Review Air	<input type="checkbox"/> OSSF	<input type="checkbox"/> Petroleum Storage Tank	<input checked="" type="checkbox"/> PWS
				0040018
<input type="checkbox"/> Sludge	<input type="checkbox"/> Storm Water	<input type="checkbox"/> Title V Air	<input type="checkbox"/> Tires	<input type="checkbox"/> Used Oil
<input type="checkbox"/> Voluntary Cleanup	<input type="checkbox"/> Wastewater	<input type="checkbox"/> Wastewater Agriculture	<input type="checkbox"/> Water Rights	<input type="checkbox"/> Other:

SECTION IV: Preparer Information

40. Name:	Amberly Woods-Schulz		41. Title:	Compliance Specialist
42. Telephone Number	43. Ext./Code	44. Fax Number	45. E-Mail Address	
(573)214-1075		() -	aschulz@trccompanies.com	

SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	CSWR-Texas Utility Operating Company	Job Title:	Vice President
Name (In Print):	Mike Duncan		Phone: (314)736 4672
Signature:			Date: 11-13-24

Aransas Bay WQ000495600 Plain Language Summary

English

CSWR-Texas Utility Operating Company, LLC (CN605844786) operates Aransas Bay Utilities Water Treatment Plant (RN101201309), a drinking water treatment plant that removes contaminants from groundwater using a reverse osmosis treatment device that results in the discharge of treated reject water. The facility is located at 119 Live Oak Drive, in Rockport, Aransas County, Texas 78382. This application is for renewal of the existing 65,000 gallons per day discharge of reverse osmosis reject water.

Discharges from the facility are expected to contain total dissolved solids, chloride and sulfate. Backwash or reject water is discharged to a lift station prior to discharge to the receiving water.

Spanish

CSWR-Texas Utility Operating Company, LLC (CN605844786) opera la Planta de Tratamiento de Agua de Aransas Bay Utilities (RN101201309), una planta de tratamiento de agua potable que elimina los contaminantes del agua subterránea mediante un dispositivo de tratamiento de ósmosis inversa que resulta en la descarga de agua rechazada tratada. La instalación está ubicada en 119 Live Oak Drive, en Rockport, condado de Aransas, Texas 78382. Esta solicitud es para la renovación de la descarga existente de 65,000 galones por día de agua rechazada por ósmosis inversa.

Se espera que las descargas de la instalación contengan sólidos disueltos totales, cloruro y sulfato. El agua de retrolavado o rechazo se descarga a una estación de bombeo antes de descargarse al agua receptora.



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION CHECKLIST

Complete and submit this checklist with the industrial wastewater permit application.

APPLICANT NAME: CSWR-Texas Utility Operating Company, LLC

PERMIT NUMBER (If new, leave blank): WQ00_0004956000

Indicate if each of the following items is included in your application.

	Y	N		Y	N
Administrative Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 8.0	<input type="checkbox"/>	<input type="checkbox"/>
Administrative Report 1.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Worksheet 9.0	<input type="checkbox"/>	<input type="checkbox"/>
SPIF	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 10.0	<input type="checkbox"/>	<input type="checkbox"/>
Core Data Form	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.0	<input type="checkbox"/>	<input type="checkbox"/>
Public Involvement Plan Form	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Worksheet 11.1	<input type="checkbox"/>	<input type="checkbox"/>
Plain Language Summary	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.2	<input type="checkbox"/>	<input type="checkbox"/>
Technical Report 1.0	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Worksheet 11.3	<input type="checkbox"/>	<input type="checkbox"/>
Worksheet 1.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Original USGS Map	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 2.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Affected Landowners Map	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 3.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Landowner Disk or Labels	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 3.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Flow Diagram	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.2	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Site Drawing	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Worksheet 3.3	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Original Photographs	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 4.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Design Calculations	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 4.1	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Solids Management Plan	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 5.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Water Balance	<input type="checkbox"/>	<input checked="" type="checkbox"/>
Worksheet 6.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Worksheet 7.0	<input type="checkbox"/>	<input checked="" type="checkbox"/>			

For TCEQ Use Only

Segment Number _____ County _____

Expiration Date _____ Region _____

Permit Number _____



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION

ADMINISTRATIVE REPORT 1.0

This report is required for all applications for TPDES permits and TLAPs, except applications for oil and gas extraction operations subject to 40 CFR Part 435. Contact the Applications Review and Processing Team at 512-239-4671 with any questions about completing this report.

Applications for oil and gas extraction operations subject to 40 CFR Part 435 must use the Oil and Gas Exploration and Production Administrative Report ([TCEQ Form-20893 and 20893-inst¹](#)).

Item 1. Application Information and Fees (Instructions, Page 26)

- a. Complete each field with the requested information, if applicable.

Applicant Name: CSWR-Texas Utility Operating Company, LLC

Permit No.: WQ0004956000

EPA ID No.: TX0133051

Expiration Date: 04/27/2025

- b. Check the box next to the appropriate authorization type.

Industrial Wastewater (wastewater and stormwater)

Industrial Stormwater (stormwater only)

- c. Check the box next to the appropriate facility status.

Active Inactive

- d. Check the box next to the appropriate permit type.

TPDES Permit TLAP TPDES with TLAP component

- e. Check the box next to the appropriate application type.

New

Renewal with changes

Renewal without changes

Major amendment with renewal

Major amendment without renewal

Minor amendment without renewal

Minor modification without renewal

- f. If applying for an amendment or modification, describe the request: [Click to enter text.](#)

For TCEQ Use Only

Segment Number _____ County _____

Expiration Date _____ Region _____

Permit Number _____

¹ https://www.tceq.texas.gov/publications/search_forms.html

g. Application Fee

EPA Classification	New	Major Amend. (with or without renewal)	Renewal (with or without changes)	Minor Amend. / Minor Mod. (without renewal)
Minor facility not subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	<input type="checkbox"/> \$350	<input type="checkbox"/> \$350	<input checked="" type="checkbox"/> \$315	<input type="checkbox"/> \$150
Minor facility subject to EPA categorical effluent guidelines (40 CFR Parts 400-471)	<input type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,250	<input type="checkbox"/> \$1,215	<input type="checkbox"/> \$150
Major facility	N/A ²	<input type="checkbox"/> \$2,050	<input type="checkbox"/> \$2,015	<input type="checkbox"/> \$450

h. Payment Information

Mailed

Check or money order No.: [Click to enter text.](#)

Check or money order amt.: [Click to enter text.](#)

Named printed on check or money order: [Click to enter text.](#)

Epay

Voucher number: [Click to enter text.](#)

Copy of voucher attachment: [Click to enter text.](#)

Item 2. Applicant Information (Instructions, Pages 26)

- a. Customer Number, if applicant is an existing customer: [CN605844786](#)

Note: Locate the customer number using the [TCEQ's Central Registry Customer Search](#)³.

- b. Legal name of the entity (applicant) applying for this permit: [CSWR-Texas Utility Operating Company, LLC](#)

Note: The owner of the facility must apply for the permit. The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.

- c. Name and title of the person signing the application. (**Note:** The person must be an executive official that meets signatory requirements in 30 TAC § 305.44.)

Prefix: Mr. Full Name (Last/First Name): Duncan, Mike

Title: Vice President

Credential: [Click to enter text.](#)

- d. Will the applicant have overall financial responsibility for the facility?

² All facilities are designated as minors until formally classified as a major by EPA.

³ <https://www15.tceq.texas.gov/crpublish/index.cfm?fuseaction=cust.CustSearch>

Yes No

Note: The entity with overall financial responsibility for the facility must apply as a co-applicant, if not the facility owner.

Item 3. Co-applicant Information (Instructions, Page 27)

Check this box if there is no co-applicant.; otherwise, complete the below questions.

a. Legal name of the entity (co-applicant) applying for this permit: [Click to enter text.](#)

Note: The legal name must be spelled exactly as filed with the TX SOS, Texas Comptroller of Public Accounts, County, or in the legal documents forming the entity.

b. Customer Number (if applicant is an existing customer): [CN](#)[Click to enter text.](#)

Note: Locate the customer number using the TCEQ's Central Registry Customer Search.

c. Name and title of the person signing the application. (**Note:** The person must be an executive official that meets signatory requirements in 30 TAC § 305.44.)

Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

Title: [Click to enter text.](#) Credential: [Click to enter text.](#)

d. Will the co-applicant have overall financial responsibility for the facility?

Yes No

Note: The entity with overall financial responsibility for the facility must apply as a co-applicant, if not the facility owner.

Item 4. Core Data Form (Instructions, Pages 27)

a. Complete one Core Data Form (TCEQ Form 10400) for each customer (applicant and co-applicant(s)) and include as an attachment. If the customer type selected on the Core Data Form is Individual, complete Attachment 1 of the Administrative Report. Attachment: [Click to enter text.](#)

Item 5. Application Contact Information (Instructions, Page 27)

Provide names of two individuals who can be contact for additional information about this application. Indicate if the individual can be contact about administrative or technical information, or both.

a. Administrative Contact . Technical Contact

Prefix: [Click to enter text.](#) Full Name (Last/First Name): Sappington, Mandy

Title: EHS Manager Credential: [Click to enter text.](#)

Organization Name: CSWR

Mailing Address: 1630 Des Peres Road Ste. 140 City/State/Zip: Des Peres, MO 63131

Phone No: 314-464-3976 Email: msappington@cswrgroup.com

b. Administrative Contact Technical Contact

Prefix: [Click to enter text.](#) Full Name (Last/First Name): Amberly Woods-Schulz

Title: Compliance Specialist Credential: [Click to enter text.](#)

Organization Name: TRC Companies

Mailing Address: 1000 Clark Avenue, 4th Fl City/State/Zip: St. Louis, MO 63102

Phone No: 573-214-1075 Email: aschulz@trcccompanies.com

Attachment: [Click to enter text.](#)

Item 6. Permit Contact Information (Instructions, Page 28)

Provide two names of individuals that can be contacted throughout the permit term.

- a. Prefix: [Click to enter text.](#) Full Name (Last/First Name): Sappington, Mandy
Title: EHS Manager Credential: [Click to enter text.](#)
Organization Name: CSWR
Mailing Address: 1630 Des Peres Road, Ste. 140 City/State/Zip: Des Peres, MO 63131
Phone No: 314-464-3976 Email: msappington@cswrgroup.com
- b. Prefix: [Click to enter text.](#) Full Name (Last/First Name): Stephens, Karl
Title: Regional Manager Credential: [Click to enter text.](#)
Organization Name: CSWR
Mailing Address: 1630 Des Peres Road, Ste. 140 City/State/Zip: Des Peres, MO 63131
Phone No: 832-626-3570 Email: karl@cswrgroup.com

Attachment: [Click to enter text.](#)

Item 7. Billing Contact Information (Instructions, Page 28)

The permittee is responsible for paying the annual fee. The annual fee will be assessed for permits **in effect on September 1 of each year**. The TCEQ will send a bill to the address provided in this section. The permittee is responsible for terminating the permit when it is no longer needed (form TCEQ-20029).

Provide the complete mailing address where the annual fee invoice should be mailed and the name and phone number of the permittee's representative responsible for payment of the invoice.

- Prefix: [Click to enter text.](#) Full Name (Last/First Name): Obernuefemann, Krista
Title: Accounts Payable Credential: [Click to enter text.](#)
Organization Name: CSWR
Mailing Address: 1630 Des Peres Road, Ste 140 City/State/Zip: Des Peres, MO 63131
Phone No: 314-380-8515 Email: ap@cswrgroup.com

Item 8. DMR/MER Contact Information (Instructions, Page 28)

Provide the name and mailing address of the person delegated to receive and submit DMRs or MERs. **Note:** DMR data must be submitted through the NetDMR system. An electronic reporting account can be established once the facility has obtained the permit number.

- Prefix: [Click to enter text.](#) Full Name (Last/First Name): Klement, Callie
Title: Compliance Coordinator Credential: [Click to enter text.](#)
Organization Name: Patterson Professional Services

Mailing Address: 9963 US Hwy 377

City/State/Zip: Collinsville, TX 76233

Phone No: 903-429-3008 x2 Email: callie@pwg.services

Item 9. Notice Information (Instructions, Pages 28)

a. Individual Publishing the Notices

Prefix: Click to enter text.

Full Name (Last/First Name): Sappington, Mandy

Title: EHS Manager

Credential: Click to enter text.

Organization Name: CSWR

Mailing Address: 1630 Des Peres Road, Ste 140 City/State/Zip: Des Peres, MO 63131

Phone No: 314-464-3976

Email: msappington@cswrgroup.com

b. Method for Receiving Notice of Receipt and Intent to Obtain a Water Quality Permit Package (only for NORI, NAPD will be sent via regular mail)

E-mail: Click to enter text.

Fax: Click to enter text.

Regular Mail (USPS)

Mailing Address: Click to enter text.

City/State/Zip Code: Click to enter text.

c. Contact in the Notice

Prefix: Click to enter text.

Full Name (Last/First Name): Sappington, Mandy

Title: EHS Manager

Credential: Click to enter text.

Organization Name: CSWR

Phone No: 314-464-3976

Email: msappington@cswrgroup.com

d. Public Viewing Location Information

Note: If the facility or outfall is located in more than one county, provide a public viewing place for each county.

Public building name: Aransas County Public Library Location within the building: near front desk

Physical Address of Building: 701 East Mimosa Street

City: Rockport County: Aransas

e. Bilingual Notice Requirements

This information is required for new, major amendment, minor amendment or minor modification, and renewal applications.

This section of the application is only used to determine if alternative language notices will be needed. Complete instructions on publishing the alternative language notices will be in your public notice package.

Call the bilingual/ESL coordinator at the nearest elementary and middle schools and obtain the following information to determine if an alternative language notice(s) is required.

1. Is a bilingual education program required by the Texas Education Code at the elementary or middle school nearest to the facility or proposed facility?
 Yes No
If no, publication of an alternative language notice is not required; skip to Item 8 (Regulated Entity and Permitted Site Information.)
 2. Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?
 Yes No
 3. Do the students at these schools attend a bilingual education program at another location?
 Yes No
 4. Would the school be required to provide a bilingual education program, but the school has waived out of this requirement under 19 TAC §89.1205(g)?
 Yes No N/A
 5. If the answer is yes to question 1, 2, 3, or 4, public notices in an alternative language are required. Which language is required by the bilingual program? Spanish
- f. Plain Language Summary Template – Complete the Plain Language Summary (TCEQ Form 20972) and include as an attachment. Attachment: [Click to enter text](#).
- g. Complete one Public Involvement Plan (PIP) Form (TCEQ Form 20960) for each application for a new permit or major amendment and include as an attachment. Attachment: N/A

Item 10. Regulated Entity and Permitted Site Information (Instructions Page 29)

- a. TCEQ issued Regulated Entity Number (RN), if available: RN101201309

Note: If your business site is part of a larger business site, a Regulated Entity Number (RN) may already be assigned for the larger site. Use the RN assigned for the larger site. Search the TCEQ's Central Registry to determine the RN or to see if the larger site may already be registered as a Regulated Entity. If the site is found, provide the assigned RN.

- b. Name of project or site (the name known by the community where located): Aransas Bay Water Treatment Facility

- c. Is the location address of the facility in the existing permit the same?

Yes No N/A (new permit)

Note: If the facility is located in Bexar, Comal, Hays, Kinney, Medina, Travis, Uvalde, or Williamson County, additional information concerning protection of the Edwards Aquifer may be required.

- d. Owner of treatment facility:

Prefix: [Click to enter text](#) Full Name (Last/First Name): [Click to enter text](#)

or Organization Name: CSWR-Texas Utility Operating Company, LLC

Mailing Address: 1630 Des Peres Road, Ste 140 City/State/Zip: Des Peres, MO 63131

Phone No: 314-736-4672 Email: jcox@cswrgroup.com

e. Ownership of facility: Public Private Both Federal

f. Owner of land where treatment facility is or will be: [Click to enter text.](#)

Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: CSWR-Texas Utility Operating Company, LLC

Mailing Address: 1630 Des Peres Road, Ste 140 City/State/Zip: Des Peres, MO 63131

Phone No: 314-736-4672 Email: jcox@cswrgroup.com

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years (In some cases, a lease may not suffice - see instructions). Attachment: [Click to enter text.](#)

g. Owner of effluent TLAP disposal site (if applicable): N/A

Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: [Click to enter text.](#)

Mailing Address: [Click to enter text.](#) City/State/Zip: [Click to enter text.](#)

Phone No: [Click to enter text.](#) Email: [Click to enter text.](#)

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: [Click to enter text.](#)

h. Owner of sewage sludge disposal site (if applicable):

Prefix: [Click to enter text.](#) Full Name (Last/First Name): [Click to enter text.](#)

or Organization Name: [Click to enter text.](#)

Mailing Address: [Click to enter text.](#) City/State/Zip: [Click to enter text.](#)

Phone No: [Click to enter text.](#) Email: [Click to enter text.](#)

Note: If not the same as the facility owner, attach a long-term lease agreement in effect for at least six years. Attachment: [Click to enter text.](#)

Item 11. TDPES Discharge/TLAP Disposal Information (Instructions, Page 31)

a. Is the facility located on or does the treated effluent cross Native American Land?

Yes No

b. Attach an original full size USGS Topographic Map (or an 8.5"×11" reproduced portion for renewal or amendment applications) with all required information. Check the box next to each item below to confirm it has been included on the map.

One-mile radius Three-miles downstream information

Applicant's property boundaries Treatment facility boundaries

Labeled point(s) of discharge Highlighted discharge route(s)

Effluent disposal site boundaries All wastewater ponds

Sewage sludge disposal site New and future construction

Attachment: [Click to enter text.](#)

- c. Is the location of the sewage sludge disposal site in the existing permit accurate?
 Yes No or New Permit
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- d. Are the point(s) of discharge in the existing permit correct?
 Yes No or New Permit
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- e. Are the discharge route(s) in the existing permit correct?
 Yes No or New Permit
If no, or a new permit, provide an accurate description of the discharge route: [Click to enter text.](#)
- f. City nearest the outfall(s): Rockport
- g. County in which the outfalls(s) is/are located: Aransas
- h. Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?
 Yes No
If yes, indicate by a check mark if: Authorization granted Authorization pending
For new and amendment applications, attach copies of letters that show proof of contact and provide the approval letter upon receipt. Attachment: [Click to enter text.](#)
For all applications involving an average daily discharge of 5 MGD or more, provide the names of all counties located within 100 statute miles downstream of the point(s) of discharge: [Click to enter text.](#)
- i. For TLAPs, is the location of the effluent disposal site in the existing permit accurate?
 Yes No or New Permit N/A
If no, or a new application, provide an accurate location description: [Click to enter text.](#)
- j. City nearest the disposal site: N/A
- k. County in which the disposal site is located: N/A
- l. For TLAPs, describe how effluent is/will be routed from the treatment facility to the disposal site: N/A
- m. For TLAPs, identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained: N/A

Item 12. Miscellaneous Information (Instructions, Page 33)

- a. Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?

Yes No

If yes, list each person: [Click to enter text.](#)

- b. Do you owe any fees to the TCEQ?

Yes No

If yes, provide the following information:

Account no.: [Click to enter text.](#)

Total amount due: [Click to enter text.](#)

- c. Do you owe any penalties to the TCEQ?

Yes No

If yes, provide the following information:

Enforcement order no.: [Click to enter text.](#)

Amount due: [Click to enter text.](#)

Item 13. Signature Page (Instructions, Page 33)

Permit No: WQ0004956000

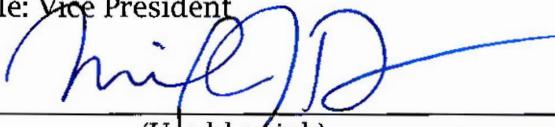
Applicant Name: CSWR-Texas Utility Operating Company, LLC

Certification: I, Mike Duncan, certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to

assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

I further certify that I am authorized under 30 Texas Administrative Code §305.44 to sign and submit this document and can provide documentation in proof of such authorization upon request.

Signatory name (typed or printed): Mike Duncan
Signatory title: Vice President

Signature: 
(Use blue ink)

Date: 11-13-24

Subscribed and Sworn to before me by the said Mike Duncan
on this 13th day of November, 2024.

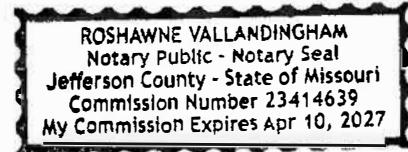
My commission expires on the 10th day of April, 2027.

Roshaune Vallandingham

Notary Public

St. Louis
County, Texas ~~Missouri~~ MISSOURI

[SEAL]



Note: If co-applicants are necessary, each entity must submit an original, separate signature page.

INDUSTRIAL WASTEWATER PERMIT APPLICATION

ADMINISTRATIVE REPORT 1.1

The following information is required for new and amendment applications.

Item 1. Affected Landowner Information (Instructions, Page 35)

- a. Attach a landowner map or drawing, with scale, as applicable. Check the box next to each item to confirm it has been provided.
- The applicant's property boundaries.
 - The facility site boundaries within the applicant's property boundaries.
 - The distance the buffer zone falls into adjacent properties and the property boundaries of the landowners located within the buffer zone.
 - The property boundaries of all landowners surrounding the applicant's property. (Note: if the application is a major amendment for a lignite mine, the map must include the property boundaries of all landowners adjacent to the new facility (ponds).)
 - The point(s) of discharge and highlighted discharge route(s) clearly shown for one mile downstream.
 - The property boundaries of the landowners located on both sides of the discharge route for one full stream mile downstream of the point of discharge.
 - The property boundaries of the landowners along the watercourse for a one-half mile radius from the point of discharge if the point of discharge is into a lake, bay, estuary, or affected by tides.
 - The boundaries of the effluent disposal site (e.g., irrigation area or subsurface drainfield site) and all evaporation/holding ponds within the applicant's property.
 - The property boundaries of all landowners surrounding the applicant's property boundaries where the effluent disposal site is located.
 - The boundaries of the sludge land application site (for land application of sewage sludge for beneficial use) and the property boundaries of landowners within one-quarter mile of the applicant's property boundaries where the sewage sludge land application site is located.
 - The property boundaries of landowners within one-half mile in all directions from the applicant's property boundaries where the sewage sludge disposal site (e.g., sludge surface disposal site or sludge monofil) is located.

Attachment: [Click to enter text.](#)

- b. Check the box next to the format of the landowners list:

Readable/Writeable CD Four sets of labels

Attachment: [Click to enter text.](#)

- d. Provide the source of the landowners' names and mailing addresses: [Click to enter text.](#)

- e. As required by Texas Water Code § 5.115, is any permanent school fund land affected by this application?

Yes No

If yes, provide the location and foreseeable impacts and effects this application has on the land(s): [Click to enter text.](#)

Item 2. Original Photographs (Instructions, Page 37)

Provide original ground level photographs. Check the box next to each of the following items to indicate it is included.

- At least one original photograph of the new or expanded treatment unit location.
- At least two photographs of the existing/proposed point of discharge and as much area downstream (photo 1) and upstream (photo 2) as can be captured. If the discharge is to an open water body (e.g., lake, bay), the point of discharge should be in the right or left edge of each photograph showing the open water and with as much area on each respective side of the discharge as can be captured.
- At least one photograph of the existing/proposed effluent disposal site.
- A plot plan or map showing the location and direction of each photograph.

Attachment: [Click to enter text.](#)

INDUSTRIAL WASTEWATER PERMIT APPLICATION

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

This form applies to TPDES permit applications only. Complete and attach the Supplemental Permit information Form (SPIF) (TCEQ Form 20971).

Attachment: [Click to enter text.](#)

WATER QUALITY PERMIT

PAYMENT SUBMITTAL FORM

Use this form to submit the Application Fee, if mailing the payment. (Instructions, Page 36-37)

- Complete items 1 through 5 below.
- Staple the check or money order in the space provided at the bottom of this document.
- Do not mail this form with the application form.
- Do not mail this form to the same address as the application.
- Do not submit a copy of the application with this form as it could cause duplicate permit entries.

Mail this form and the check or money order to:

BY REGULAR U.S. MAIL

Texas Commission on Environmental Quality
Financial Administration Division
Cashier's Office, MC-214
P.O. Box 13088
Austin, Texas 78711-3088

BY OVERNIGHT/EXPRESS MAIL

Texas Commission on Environmental Quality
Financial Administration Division
Cashier's Office, MC-214
12100 Park 35 Circle
Austin, Texas 78753

Fee Code: WQP Permit No: WQ0004956000

1. Check or Money Order Number: [Click to enter text.](#)
2. Check or Money Order Amount: [Click to enter text.](#)
3. Date of Check or Money Order: [Click to enter text.](#)
4. Name on Check or Money Order: [Click to enter text.](#)
5. APPLICATION INFORMATION

Name of Project or Site: Aransas Bay Water Treatment Facility

Physical Address of Project or Site: 119 Live Oak Drive, Rockport, TX 78382

If the check is for more than one application, attach a list which includes the name of each Project or Site (RE) and Physical Address, exactly as provided on the application.

Attachment: [Click to enter text.](#)

Staple Check or Money Order in This Space

ATTACHMENT 1

INDIVIDUAL INFORMATION

Item 1. Individual information (Instructions, Page 38)

Complete this attachment if the facility applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

Prefix (Mr., Ms., or Miss): [Click to enter text.](#)

Full legal name (first, middle, and last): [Click to enter text.](#)

Driver's License or State Identification Number: [Click to enter text.](#)

Date of Birth: [Click to enter text.](#)

Mailing Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Phone No.: [Click to enter text.](#)

Fax No.: [Click to enter text.](#)

E-mail Address: [Click to enter text.](#)

CN: [Click to enter text.](#)

INDUSTRIAL WASTEWATER PERMIT APPLICATION

CHECKLIST OF COMMON DEFICIENCIES

Below is a list of common deficiencies found during the administrative review of industrial wastewater permit applications. To ensure the timely processing of this application, please review the items below and indicate each item is complete and in accordance applicable rules at 30 TAC Chapters 21, 281, and 305 by checking the box next to the item. If an item is not required this application, indicate by checking N/A where appropriate. Please do not submit the application until all items below are addressed.

- Core Data Form (TCEQ Form No. 10400)
*(Required for all applications types. Must be completed in its entirety and signed.
Note: Form may be signed by applicant representative.)*
- Correct and Current Industrial Wastewater Permit Application Forms
(TCEQ Form Nos. 10055 and 10411. Version dated 5/10/2019 or later.)
- Water Quality Permit Payment Submittal Form (Page 14)
(Original payment sent to TCEQ Revenue Section. See instructions for mailing address.)
- 7.5 Minute USGS Quadrangle Topographic Map Attached
*(Full-size map if seeking "New" permit.
8 ½ x 11 acceptable for Renewals and Amendments.)*
- N/A Current/Non-Expired, Executed Lease Agreement or Easement Attached
- N/A Landowners Map
(See instructions for landowner requirements.)

Things to Know:

- All the items shown on the map must be labeled.
- The applicant's complete property boundaries must be delineated which includes boundaries of contiguous property owned by the applicant.
- The applicant cannot be its own adjacent landowner. You must identify the landowners immediately adjacent to their property, regardless of how far they are from the actual facility.
- If the applicant's property is adjacent to a road, creek, or stream, the landowners on the opposite side must be identified. Although the properties are not adjacent to applicant's property boundary, they are considered potentially affected landowners. If the adjacent road is a divided highway as identified on the USGS topographic map, the applicant does not have to identify the landowners on the opposite side of the highway.

- N/A Landowners Cross Reference List
(See instructions for landowner requirements.)

- N/A Landowners Labels or CD-RW attached
(See instructions for landowner requirements.)

- Original signature per 30 TAC § 305.44 - Blue Ink Preferred
*(If signature page is not signed by an elected official or principle executive officer,
a copy of signature authority/delegation letter must be attached.)*

- Plain Language Summary

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: Renewal Major Amendment Minor Amendment New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

Texas Historical Commission U.S. Fish and Wildlife

Texas Parks and Wildlife Department U.S. Army Corps of Engineers

This form applies to TPDES permit applications only. (Instructions, Page 53)

Complete this form as a separate document. TCEQ will mail a copy to each agency as required by our agreement with EPA. If any of the items are not completely addressed or further information is needed, we will contact you to provide the information before issuing the permit. Address each item completely.

Do not refer to your response to any item in the permit application form. Provide each attachment for this form separately from the Administrative Report of the application. The application will not be declared administratively complete without this SPIF form being completed in its entirety including all attachments. Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by phone at (512) 239-4671.

The following applies to all applications:

- Permittee: CSWR-Texas Utility Operating Company, LLC

Permit No. WQ00 0004956000

EPA ID No. TX 0133051

Address of the project (or a location description that includes street/highway, city/vicinity, and county):

119 Live Oak Drive, Rockport, Aransas County, Texas 78382

Provide the name, address, phone and fax number of an individual that can be contacted to answer specific questions about the property.

Prefix (Mr., Ms., Miss):

First and Last Name: Mandy Sappington

Credential (P.E, P.G., Ph.D., etc.):

Title: EHS Manager

Mailing Address: 1630 Des Peres Road, Ste. 140

City, State, Zip Code: Des Peres, Mo 63131

Phone No.: 314-464-3976 Ext.: Fax No.:

E-mail Address: msappington@cswrgroup.com

2. List the county in which the facility is located: Aransas
3. If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.

N/A
4. Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.

Directly to Copano Bay/Port Bay/Mission Bay in Segment No. 2472 of the Bays and Estuaries.

5. Please provide a separate 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. Please highlight the discharge route from the point of discharge for a distance of one mile downstream. (This map is required in addition to the map in the administrative report).

Provide original photographs of any structures 50 years or older on the property.

Does your project involve any of the following? Check all that apply.

- Proposed access roads, utility lines, construction easements
- Visual effects that could damage or detract from a historic property's integrity
- Vibration effects during construction or as a result of project design
- Additional phases of development that are planned for the future
- Sealing caves, fractures, sinkholes, other karst features

Disturbance of vegetation or wetlands

1. List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features):

none

2. Describe existing disturbances, vegetation, and land use:

None, existing WWTF

THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR AMENDMENTS TO TPDES PERMITS

3. List construction dates of all buildings and structures on the property:

N/A

4. Provide a brief history of the property, and name of the architect/builder, if known.

N/A



TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

INDUSTRIAL WASTEWATER PERMIT APPLICATION

TECHNICAL REPORT 1.0

The following information **is required** for all applications for a TLAP or an individual TPDES discharge permit.

For **additional information** or clarification on the requested information, please refer to the [Instructions for Completing the Industrial Wastewater Permit Application](#)¹ available on the TCEQ website. Please contact the Industrial Permits Team at 512-239-4671 with any questions about this form.

If more than one outfall is included in the application, provide applicable information for each individual outfall. **If an item does not apply to the facility, enter N/A** to indicate that the item has been considered. Include separate reports or additional sheets as **clearly cross-referenced attachments** and provide the attachment number in the space provided for the item the attachment addresses.

NOTE: This application is for an industrial wastewater permit only. Additional authorizations from the TCEQ Waste Permits Division or the TCEQ Air Permits Division may be needed.

Item 1. Facility/Site Information (Instructions, Page 39)

- a. Describe the general nature of the business and type(s) of industrial and commercial activities. Include all applicable SIC codes (up to 4).

Drinking Water Treatment Plant – SIC 4941

- b. Describe all wastewater-generating processes at the facility.

Water treatment plant wastewater (Reverse Osmosis reject water, membrane regeneration waste)

¹

https://www.tceq.texas.gov/permitting/wastewater/industrial/TPDES_industrial_wastewater_steps.html

- c. Provide a list of raw materials, major intermediates, and final products handled at the facility.

Materials List

Raw Materials	Intermediate Products	Final Products
Untreated groundwater	NA	Drinking water

Attachment: [Click to enter text.](#)

- d. Attach a facility map (drawn to scale) with the following information:

- Production areas, maintenance areas, materials-handling areas, waste-disposal areas, and water intake structures.
- The location of each unit of the WWTP including the location of wastewater collection sumps, impoundments, outfalls, and sampling points, if significantly different from outfall locations.

Attachment: [Click to enter text.](#)

- e. Is this a new permit application for an existing facility?

Yes No

If yes, provide background discussion: [Click to enter text.](#)

- f. Is/will the treatment facility/disposal site be located above the 100-year frequency flood level.

Yes No

List source(s) used to determine 100-year frequency flood plain: [FEMA flood map](#)

If no, provide the elevation of the 100-year frequency flood plain and describe what protective measures are used/proposed to prevent flooding (including tail water and rainfall run-on controls) of the treatment facility and disposal area: [Click to enter text.](#)

Attachment: [FEMA firmette](#)

- g. For **new or major amendment** permit applications, will any construction operations result in a discharge of fill material into a water in the state?

Yes No N/A (renewal only)

- h. If **yes** to Item 1.g, has the applicant applied for a USACE CWA Chapter 404 Dredge and Fill permit?

Yes No

If **yes**, provide the permit number: [Click to enter text.](#)

If **no**, provide an approximate date of application submittal to the USACE: [Click to enter text.](#)

Item 2. Treatment System (Instructions, Page 40)

- a. List any physical, chemical, or biological treatment process(es) used/proposed to treat wastewater at this facility. Include a description of each treatment process, starting with initial treatment and finishing with the outfall/point of disposal.

Reverse osmosis unit makes wastewater --> discharged to lift station --> outfall

- b. Attach a flow schematic **with a water balance** showing all sources of water and wastewater flow into the facility, wastewater flow into and from each treatment unit, and wastewater flow to each outfall/point of disposal.

Attachment: [Click to enter text.](#)

Item 3. Impoundments (Instructions, Page 40)

Does the facility use or plan to use any wastewater impoundments (e.g., lagoons or ponds?)

Yes No

If **no**, proceed to Item 4. If **yes**, complete **Item 3.a** for **existing** impoundments and **Items 3.a - 3.e** for **new or proposed** impoundments. NOTE: See instructions, Pages 40-42, for additional information on the attachments required by Items 3.a - 3.e.

- a. Complete the table with the following information for each existing, new, or proposed impoundment. Attach additional copies of the Impoundment Information table, if needed.

Use Designation: Indicate the use designation for each impoundment as Treatment (T), Disposal (D), Containment (C), or Evaporation (E).

Associated Outfall Number: Provide an outfall number if a discharge occurs or will occur.

Liner Type: Indicate the liner type as Compacted clay liner (C), In-situ clay liner (I), Synthetic/plastic/rubber liner (S), or Alternate liner (A). **NOTE:** See instructions for further detail on liner specifications. If an alternate liner (A) is selected, include an attachment that provides a description of the alternate liner and any additional technical information necessary for an evaluation.

Leak Detection System: If any leak detection systems are in place/planned, enter Y for yes. Otherwise, enter N for no.

Groundwater Monitoring Wells and Data: If groundwater monitoring wells are in place/planned, enter Y for yes. Otherwise, enter N for no. Attach any existing groundwater monitoring data.

Dimensions: Provide the dimensions, freeboard, surface area, storage capacity of the impoundments, and the maximum depth (not including freeboard). For impoundments with irregular shapes, submit surface area instead of length and width.

Compliance with 40 CFR Part 257, Subpart D: If the impoundment is required to be in compliance with 40 CFR Part 257, Subpart D, enter Y for yes. Otherwise, enter N for no.

Date of Construction: Enter the date construction of the impoundment commenced (mm/dd/yy).

Impoundment Information

Parameter	Pond #	Pond #	Pond #	Pond #
Use Designation: (T) (D) (C) or (E)				
Associated Outfall Number				
Liner Type (C) (I) (S) or (A)				
Alt. Liner Attachment Reference				
Leak Detection System, Y/N				
Groundwater Monitoring Wells, Y/N				
Groundwater Monitoring Data Attachment				
Pond Bottom Located Above The Seasonal High-Water Table, Y/N				
Length (ft)				
Width (ft)				
Max Depth From Water Surface (ft), Not Including Freeboard				
Freeboard (ft)				
Surface Area (acres)				
Storage Capacity (gallons)				
40 CFR Part 257, Subpart D, Y/N				
Date of Construction				

Attachment: [Click to enter text.](#)

The following information (**Items 3.b – 3.e**) is required only for **new or proposed** impoundments.

b. For new or proposed impoundments, attach any available information on the following items. If attached, check **yes** in the appropriate box. Otherwise, check **no** or **not yet designed**.

1. Liner data

Yes No Not yet designed

2. Leak detection system or groundwater monitoring data

Yes No Not yet designed

3. Groundwater impacts

Yes No Not yet designed

NOTE: Item b.3 is required if the bottom of the pond is not above the seasonal high-water table in the shallowest water-bearing zone.

Attachment: [Click to enter text.](#)

For TLAP applications: Items 3.c – 3.e are **not required**, continue to Item 4.

c. Attach a USGS map or a color copy of original quality and scale which accurately locates and identifies all known water supply wells and monitor wells within ½-mile of the impoundments.

Attachment: [Click to enter text.](#)

d. Attach copies of State Water Well Reports (e.g., driller's logs, completion data, etc.), and data on depths to groundwater for all known water supply wells including a description of how the depths to groundwater were obtained.

Attachment: [Click to enter text.](#)

e. Attach information pertaining to the groundwater, soils, geology, pond liner, etc. used to assess the potential for migration of wastes from the impoundments or the potential for contamination of groundwater or surface water.

Attachment: [Click to enter text.](#)

Item 4. Outfall/Disposal Method Information (Instructions, Page 42)

Complete the following tables to describe the location and wastewater discharge or disposal operations for each outfall for discharge, and for each point of disposal for TLAP operations.

If there are more outfalls/points of disposal at the facility than the spaces provided, copies of pages 6 and/or numbered accordingly (i.e., page 6a, 6b, etc.) may be used to provide information on the additional outfalls.

For TLAP applications: Indicate the disposal method and each individual irrigation area I, evaporation pond E, or subsurface drainage system S by providing the appropriate letter designation for the disposal method followed by a numerical designation for each disposal area in the space provided for **Outfall** number (e.g. E1 for evaporation pond 1, I2 for irrigation area No. 2, etc.).

Outfall Longitude and Latitude

Outfall No.	Latitude (Decimal Degrees)	Longitude (Decimal Degrees)
001 (measurement location at lift station)	28.137268	-97.007135
Submerged discharge location	28.136916	-97.006327

Outfall Location Description

Outfall No.	Location Description

Description of Sampling Point(s) (if different from Outfall location)

Outfall No.	Description of sampling point

Outfall Flow Information – Permitted and Proposed

Outfall No.	Permitted Daily Avg Flow (MGD)	Permitted Daily Max Flow (MGD)	Proposed Daily Avg Flow (MGD)	Proposed Daily Max Flow (MGD)	Anticipated Discharge Date (mm/dd/yy)
001	0.061	0.065	0.061	0.065	active

Outfall Discharge – Method and Measurement

Outfall No.	Pumped Discharge? Y/N	Gravity Discharge? Y/N	Type of Flow Measurement Device Used
001	Y	N	Flow meter

Outfall Discharge - Flow Characteristics

Outfall No.	Intermittent Discharge? Y/N	Continuous Discharge? Y/N	Seasonal Discharge? Y/N	Discharge Duration (hrs/day)	Discharge Duration (days/mo)	Discharge Duration (mo/yr)
001	No	Yes	No	24	All	12

Outfall Wastestream Contributions

Outfall No. 001

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow
RO reject water	0.6	100

Outfall No. Click to enter text.

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow

Outfall No. Click to enter text.

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow

Contributing Wastestream	Volume (MGD)	Percent (%) of Total Flow

Attachment: [Click to enter text.](#)

Item 5. Blowdown and Once-Through Cooling Water Discharges (Instructions, Page 43)

- a. Indicate if the facility currently or proposes to:

- Yes No Use cooling towers that discharge blowdown or other wastestreams
- Yes No Use boilers that discharge blowdown or other wastestreams
- Yes No Discharge once-through cooling water

NOTE: If the facility uses or plans to use cooling towers or once-through cooling water, Item 12 **is required**.

- b. If **yes** to any of the above, attach an SDS with the following information for each chemical additive.

- Manufacturers Product Identification Number
- Product use (e.g., biocide, fungicide, corrosion inhibitor, etc.)
- Chemical composition including CASRN for each ingredient
- Classify product as non-persistent, persistent, or bioaccumulative
- Product or active ingredient half-life
- Frequency of product use (e.g., 2 hours/day once every two weeks)
- Product toxicity data specific to fish and aquatic invertebrate organisms
- Concentration of whole product or active ingredient, as appropriate, in wastestream.

In addition to each SDS, attach a summary of the above information for each specific wastestream and the associated chemical additives. Specify which outfalls are affected.

Attachment: [Click to enter text.](#)

- c. Cooling Towers and Boilers

If the facility currently or proposes to use cooling towers or boilers that discharge blowdown or other wastestreams to the outfall(s), complete the following table.

Cooling Towers and Boilers

Type of Unit	Number of Units	Daily Avg Blowdown (gallons/day)	Daily Max Blowdown (gallons/day)
Cooling Towers			

Type of Unit	Number of Units	Daily Avg Blowdown (gallons/day)	Daily Max Blowdown (gallons/day)
Boilers			

Item 6. Stormwater Management (Instructions, Page 44)

Will any existing/proposed outfalls discharge stormwater associated with industrial activities, as defined at 40 CFR § 122.26(b)(14), commingled with any other wastestream?

Yes No

If yes, briefly describe the industrial processes and activities that occur outdoors or in a manner which may result in exposure of the activities or materials to stormwater: [Click to enter text.](#)

Item 7. Domestic Sewage, Sewage Sludge, and Septage Management and Disposal (Instructions, Page 44)

Domestic Sewage - Waste and wastewater from humans or household operations that is discharged to a wastewater collection system or otherwise enters a treatment works.

- a. Check the box next to the appropriate method of domestic sewage and domestic sewage sludge treatment or disposal. Complete Worksheet 5.0 or Item 7.b if directed to do so.
 - Domestic sewage is routed (i.e., connected to or transported to) to a WWTP permitted to receive domestic sewage for treatment, disposal, or both. Complete Item 7.b.
 - Domestic sewage disposed of by an on-site septic tank and drainfield system. Complete Item 7.b.
 - Domestic and industrial treatment sludge ARE commingled prior to use or disposal.
 - Industrial wastewater and domestic sewage are treated separately, and the respective sludge IS NOT commingled prior to sludge use or disposal. Complete Worksheet 5.0.
 - Facility is a POTW. Complete Worksheet 5.0.
 - Domestic sewage is not generated on-site.
 - Other (e.g., portable toilets), specify and Complete Item 7.b: [Click to enter text.](#)
- b. Provide the name and TCEQ, NPDES, or TPDES Permit No. of the waste-disposal facility which receives the domestic sewage/septage. If hauled by motorized vehicle, provide the name and TCEQ Registration No. of the hauler.

Domestic Sewage Plant/Hauler Name

Plant/Hauler Name	Permit/Registration No.
N/A	

Item 8. Improvements or Compliance/Enforcement Requirements (Instructions, Page 45)

- a. Is the permittee currently required to meet any implementation schedule for compliance or enforcement?
- Yes No
- b. Has the permittee completed or planned for any improvements or construction projects?
- Yes No
- c. If **yes** to either 8.a or 8.b, provide a brief summary of the requirements and a status update: [Click to enter text.](#)

Item 9. Toxicity Testing (Instructions, Page 45)

Have any biological tests for acute or chronic toxicity been made on any of the discharges or on a receiving water in relation to the discharge within the last three years?

Yes No

If **yes**, identify the tests and describe their purposes: [Click to enter text.](#)

Additionally, attach a copy of all tests performed which **have not** been submitted to the TCEQ or EPA. **Attachment:** [Click to enter text.](#)

Item 10. Off-Site/Third Party Wastes (Instructions, Page 45)

- a. Does or will the facility receive wastes from off-site sources for treatment at the facility, disposal on-site via land application, or discharge via a permitted outfall?

Yes No

If **yes**, provide responses to Items 10.b through 10.d below.

If **no**, proceed to Item 11.

- b. Attach the following information to the application:

- List of wastes received (including volumes, characterization, and capability with on-site wastes).
- Identify the sources of wastes received (including the legal name and addresses of the generators).
- Description of the relationship of waste source(s) with the facility's activities.

Attachment: [Click to enter text.](#)

- c. Is or will wastewater from another TCEQ, NPDES, or TPDES permitted facility commingled with this facility's wastewater after final treatment and prior to discharge via the final outfall/point of disposal?

Yes No

If **yes**, provide the name, address, and TCEQ, NPDES, or TPDES permit number of the contributing facility and a copy of any agreements or contracts relating to this activity.

Attachment: [Click to enter text.](#)

- d. Is this facility a POTW that accepts/will accept process wastewater from any SIU and has/is required to have an approved pretreatment program under the NPDES/TPDES program?

Yes No

If yes, Worksheet 6.0 of this application is required.

Item 11. Radioactive Materials (Instructions, Page 46)

- a. Are/will radioactive materials be mined, used, stored, or processed at this facility?

Yes No

If yes, use the following table to provide the results of one analysis of the effluent for all radioactive materials that may be present. Provide results in pCi/L.

Radioactive Materials Mined, Used, Stored, or Processed

Radioactive Material Name	Concentration (pCi/L)

- b. Does the applicant or anyone at the facility have any knowledge or reason to believe that radioactive materials may be present in the discharge, including naturally occurring radioactive materials in the source waters or on the facility property?

Yes No

If yes, use the following table to provide the results of one analysis of the effluent for all radioactive materials that may be present. Provide results in pCi/L. Do not include information provided in response to Item 11.a.

Radioactive Materials Present in the Discharge

Radioactive Material Name	Concentration (pCi/L)

Item 12. Cooling Water (Instructions, Page 46)

- a. Does the facility use or propose to use water for cooling purposes?

Yes No

If no, stop here. If yes, complete Items 12.b thru 12.f.

- b. Cooling water is/will be obtained from a groundwater source (e.g., on-site well).

Yes No

If yes, stop here. If no, continue.

c. Cooling Water Supplier

1. Provide the name of the owner(s) and operator(s) for the CWIS that supplies or will supply water for cooling purposes to the facility.

Cooling Water Intake Structure(s) Owner(s) and Operator(s)

CWIS ID				
Owner				
Operator				

2. Cooling water is/will be obtained from a Public Water Supplier (PWS)

Yes No

If **no**, continue. If **yes**, provide the PWS Registration No. and stop here: [PWS No. Click to enter text.](#)

3. Cooling water is/will be obtained from a reclaimed water source?

Yes No

If **no**, continue. If **yes**, provide the Reuse Authorization No. and stop here: [Click to enter text.](#)

4. Cooling water is/will be obtained from an Independent Supplier

Yes No

If **no**, proceed to Item 12.d. If **yes**, provide the actual intake flow of the Independent Supplier's CWIS that is/will be used to provide water for cooling purposes and proceed: [Click to enter text.](#)

d. 316(b) General Criteria

1. The CWIS(s) used to provide water for cooling purposes to the facility has or will have a cumulative design intake flow of 2 MGD or greater.

Yes No

2. At least 25% of the total water withdrawn by the CWIS is/will be used at the facility exclusively for cooling purposes on an annual average basis.

Yes No

3. The CWIS(s) withdraw(s)/propose(s) to withdraw water for cooling purposes from surface waters that meet the definition of Waters of the United States in *40 CFR § 122.2*.

Yes No

If **no**, provide an explanation of how the waterbody does not meet the definition of Waters of the United States in *40 CFR § 122.2*: [Click to enter text.](#)

If **yes** to all three questions in Item 12.d, the facility **meets** the minimum criteria to be subject to the full requirements of Section 316(b) of the CWA. Proceed to **Item 12.f**.

If **no** to any of the questions in Item 12.d, the facility **does not meet** the minimum criteria to be subject to the full requirements of Section 316(b) of the CWA; however, a determination is required based upon BPJ. Proceed to **Item 12.e**.

- e. The facility does not meet the minimum requirements to be subject to the fill requirements of Section 316(b) **and uses/proposes to use cooling towers**.

Yes No

If **yes**, stop here. If **no**, complete Worksheet 11.0, Items 1.a, 1.b.1-3 and 6, 2.b.1, and 3.a to allow for a determination based upon BPJ.

f. Oil and Gas Exploration and Production

1. The facility is subject to requirements at 40 CFR Part 435, Subparts A or D.

Yes No

If **yes**, continue. If **no**, skip to Item 12.g.

2. The facility is an existing facility as defined at 40 CFR § 125.92(k) or a new unit at an existing facility as defined at 40 CFR § 125.92(u).

Yes No

If **yes**, complete Worksheet 11.0, Items 1.a, 1.b.1-3 and 6, 2.b.1, and 3.a to allow for a determination based upon BPJ. If **no**, skip to Item 12.g.3.

g. Compliance Phase and Track Selection

1. Phase I - New facility subject to 40 CFR Part 125, Subpart I

Yes No

If **yes**, check the box next to the compliance track selection, attach the requested information, and complete Worksheet 11.0, Items 2 and 3, and Worksheet 11.2.

- Track I - AIF greater than 2 MGD, but less than 10 MGD
 - Attach information required by *40 CFR §§ 125.86(b)(2)-(4)*.
- Track I - AIF greater than 10 MGD
 - Attach information required by *40 CFR § 125.86(b)*.
- Track II
 - Attach information required by *40 CFR § 125.86(c)*.

Attachment: [Click to enter text](#).

2. Phase II - Existing facility subject to 40 CFR Part 125, Subpart J

Yes No

If **yes**, complete Worksheets 11.0 through 11.3, as applicable.

3. Phase III - New facility subject to 40 CFR Part 125, Subpart N

Yes No

If **yes**, check the box next to the compliance track selection and provide the requested information.

- Track I - Fixed facility
 - Attach information required by 40 CFR § 125.136(b) and complete Worksheet 11.0, Items 2 and 3, and Worksheet 11.2.
- Track I - Not a fixed facility
 - Attach information required by 40 CFR § 125.136(b) and complete Worksheet 11.0, Item 2 (except CWIS latitude/longitude under Item 2.a).
- Track II - Fixed facility
 - Attach information required by 40 CFR § 125.136(c) and complete Worksheet 11.0, Items 2 and 3.

Attachment: [Click to enter text.](#)

Item 13. Permit Change Requests (Instructions, Page 48)

This item is only applicable to existing permitted facilities.

a. Is the facility requesting a **major amendment** of an existing permit?

- Yes No

If **yes**, list each request individually and provide the following information: 1) detailed information regarding the scope of each request and 2) a justification for each request. Attach any supplemental information or additional data to support each request.

[Click to enter text.](#)

b. Is the facility requesting any **minor amendments** to the permit?

- Yes No

If **yes**, list and describe each change individually.

[Click to enter text.](#)

c. Is the facility requesting any **minor modifications** to the permit?

Yes No

If yes, list and describe each change individually.

Click to enter text.

Item 14. Laboratory Accreditation (Instructions, Page 49)

All laboratory tests performed must meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*, which includes the following general exemptions from National Environmental Laboratory Accreditation Program (NELAP) certification requirements:

- The laboratory is an in-house laboratory and is:
 - periodically inspected by the TCEQ; or
 - located in another state and is accredited or inspected by that state; or
 - performing work for another company with a unit located in the same site; or
 - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

The applicant should review *30 TAC Chapter 25* for specific requirements.

The following certification statement shall be signed and submitted with every application. See the *Signature Page* section in the Instructions, for a list of designated representatives who may sign the certification.

CERTIFICATION:

I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*.

Printed Name: Click to enter text.

Title: Click to enter text.

Signature: Click to enter text.

Date: 11-13-24

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 1.0: EPA CATEGORICAL EFFLUENT GUIDELINES

This worksheet is required for all applications for TPDES permits for discharges of wastewaters subject to EPA categorical effluent limitation guidelines (ELGs).

Item 1. Categorical Industries (Instructions, Page 53)

Is this facility subject to any 40 CFR categorical ELGs outlined on page 53 of the instructions?

Yes No

If no, this worksheet is not required. If yes, provide the appropriate information below.

40 CFR Effluent Guideline

Industry	40 CFR Part

Item 2. Production/Process Data (Instructions, Page 54)

NOTE: For all TPDES permit applications requesting individual permit coverage for discharges of oil and gas exploration and production wastewater (discharges into or adjacent to water in the state, falling under the Oil and Gas Extraction Effluent Guidelines – 40 CFR Part 435), see Worksheet 12.0, Item 2 instead.

a. Production Data

Provide appropriate data for effluent guidelines with production-based effluent limitations.

Production Data

Subcategory	Actual Quantity/Day	Design Quantity/Day	Units

b. Organic Chemicals, Plastics, and Synthetic Fibers Manufacturing Data (40 CFR Part 414)

Provide each applicable subpart and the percent of total production. Provide data for metal-bearing and cyanide-bearing wastestreams, as required by *40 CFR Part 414, Appendices A and B*.

Percentage of Total Production

Subcategory	Percent of Total Production	Appendix A and B - Metals	Appendix A - Cyanide

c. Refineries (40 CFR Part 419)

Provide the applicable subcategory and a brief justification.

Click to enter text.

Item 3. Process/Non-Process Wastewater Flows (Instructions, Page 54)

Provide a breakdown of wastewater flow(s) generated by the facility, including both process and non-process wastewater flow(s). Specify which wastewater flows are to be authorized for discharge under this permit and the disposal practices for wastewater flows, excluding domestic, which are not to be authorized for discharge under this permit.

Click to enter text.

Item 4. New Source Determination (Instructions, Page 54)

Provide a list of all wastewater-generating processes subject to EPA categorical ELGs, identify the appropriate guideline Part and Subpart, and provide the date the process/construction commenced.

Wastewater Generating Processes Subject to Effluent Guidelines

Process	EPA Guideline Part	EPA Guideline Subpart	Date Process/ Construction Commenced

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 2.0: POLLUTANT ANALYSIS

Worksheet 2.0 is required for all applications submitted for a TPDES permit. Worksheet 2.0 is not required for applications for a permit to dispose of all wastewater by land disposal or for discharges solely of stormwater associated with industrial activities.

Item 1. General Testing Requirements (Instructions, Page 55)

- a. Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018): [Click to enter text](#).
- b. Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- c. Read the general testing requirements in the instructions for important information about sampling, test methods, and MALs. If a contact laboratory was used, attach a list which includes the name, contact information, and pollutants analyzed for each laboratory/firm.
Attachment: [Click to enter text](#).

Item 2. Specific Testing Requirements (Instructions, Page 56)

Attach correspondence from TCEQ approving submittal of less than the required number of samples, if applicable. **Attachment:** [Click to enter text](#).

TABLE 1 and TABLE 2 (Instructions, Page 58)

Completion of Tables 1 and 2 is required for all external outfalls for all TPDES permit applications.

Table 1 for Outfall No.: 001

Samples are (check one): Composite Grab

Pollutant	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)
BOD (5-day)	<1.0	<1.0	1.43	<1.0
CBOD (5-day)	<1.0	<1.0	<1.0	<1.0
Chemical oxygen demand	162	102	139	76.6
Total organic carbon	2.45	2.58	2.24	2.68
Dissolved oxygen				
Ammonia nitrogen	<0.1	<0.1	<0.1	
Total suspended solids	5.65	3.2	5.5	2.8
Nitrate nitrogen	0.711	0.553	0.626	0.525
Total organic nitrogen	0.826 (calc)	<0.15 (calc)	<0.15 (calc)	
Total phosphorus	0.951	0.780	0.844	0.746
Oil and grease	<5.65	<5.21	<5.15	<5.56
Total residual chlorine	0.0	0.0	0.0	

Pollutant	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)
Total dissolved solids	655.3	629.8	969.4	4750
Sulfate	749	533	549	516
Chloride	3230	2230	2790	2080
Fluoride	2.83	2.24	2.54	2.25
Total alkalinity (mg/L as CaCO ₃)	1300	862	1040	857
Temperature (°F)	79.9	80.1	78.4	
pH (standard units)	7.43	7.45	7.06	

Table 2 for Outfall No.: 001Samples are (check one): Composite Grab

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Aluminum, total	<200	<200	<200	<200	2.5
Antimony, total	<10	<10	<10	<10	5
Arsenic, total	<10	<10	<10	<10	0.5
Barium, total	155	104	120	97.2	3
Beryllium, total	<2	<2	<2	<2	0.5
Cadmium, total	<2	<2	<2	<2	1
Chromium, total	<10	<10	<10	4.68	3
Chromium, hexavalent	<3	<3	<3	<3	3
Chromium, trivalent	<3	<3	<3	<3	N/A
Copper, total	<10	<10	<10	10	2
Cyanide, available	<10	<10	<10	<10	2/10
Lead, total	<5	<5	<5	<5	0.5
Mercury, total	<0.0005	0.0011	<0.0005	<0.0005	0.005/0.0005
Nickel, total	<10	<10	<10	<10	2
Selenium, total	<10	<10	<10	<10	5
Silver, total	<5	<5	<5	<5	0.5
Thallium, total	<10	<10	<10	<10	0.5
Zinc, total	<50	<50	<50	<50	5.0

TABLE 3 (Instructions, Page 58)

Completion of Table 3 is required for all **external outfalls** which discharge process wastewater.

Partial completion of Table 3 is required for all **external outfalls** which discharge non-process wastewater and stormwater associated with industrial activities commingled with other wastestreams (see instructions for additional guidance).

Table 3 for Outfall No.: Click to enter text. Samples are (check one): Composite Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Acrylonitrile					50
Anthracene					10
Benzene					10
Benzidine					50
Benzo(a)anthracene					5
Benzo(a)pyrene					5
Bis(2-chloroethyl)ether					10
Bis(2-ethylhexyl)phthalate					10
Bromodichloromethane [Dichlorobromomethane]					10
Bromoform					10
Carbon tetrachloride					2
Chlorobenzene					10
Chlorodibromomethane [Dibromochloromethane]					10
Chloroform					10
Chrysene					5
m-Cresol [3-Methylphenol]					10
o-Cresol [2-Methylphenol]					10
p-Cresol [4-Methylphenol]					10
1,2-Dibromoethane					10
m-Dichlorobenzene [1,3-Dichlorobenzene]					10
o-Dichlorobenzene [1,2-Dichlorobenzene]					10
p-Dichlorobenzene [1,4-Dichlorobenzene]					10
3,3'-Dichlorobenzidine					5
1,2-Dichloroethane					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
1,1-Dichloroethene [1,1-Dichloroethylene]					10
Dichloromethane [Methylene chloride]					20
1,2-Dichloropropane					10
1,3-Dichloropropene [1,3-Dichloropropylene]					10
2,4-Dimethylphenol					10
Di-n-Butyl phthalate					10
Ethylbenzene					10
Fluoride					500
Hexachlorobenzene					5
Hexachlorobutadiene					10
Hexachlorocyclopentadiene					10
Hexachloroethane					20
Methyl ethyl ketone					50
Nitrobenzene					10
N-Nitrosodiethylamine					20
N-Nitroso-di-n-butylamine					20
Nonylphenol					333
Pentachlorobenzene					20
Pentachlorophenol					5
Phenanthrene					10
Polychlorinated biphenyls (PCBs) (**)					0.2
Pyridine					20
1,2,4,5-Tetrachlorobenzene					20
1,1,2,2-Tetrachloroethane					10
Tetrachloroethene [Tetrachloroethylene]					10
Toluene					10
1,1,1-Trichloroethane					10
1,1,2-Trichloroethane					10
Trichloroethene [Trichloroethylene]					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
2,4,5-Trichlorophenol					50
TTHM (Total trihalomethanes)					10
Vinyl chloride					10

(*) Indicate units if different from µg/L.

(**) Total of detects for PCB-1242, PCB-1254, PCB-1221, PCB-1232, PCB-1248, PCB-1260, and PCB-1016. If all non-detects, enter the highest non-detect preceded by a "<".

TABLE 4 (Instructions, Pages 58-59)

Partial completion of Table 4 **is required** for each **external outfall** based on the conditions below.

a. Tributyltin

Is this facility an industrial/commercial facility which currently or proposes to directly dispose of wastewater from the types of operations listed below or a domestic facility which currently or proposes to receive wastewater from the types of industrial/commercial operations listed below?

Yes No

If yes, check the box next to each of the following criteria which apply and provide the appropriate testing results in Table 4 below (check all that apply).

- Manufacturers and formulators of tributyltin or related compounds.
- Painting of ships, boats and marine structures.
- Ship and boat building and repairing.
- Ship and boat cleaning, salvage, wrecking and scaling.
- Operation and maintenance of marine cargo handling facilities and marinas.
- Facilities engaged in wood preserving.
- Any other industrial/commercial facility for which tributyltin is known to be present, or for which there is any reason to believe that tributyltin may be present in the effluent.

b. Enterococci (discharge to saltwater)

This facility discharges/proposes to discharge directly into saltwater receiving waters **and** Enterococci bacteria are expected to be present in the discharge based on facility processes.

Yes No

Domestic wastewater is/will be discharged.

Yes No

If **yes to either** question, provide the appropriate testing results in Table 4 below.

c. E. coli (discharge to freshwater)

This facility discharges/proposes to discharge directly into freshwater receiving waters **and** *E. coli* bacteria are expected to be present in the discharge based on facility processes.

Yes No

Domestic wastewater is/will be discharged.

Yes No

If **yes to either** question, provide the appropriate testing results in Table 4 below.

Table 4 for Outfall No.: Click to enter text. Samples are (check one): Composite Grab

Pollutant	Sample 1	Sample 2	Sample 3	Sample 4	MAL
Tributyltin (µg/L)					0.010
Enterococci (cfu or MPN/100 mL)					N/A
<i>E. coli</i> (cfu or MPN/100 mL)					N/A

TABLE 5 (Instructions, Page 59)

Completion of Table 5 is required for all **external outfalls** which discharge process wastewater from a facility which manufactures or formulates pesticides or herbicides or other wastewaters which may contain pesticides or herbicides.

If this facility does not/will not manufacture or formulate pesticides or herbicides and does not/will not discharge other wastewaters that may contain pesticides or herbicides, check N/A.

N/A

Table 5 for Outfall No.: Click to enter text. Samples are (check one): Composite Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Aldrin					0.01
Carbaryl					5
Chlordane					0.2
Chlorpyrifos					0.05
4,4'-DDD					0.1
4,4'-DDE					0.1
4,4'-DDT					0.02
2,4-D					0.7
Danitol [Fenpropathrin]					—
Demeton					0.20
Diazinon					0.5/0.1
Dicofol [Kelthane]					1
Dieldrin					0.02
Diuron					0.090

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)*
Endosulfan I (<i>alpha</i>)					0.01
Endosulfan II (<i>beta</i>)					0.02
Endosulfan sulfate					0.1
Endrin					0.02
Guthion [Azinphos methyl]					0.1
Heptachlor					0.01
Heptachlor epoxide					0.01
Hexachlorocyclohexane (<i>alpha</i>)					0.05
Hexachlorocyclohexane (<i>beta</i>)					0.05
Hexachlorocyclohexane (<i>gamma</i>) [Lindane]					0.05
Hexachlorophene					10
Malathion					0.1
Methoxychlor					2.0
Mirex					0.02
Parathion (ethyl)					0.1
Toxaphene					0.3
2,4,5-TP [Silvex]					0.3

* Indicate units if different from µg/L.

TABLE 6 (Instructions, Page 59)

Completion of Table 6 is required for all external outfalls.

Table 6 for Outfall No.: **001**

Samples are (check one): Composite Grab

Pollutants	Believed Present	Believed Absent	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)	MAL (µg/L)*
Bromide	<input type="checkbox"/>	<input checked="" type="checkbox"/>					400
Color (PCU)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Nitrate-Nitrite (as N)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Sulfide (as S)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Sulfite (as SO ₃)	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Surfactants	<input type="checkbox"/>	<input checked="" type="checkbox"/>					—
Boron, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					20
Cobalt, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					0.3
Iron, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					7
Magnesium, total	<input checked="" type="checkbox"/>	<input type="checkbox"/>	106	73.9	80.8		20
Manganese, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					0.5
Molybdenum, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					1
Tin, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					5
Titanium, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>					30

TABLE 7 (Instructions, Page 60)

Check the box next to any of the industrial categories applicable to this facility. If no categories are applicable, check N/A. If GC/MS testing is required, check the box provided to confirm the testing results for the appropriate parameters are provided with the application.

N/A

Table 7 for Applicable Industrial Categories

Industrial Category	40 CFR Part	Volatiles Table 8	Acids Table 9	Bases/ Neutrals Table 10	Pesticides Table 11
<input type="checkbox"/> Adhesives and Sealants		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Aluminum Forming	467	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Auto and Other Laundries		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Battery Manufacturing	461	<input type="checkbox"/> Yes	No	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Coal Mining	434	No	No	No	No
<input type="checkbox"/> Coil Coating	465	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Copper Forming	468	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Electric and Electronic Components	469	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Electroplating	413	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Explosives Manufacturing	457	No	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Foundries		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Gum and Wood Chemicals - Subparts A,B,C,E	454	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Gum and Wood Chemicals - Subparts D,F	454	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Inorganic Chemicals Manufacturing	415	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Iron and Steel Manufacturing	420	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Leather Tanning and Finishing	425	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Mechanical Products Manufacturing		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Nonferrous Metals Manufacturing	421,471	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Oil and Gas Extraction - Subparts A, D, E, F, G, H	435	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Ore Mining - Subpart B	440	No	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Organic Chemicals Manufacturing	414	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Paint and Ink Formulation	446,447	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Pesticides	455	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Petroleum Refining	419	<input type="checkbox"/> Yes	No	No	No
<input type="checkbox"/> Pharmaceutical Preparations	439	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Photographic Equipment and Supplies	459	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Plastic and Synthetic Materials Manufacturing	414	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Plastic Processing	463	<input type="checkbox"/> Yes	No	No	No
<input type="checkbox"/> Porcelain Enameling	466	No	No	No	No
<input type="checkbox"/> Printing and Publishing		<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subpart C	430	<input type="checkbox"/> *	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts F, K	430	<input type="checkbox"/> *	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> *
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts A, B, D, G, H	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> *
<input type="checkbox"/> Pulp and Paperboard Mills - Subparts I, J, L	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *	<input type="checkbox"/> Yes
<input type="checkbox"/> Pulp and Paperboard Mills - Subpart E	430	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> *
<input type="checkbox"/> Rubber Processing	428	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Soap and Detergent Manufacturing	417	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Steam Electric Power Plants	423	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No	No
<input type="checkbox"/> Textile Mills (Not Subpart C)	410	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	No
<input type="checkbox"/> Timber Products Processing	429	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes	<input type="checkbox"/> Yes

* Test if believed present.

TABLES 8, 9, 10, and 11 (Instructions, Page 60)

Completion of Tables 8, 9, 10, and 11 is required as specified in Table 7 for all **external outfalls** that contain process wastewater.

Completion of Tables 8, 9, 10, and 11 may be required for types of industry not specified in Table 7 for specific parameters that are believed to be present in the wastewater.

Table 8 for Outfall No.: Click to enter text. Samples are (check one): Composite Grab

Pollutant	Sample 1 ($\mu\text{g}/\text{L}$)*	Sample 2 ($\mu\text{g}/\text{L}$)*	Sample 3 ($\mu\text{g}/\text{L}$)*	Sample 4 ($\mu\text{g}/\text{L}$)*	MAL ($\mu\text{g}/\text{L}$)
Acrolein					50
Acrylonitrile					50
Benzene					10
Bromoform					10
Carbon tetrachloride					2
Chlorobenzene					10
Chlorodibromomethane					10
Chloroethane					50
2-Chloroethylvinyl ether					10
Chloroform					10
Dichlorobromomethane [Bromodichloromethane]					10
1,1-Dichloroethane					10
1,2-Dichloroethane					10
1,1-Dichloroethylene [1,1-Dichloroethene]					10
1,2-Dichloropropane					10
1,3-Dichloropropylene [1,3-Dichloropropene]					10
Ethylbenzene					10
Methyl bromide [Bromomethane]					50
Methyl chloride [Chloromethane]					50
Methylene chloride [Dichloromethane]					20
1,1,2,2-Tetrachloroethane					10
Tetrachloroethylene [Tetrachloroethene]					10
Toluene					10
1,2-Trans-dichloroethylene [1,2-Trans-dichloroethene]					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
1,1,1-Trichloroethane					10
1,1,2-Trichloroethane					10
Trichloroethylene [Trichloroethene]					10
Vinyl chloride					10

* Indicate units if different from µg/L.

Table 9 for Outfall No.: Click to enter text. Samples are (check one): Composite Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
2-Chlorophenol					10
2,4-Dichlorophenol					10
2,4-Dimethylphenol					10
4,6-Dinitro-o-cresol					50
2,4-Dinitrophenol					50
2-Nitrophenol					20
4-Nitrophenol					50
p-Chloro-m-cresol					10
Pentachlorophenol					5
Phenol					10
2,4,6-Trichlorophenol					10

* Indicate units if different from µg/L.

Table 10 for Outfall No.: Click to enter text. Samples are (check one): Composite Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Acenaphthene					10
Acenaphthylene					10
Anthracene					10
Benzidine					50
Benzo(a)anthracene					5
Benzo(a)pyrene					5
3,4-Benzofluoranthene [Benzo(b)fluoranthene]					10
Benzo(ghi)perylene					20
Benzo(k)fluoranthene					5
Bis(2-chloroethoxy)methane					10

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Bis(2-chloroethyl)ether					10
Bis(2-chloroisopropyl)ether					10
Bis(2-ethylhexyl)phthalate					10
4-Bromophenyl phenyl ether					10
Butylbenzyl phthalate					10
2-Chloronaphthalene					10
4-Chlorophenyl phenyl ether					10
Chrysene					5
Dibenzo(a,h)anthracene					5
1,2-Dichlorobenzene [o-Dichlorobenzene]					10
1,3-Dichlorobenzene [m-Dichlorobenzene]					10
1,4-Dichlorobenzene [p-Dichlorobenzene]					10
3,3'-Dichlorobenzidine					5
Diethyl phthalate					10
Dimethyl phthalate					10
Di-n-butyl phthalate					10
2,4-Dinitrotoluene					10
2,6-Dinitrotoluene					10
Di-n-octyl phthalate					10
1,2-Diphenylhydrazine (as Azobenzene)					20
Fluoranthene					10
Fluorene					10
Hexachlorobenzene					5
Hexachlorobutadiene					10
Hexachlorocyclopentadiene					10
Hexachloroethane					20
Indeno(1,2,3-cd)pyrene					5
Isophorone					10
Naphthalene					10
Nitrobenzene					10
N-Nitrosodimethylamine					50

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
N-Nitrosodi-n-propylamine					20
N-Nitrosodiphenylamine					20
Phenanthrene					10
Pyrene					10
1,2,4-Trichlorobenzene					10

* Indicate units if different from µg/L.

Table 11 for Outfall No.: Samples are (check one): Composite Grab

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
Aldrin					0.01
alpha-BHC [alpha-Hexachlorocyclohexane]					0.05
beta-BHC [beta-Hexachlorocyclohexane]					0.05
gamma-BHC [gamma-Hexachlorocyclohexane]					0.05
delta-BHC [delta-Hexachlorocyclohexane]					0.05
Chlordane					0.2
4,4'-DDT					0.02
4,4'-DDE					0.1
4,4'-DDD					0.1
Dieldrin					0.02
Endosulfan I (alpha)					0.01
Endosulfan II (beta)					0.02
Endosulfan sulfate					0.1
Endrin					0.02
Endrin aldehyde					0.1
Heptachlor					0.01
Heptachlor epoxide					0.01
PCB 1242					0.2
PCB 1254					0.2
PCB 1221					0.2
PCB 1232					0.2
PCB 1248					0.2

Pollutant	Sample 1 (µg/L)*	Sample 2 (µg/L)*	Sample 3 (µg/L)*	Sample 4 (µg/L)*	MAL (µg/L)
PCB 1260					0.2
PCB 1016					0.2
Toxaphene					0.3

* Indicate units if different from µg/L.

Attachment: [Click to enter text.](#)

TABLE 12 (DIOXINS/FURAN COMPOUNDS)

Complete of Table 12 is required for external outfalls, as directed below. (Instructions, Pages 59-60)

Indicate which compound(s) are manufactured or used at the facility and provide a brief description of the conditions of its/their presence at the facility (check all that apply).

- 2,4,5-trichlorophenoxy acetic acid (2,4,5-T) CASRN 93-76-5
- 2-(2,4,5-trichlorophenoxy) propanoic acid (Silvex, 2,4,5-TP) CASRN 93-72-1
- 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate (Erbon) CASRN 136-25-4
- 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate (Ronnel) CASRN 299-84-3
- 2,4,5-trichlorophenol (TCP) CASRN 95-95-4
- hexachlorophene (HCP) CASRN 70-30-4
- None of the above

Description: [Click to enter text.](#)

Does the applicant or anyone at the facility know or have any reason to believe that 2,3,7,8-tetrachlorodibenzo-p-dioxin (TCDD) or any congeners of TCDD may be present in the effluent proposed for discharge?

- Yes No

Description: [Click to enter text.](#)

If yes to either Items a or b, complete Table 12 as instructed.

Table 12 for Outfall No.: [Click to enter text.](#) Samples are (check one): Composite Grab

Compound	Toxicity Equivalent Factors	Wastewater Concentration (ppq)	Wastewater Toxicity Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Toxicity Equivalents (ppt)	MAL (ppq)
2,3,7,8-TCDD	1					10
1,2,3,7,8-PeCDD	1.0					50
2,3,7,8-HxCDDs	0.1					50
1,2,3,4,6,7,8-HpCDD	0.01					50

Compound	Toxicity Equivalent Factors	Wastewater Concentration (ppq)	Wastewater Toxicity Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Toxicity Equivalents (ppt)	MAL (ppq)
2,3,7,8-TCDF	0.1					10
1,2,3,7,8-PeCDF	0.03					50
2,3,4,7,8-PeCDF	0.3					50
2,3,7,8-HxCDFs	0.1					50
2,3,4,7,8-HpCDFs	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					500
PCB 81	0.0003					500
PCB 126	0.1					500
PCB 169	0.03					500
Total						

TABLE 13 (HAZARDOUS SUBSTANCES)

Complete Table 13 is required for all **external outfalls** as directed below. (Instructions, Pages 60-61)

Are there any pollutants listed in the instructions (pages 55-62) believed present in the discharge?

Yes No

Are there pollutants listed in Item 1.c. of Technical Report 1.0 which are believed present in the discharge and have not been analytically quantified elsewhere in this application?

Yes No

If yes to either Items a or b, complete Table 13 as instructed.

Table 13 for Outfall No.: Click to enter text. Samples are (check one): Composite Grab

Pollutant	CASRN	Sample 1 ($\mu\text{g/L}$)	Sample 2 ($\mu\text{g/L}$)	Sample 3 ($\mu\text{g/L}$)	Sample 4 ($\mu\text{g/L}$)	Analytical Method

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 3.0: LAND APPLICATION OF EFFLUENT

This worksheet is required for all applications for a permit to disposal of wastewater by land application (i.e., TLAP).

Item 1. Type of Disposal System (Instructions, Page 69)

Check the box next to the type of land disposal requested by this application:

- | | |
|--------------------------------------------------|-------------------------------------------------------------------------------|
| <input type="checkbox"/> Irrigation | <input type="checkbox"/> Subsurface application |
| <input type="checkbox"/> Evaporation | <input type="checkbox"/> Subsurface soils absorption |
| <input type="checkbox"/> Evapotranspiration beds | <input type="checkbox"/> Surface application |
| <input type="checkbox"/> Drip irrigation system | <input type="checkbox"/> Other, specify: Click to enter text. |

Item 2. Land Application Area (Instructions, Page 69)

Land Application Area Information

Effluent Application (gallons/day)	Irrigation Acreage (acres)	Describe land use & indicate type(s) of crop(s)	Public Access? (Y/N)

Item 3. Annual Cropping Plan (Instructions, Page 69)

Attach the required cropping plan that includes each of the following:

- Cool and warm season plant species
- Breakdown of acreage and percent of total acreage for each crop
- Crop growing season
- Harvesting method/number of harvests
- Minimum/maximum harvest height
- Crop yield goals
- Soils map
- Nitrogen requirements per crop
- Additional fertilizer requirements
- Supplemental watering requirements
- Crop salt tolerances
- Justification for not removing existing vegetation to be irrigated

Attachment:

Item 4. Well and Map Information (Instructions, Page 70)

- a. Check each box to confirm the required information is shown and labeled on the attached USGS map:

- The exact boundaries of the land application area
- On-site buildings
- Waste-disposal or treatment facilities
- Effluent storage and tailwater control facilities
- Buffer zones
- All surface waters in the state onsite and within 500 feet of the property boundaries
- All water wells within $\frac{1}{2}$ -mile of the disposal site, wastewater ponds, or property boundaries
- All springs and seeps onsite and within 500 feet of the property boundaries

Attachment: [Click to enter text.](#)

- b. List and cross reference all water wells located on or within 500 feet of the disposal site, wastewater ponds, or property boundaries in the following table. Attach additional pages as necessary to include all of the wells.

Well and Map Information Table

Well ID	Well Use	Producing? Y/N/U	Open, cased, capped, or plugged?	Proposed Best Management Practice

Attachment: [Click to enter text.](#)

- c. Groundwater monitoring wells or lysimeters are/will be installed around the land application site or wastewater ponds.

- Yes No

If yes, provide the existing/proposed location of the monitoring wells or lysimeters on the site map attached for Item 4.a. Additionally, attach information on the depth of the wells or lysimeters, sampling schedule, and monitoring parameters for TCEQ review, possible modification, and approval.

Attachment: [Click to enter text.](#)

- d. Attach a short groundwater technical report using 30 TAC § 309.20(a)(4) as guidance.

Attachment:

Item 5. Soil Map and Soil Information (Instructions, Page 71)

Check each box to confirm that the following information is attached:

- a. USDA NRCS Soil Survey Map depicting the area to be used for land application with the locations identified by fields and crops.
- b. Breakdown of acreage and percent of total acreage for each soil type.
- c. Copies of laboratory soil analyses. Attachment: [Click to enter text.](#)

Item 6. Effluent Monitoring Data (Instructions, Page 72)

- a. Completion of Table 14 **is required** for all **renewal** and **major amendment** applications. Complete the table with monitoring data for the previous two years for all parameters regulated in the current permit. An additional table has been provided with blank headers for parameters regulated in the current permit which are not listed in Table 14.

Table 14 for Outfall No.: [Click to enter text.](#) Samples are (check one): Composite Grab

Date (mo/yr)	Daily Avg Flow (gpd)	BOD5 (mg/L)	TSS (mg/L)	Nitrogen (mg/L)	Conductivity (mmhos/cm)	Total acres irrigated	Hydraulic Application rate (acre-feet/month)

Item 7. Pollutant Analysis (Instructions, Page 72)

- a. Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018):
- b. Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- c. Complete Tables 15 and 16.

Table 15 for Outfall No.: Samples are (check one): Composite Grab

Pollutant	Sample 1 (mg/L)	Sample 2 (mg/L)	Sample 3 (mg/L)	Sample 4 (mg/L)
BOD (5-day)				
CBOD (5-day)				
Chemical oxygen demand				
Total organic carbon				
Dissolved oxygen				
Ammonia nitrogen				
Total suspended solids				
Nitrate nitrogen				
Total organic nitrogen				
Total phosphorus				
Oil and grease				
Total residual chlorine				
Total dissolved solids				
Sulfate				
Chloride				
Fluoride				
Total alkalinity (mg/L as CaCO ₃)				
Temperature (°F)				
pH (standard units)				

Table 16 for Outfall No.: Samples are (check one): Composite Grab

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Aluminum, total					2.5
Antimony, total					5
Arsenic, total					0.5
Barium, total					3

Pollutant	Sample 1 (µg/L)	Sample 2 (µg/L)	Sample 3 (µg/L)	Sample 4 (µg/L)	MAL (µg/L)
Beryllium, total					0.5
Cadmium, total					1
Chromium, total					3
Chromium, hexavalent					3
Chromium, trivalent					N/A
Copper, total					2
Cyanide, available					2/10
Lead, total					0.5
Mercury, total					0.005/0.0005
Nickel, total					2
Selenium, total					5
Silver, total					0.5
Thallium, total					0.5
Zinc, total					5.0

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 3.1: SURFACE LAND APPLICATION AND APPLICATION

This worksheet is required for all applications for a permit to disposal of wastewater by surface land application or evaporation.

Item 1. Edwards Aquifer (Instructions, Page 73)

- a. Is the facility subject to *30 TAC Chapter 213*, Edwards Aquifer Rules?

Yes No

If no, proceed to Item 2. If yes, complete Items 1.b and 1.c.

- b. Check the box next to the subchapter applicable to the facility.

30 TAC Chapter 213, Subchapter A
 30 TAC Chapter 213, Subchapter B

- c. If *30 TAC Chapter 213, Subchapter A* applies, attach either: 1) a Geologic Assessment (if conducted in accordance with *30 TAC § 213.5*) or 2) a report that contains the following:

- A description of the surface geological units within the proposed land application site and wastewater pond area.
- The location and extent of any sensitive recharge features in the land application site and wastewater pond area
- A list of any proposed BMPs to protect the recharge features.

Attachment: [Click to enter text.](#)

Item 2. Surface Spray/Irrigation (Instructions, Page 73)

- a. Provide the following information on the irrigation operations:

Area under irrigation (acres): [Click to enter text.](#)

Design application rate (acre-ft/acre/yr): [Click to enter text.](#)

Design application frequency (hours/day): [Click to enter text.](#)

Design application frequency (days/week): [Click to enter text.](#)

Design total nitrogen loading rate (lbs nitrogen/acre/year): [Click to enter text.](#)

Average slope of the application area (percent): [Click to enter text.](#)

Maximum slope of the application area (percent): [Click to enter text.](#)

Irrigation efficiency (percent): [Click to enter text.](#)

Effluent conductivity (mmhos/cm): [Click to enter text.](#)

Soil conductivity (mmhos/cm): [Click to enter text.](#)

Curve number: [Click to enter text.](#)

Describe the application method and equipment: [Click to enter text.](#)

- b. Attach a detailed engineering report which includes a water balance, storage volume calculations, and a nitrogen balance. **Attachment:** [Click to enter text.](#)

Item 3. Evaporation Ponds (Instructions, Page 74)

- a. Daily average effluent flow into ponds: [Click to enter text.](#) gallons per day
- b. Attach a separate engineering report of evaporation calculations for average long-term and worst-case critical conditions. **Attachment:** [Click to enter text.](#)

Item 4. Evapotranspiration Beds (Instructions, Page 74)

- a. Provide the following information on the evapotranspiration beds:
Number of beds: [Click to enter text.](#)
Area of bed(s) (acres): [Click to enter text.](#)
Depth of bed(s) (feet): [Click to enter text.](#)
Void ratio of soil in the beds: [Click to enter text.](#)
Storage volume within the beds (include units): [Click to enter text.](#)
Description of any lining to protect groundwater: [Click to enter text.](#)
- b. Attach a certification by a licensed Texas professional engineer that the liner meets TCEQ requirements. **Attachment:** [Click to enter text.](#)
- c. Attach a separate engineering report with water balance, storage volume calculations, and description of the liner. **Attachment:** [Click to enter text.](#)

Item 5. Overland Flow (Instructions, Page 74)

- a. Provide the following information on the overland flow:
Area used for application (acres): [Click to enter text.](#)
Slopes for application area (percent): [Click to enter text.](#)
Design application rate (gpm/foot of slope width): [Click to enter text.](#)
Slope length (feet): [Click to enter text.](#)
Design BOD₅ loading rate (lbs BOD₅/acre/day): [Click to enter text.](#)
Design application frequency (hours/day): [Click to enter text.](#)
Design application frequency (days/week): [Click to enter text.](#)
- b. Attach a separate engineering report with the method of application and design requirements according to 30 TAC § 217.212. **Attachment:** [Click to enter text.](#)

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 3.2: SUBSURFACE IRRIGATION (NON-DRIP)

This worksheet is required for all applications for a permit to disposal of wastewater by subsurface land application.

- Check the box to confirm the Class V Injection Well Inventory/Authorization Form (Worksheet 9.0) has been submitted to the TCEQ UIC Permits Team as directed.

Item 1. Edwards Aquifer (Instructions, Page 75)

- a. The subsurface system is/will be located on the Edwards Aquifer Recharge Zone, as mapped by TCEQ?

Yes No

- b. The subsurface system is/will be located on the Edwards Aquifer Transition Zone, as mapped by TCEQ?

Yes No

If yes to Item 1.a or 1.b, the subsurface system may be prohibited by 30 TAC § 213.8. Contact the Water Quality Assessment Section at (512) 239-4671 for a preapplication meeting.

Item 2. Subsurface Application (Instructions, Page 75)

- a. Check the box next to the type of subsurface land disposal system requested:

Conventional drainfield, beds, or trenches
 Low pressure dosing
 Other: [Click to enter text.](#)

- b. Provide the following information on the irrigation operations:

Application area (acres): [Click to enter text.](#)

Area of drainfield (square feet): [Click to enter text.](#)

Application rate (gal/square ft/day): [Click to enter text.](#)

Depth to groundwater (feet): [Click to enter text.](#)

Area of trench (square feet): [Click to enter text.](#)

Dosing duration per area (hours): [Click to enter text.](#)

Number of beds: [Click to enter text.](#)

Dosing amount per area (inches/day): [Click to enter text.](#)

Soil infiltration rate (inches/hour): [Click to enter text.](#)

Storage volume (gallons): [Click to enter text.](#)

Area of bed(s) (square feet): [Click to enter text.](#)

Soil classification: [Click to enter text.](#)

- c. Attach a separate engineering report using 30 TAC § 309.20, Subchapter C, Land Disposal of Sewage Effluent as guidance, excluding items b(3)(A) and b(3)(B). Include a description of the schedule of dosing basin rotation. Attachment: [Click to enter text.](#)

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 3.3: SUBSURFACE AREA DRIP DISPERSAL SYSTEMS

This worksheet is required for all applications for a permit to dispose of wastewater using a subsurface area drip dispersal system (SADDS).

- Check the box to confirm the Class V Injection Well Inventory/Authorization Form (Worksheet 9.0) has been submitted to the TCEQ UIC Permits Team as directed.

Item 1. Edwards Aquifer (Instructions, Page 76)

- a. The subsurface system is/will be located on the Edwards Aquifer Recharge Zone, as mapped by TCEQ?

Yes No

- b. The subsurface system is/will be located on the Edwards Aquifer Transition Zone, as mapped by TCEQ?

Yes No

If yes to Item 1.a or 1.b, the subsurface system may be prohibited by 30 TAC § 213.8. Contact the Water Quality Assessment Section at (512) 239-4671 for a preapplication meeting.

Item 2. Administrative Information (Instructions, Page 76)

- a. Provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the treatment facility: [Click to enter text.](#)

- b. The owner of the land where the WWTF is/will be located is the same as the owner of the WWTF.

Yes No

If no, provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the land where the WWTF is/will be located: [Click to enter text.](#)

- c. Provide the legal name of the owner of the SADDS: [Click to enter text.](#)

- d. The owner of the SADDS is the same as the owner of the WWTF or the site where the WWTF is/will be located.

Yes No

If no, identify the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in Item 1.c: [Click to enter text.](#)

- e. Provide the legal name of the owner of the land where the SADDS is located: [Click to enter text.](#)

- f. The owner of the land where the SADDS is/will be located is the same as owner of the WWTF, the site where the WWTF is located, or the owner of the SADDS.

Yes No

If **no**, provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in item 1.e: [Click to enter text.](#)

Item 3. SADDS (Instructions, Page 77)

- a. Check the box next to the type SADDS requested by this application:

Subsurface drip/trickle irrigation
 Surface drip irrigation
 Other: [Click to enter text.](#)

- b. Attach a description of the SADDS proposed/used by the facility (see instructions for guidance). **Attachment:** [Click to enter text.](#)

- c. Provide the following information on the SADDS:

Application area (acres): [Click to enter text.](#)

Soil infiltration rate (inches/hour): [Click to enter text.](#)

Average slope of the application area: [Click to enter text.](#)

Maximum slope of the application area: [Click to enter text.](#)

Storage volume (gallons): [Click to enter text.](#)

Major soil series: [Click to enter text.](#)

Depth to groundwater (feet): [Click to enter text.](#)

Effluent conductivity (mmhos/cm): [Click to enter text.](#)

- d. The facility is/will be located west of the boundary shown in *30 TAC § 222.83* **and** using a vegetative cover of non-native grasses over seeded with cool-season grasses.

Yes No

If **yes**, the facility may propose a hydraulic application rate up to, but not to exceed, 0.1 gal/ft²/day.

- e. The facility is/will be located east of the boundary shown in *30 TAC § 222.83* **or** is the facility proposing any crop other than non-native grasses.

Yes No

If **yes**, the facility must use the formula in *30 TAC § 222.83* to calculate the maximum hydraulic application rate.

- f. The facility has or plans to submit an alternative method to calculate the hydraulic application rate for approval by the ED.

Yes No

If yes, provide the following information on the hydraulic application rates:

- Hydraulic application rate (gal/square foot/day): [Click to enter text.](#)
- Nitrogen application rate (gal/square foot/day): [Click to enter text.](#)

g. Provide the following dosing information:

Number of doses per day: [Click to enter text.](#)

Dosing duration per area (hours): [Click to enter text.](#)

Rest period between doses (hours): [Click to enter text.](#)

Dosing amount per area (inches/day): [Click to enter text.](#)

Number of zones: [Click to enter text.](#)

h. The system is/will be a surface drip irrigation system using existing native vegetation as a crop?

- Yes No

If yes, attach the following information:

- A vegetation survey by a certified arborist describing the percent canopy cover and relative percentage of major overstory and understory plant species.
Attachment: [Click to enter text.](#)
- Attach a separate engineering report using *30 TAC § 309.20, Subchapter C, Land Disposal of Sewage Effluent* as guidance, excluding items b(3)(A) and b(3)(B). Include a description of the schedule of dosing basin rotation.
Attachment: [Click to enter text.](#)

Item 4. Required Plans (Instructions, Page 78)

a. Attach a Soil Evaluation with all information required in *30 TAC § 222.73*.

Attachment: [Click to enter text.](#)

b. Attach a Site Preparation Plan with all information required in *30 TAC § 222.75*.

Attachment: [Click to enter text.](#)

c. Attach a Recharge Feature Plan with all information required in *30 TAC § 222.79*.

Attachment: [Click to enter text.](#)

d. Provide soil sampling and testing with all information required in *30 TAC § 222.157*.

Attachment: [Click to enter text.](#)

Item 5. Flood and Run-On Protection (Instructions, Page 79)

a. Is the existing/proposed SADDS located within the 100-year frequency flood level?

- Yes No

Source: [Click to enter text.](#)

If yes, describe how the site will be protected from inundation: [Click to enter text.](#)

b. Is the existing/proposed SADDS within a designated floodway?

Yes No

If yes, attach either the FEMA flood map or alternate information used to make this determination. Attachment: [Click to enter text.](#)

Item 6. Surface Waters in The State (Instructions, Page 79)

a. Attach a buffer map which shows the appropriate buffers on surface waters in the state, water wells, and springs/seeps. Attachment: [Click to enter text.](#)

b. The facility has or plans to request a buffer variance from water wells or waters in the state?

Yes No

If yes, attach the additional information required in 30 TAC § 222.81(c). Attachment: [Click to enter text.](#)

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 4.0: RECEIVING WATERS

This worksheet is required for all TPDES permit applications.

Item 1. Domestic Drinking Water Supply (Instructions, Page 80)

- a. There is a surface water intake for domestic drinking water supply located within 5 (five) miles downstream from the point/proposed point of discharge.

Yes No

If no, stop here and proceed to Item 2. If yes, provide the following information:

1. The legal name of the owner of the drinking water supply intake: [Click to enter text](#).
2. The distance and direction from the outfall to the drinking water supply intake: [Click to enter text](#).

- b. Locate and identify the intake on the USGS 7.5-minute topographic map provided for Administrative Report 1.0.

Check this box to confirm the above requested information is provided.

Item 2. Discharge Into Tidally Influenced Waters (Instructions, Page 80)

If the discharge is to tidally influenced waters, complete this section. Otherwise, proceed to Item 3.

- a. Width of the receiving water at the outfall: into the gulf feet

- b. Are there oyster reefs in the vicinity of the discharge?

Yes No

If yes, provide the distance and direction from the outfall(s) to the oyster reefs: 0.15 mile SSE from the outfall

- c. Are there sea grasses within the vicinity of the point of discharge?

Yes No

If yes, provide the distance and direction from the outfall(s) to the grasses: [Click to enter text](#).

Item 3. Classified Segment (Instructions, Page 80)

The discharge is/will be directly into (or within 300 feet of) a classified segment.

Yes No

If yes, stop here and do not complete Items 4 and 5 of this worksheet or Worksheet 4.1.

If no, complete Items 4 and 5 and Worksheet 4.1 may be required.

Item 4. Description of Immediate Receiving Waters (Instructions, Page 80)

- a. Name of the immediate receiving waters: [Click to enter text.](#)
- b. Check the appropriate description of the immediate receiving waters:
 - Lake or Pond
 - Surface area (acres): [Click to enter text.](#)
 - Average depth of the entire water body (feet): [Click to enter text.](#)
 - Average depth of water body within a 500-foot radius of the discharge point (feet): [Click to enter text.](#)
 - Man-Made Channel or Ditch
 - Stream or Creek
 - Freshwater Swamp or Marsh
 - Tidal Stream, Bayou, or Marsh
 - Open Bay
 - Other, specify:

If **Man-Made Channel or Ditch** or **Stream or Creek** were selected above, provide responses to Items 4.c – 4.g below:

- c. For **existing discharges**, check the description below that best characterizes the area **upstream** of the discharge.

For **new discharges**, check the description below that best characterizes the area **downstream** of the discharge.

- Intermittent (dry for at least one week during most years)
- Intermittent with Perennial Pools (enduring pools containing habitat to maintain aquatic life uses)
- Perennial (normally flowing)

Check the source(s) of the information used to characterize the area upstream (existing discharge) or downstream (new discharge):

- USGS flow records
- personal observation
- historical observation by adjacent landowner(s)
- other, specify: [Click to enter text.](#)

- d. List the names of all perennial streams that join the receiving water within three miles downstream of the discharge point: [Click to enter text.](#)
- e. The receiving water characteristics change within three miles downstream of the discharge (e.g., natural or man-made dams, ponds, reservoirs, etc.).

Yes No

If yes, describe how: [Click to enter text.](#)

- f. General observations of the water body during normal dry weather conditions: [Click to enter text.](#)

Date and time of observation: [Click to enter text.](#)

- g. The water body was influenced by stormwater runoff during observations.

Yes No

If yes, describe how: [Click to enter text.](#)

Item 5. General Characteristics of Water Body (Instructions, Page 81)

- a. Is the receiving water upstream of the existing discharge or proposed discharge site influenced by any of the following (check all that apply):

<input type="checkbox"/> oil field activities	<input checked="" type="checkbox"/> urban runoff
<input type="checkbox"/> agricultural runoff	<input type="checkbox"/> septic tanks
<input checked="" type="checkbox"/> upstream discharges	<input type="checkbox"/> other, specify: Click to enter text.

- b. Uses of water body observed or evidence of such uses (check all that apply):

<input type="checkbox"/> livestock watering	<input type="checkbox"/> industrial water supply
<input checked="" type="checkbox"/> non-contact recreation	<input type="checkbox"/> irrigation withdrawal
<input type="checkbox"/> domestic water supply	<input checked="" type="checkbox"/> navigation
<input checked="" type="checkbox"/> contact recreation	<input type="checkbox"/> picnic/park activities
<input checked="" type="checkbox"/> fishing	<input type="checkbox"/> other, specify: Click to enter text.

- c. Description which best describes the aesthetics of the receiving water and the surrounding area (check only one):

<input type="checkbox"/> Wilderness: outstanding natural beauty; usually wooded or un-pastured area; water clarity exceptional
<input type="checkbox"/> Natural Area: trees or native vegetation common; some development evident (from fields, pastures, dwellings); water clarity discolored
<input checked="" type="checkbox"/> Common Setting: not offensive, developed but uncluttered; water may be colored or turbid
<input type="checkbox"/> Offensive: stream does not enhance aesthetics; cluttered; highly developed; dumping areas; water discolored

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 4.1: WATERBODY PHYSICAL CHARACTERISTICS

The following information is required for new applications, EPA-designated Major facilities, and major amendment applications requesting to add an outfall if the receiving waters are perennial or intermittent with perennial pools (including impoundments) for a TDPES permit. Complete the transects downstream of the existing or proposed discharges.

Item 1. Data Collection (Instructions, Page 82)

- a. Date of study: [Click to enter text.](#) Time of study: [Click to enter text.](#)
Waterbody name: [Click to enter text.](#)
General location: [Click to enter text.](#)
- b. Type of stream upstream of an existing discharge or downstream of a proposed discharge (check only one):
 perennial intermittent with perennial pools impoundment
- c. No. of defined stream bends:
Well: [Click to enter text.](#) Moderately: [Click to enter text.](#) Poorly: [Click to enter text.](#)
- d. No. of riffles: [Click to enter text.](#)
- e. Evidence of flow fluctuations (check one):
 Minor Moderate Severe
- f. Provide the observed stream uses and where there is evidence of channel obstructions/modifications: [Click to enter text.](#)
- g. Complete the following table with information regarding the transect measurements.

Stream Transect Data

Transect Location	Habitat Type*	Water Surface Width (ft)	Stream Depths (ft)**								

* riffle, run, glide, or pool

** channel bed to water surface

Item 2. Summarize Measurements (Instructions, Page 83)

Provide the following information regarding the transect measurements:

Streambed slope of entire reach (from USGS map in ft. /ft.): [Click to enter text.](#)

Approximate drainage area above the most downstream transect from USGS map or county highway map (square miles): [Click to enter text.](#)

Length of stream evaluated (ft): [Click to enter text.](#)

Number of lateral transects made: [Click to enter text.](#)

Average stream width (ft): [Click to enter text.](#)

Average stream depth (ft): [Click to enter text.](#)

Average stream velocity (ft/sec): [Click to enter text.](#)

Instantaneous stream flow (ft³/sec): [Click to enter text.](#)

Indicate flow measurement method (VERY IMPORTANT - type of meter, floating chip timed over a fixed distance, etc.): [Click to enter text.](#)

Flow fluctuations (i.e., minor, moderate, or severe): [Click to enter text.](#)

Size of pools (i.e., large, small, moderate, or none): [Click to enter text.](#)

Maximum pool depth (ft): [Click to enter text.](#)

Total number of stream bends: [Click to enter text.](#)

Number well defined: [Click to enter text.](#)

Number moderately defined: [Click to enter text.](#)

Number poorly defined: [Click to enter text.](#)

Total number of riffles: [Click to enter text.](#)

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 5.0: SEWAGE SLUDGE MANAGEMENT AND DISPOSAL

The following information **is required** for all TPDES permit applications that meet the conditions as outlined in Technical Report 1.0, Item 7.

Item 1. Sewage Sludge Solids Management Plan (Instructions, Page 84)

a. Is this a new permit application or an amendment permit application?

Yes No

b. Does or will the facility discharge in the Lake Houston watershed?

Yes No

If **yes** to either Item 1.a **or** 1.b, attach a solids management plan. **Attachment:** [Click to enter text.](#)

Item 2. Sewage Sludge Management and Disposal (Instructions, Page 84)

a. Check the box next to the sludge disposal method(s) authorized under the facility's existing permit (check all that apply).

- Permitted landfill
- Marketing and distribution by the permittee, attach Form TCEQ-00551
- Registered land application site, attach Form TCEQ-00565
- Processed by the permittee, attach Form TCEQ-00744
- Surface disposal site (sludge monofill), attach Form TCEQ-00744
- Transported to another WWTP
- Beneficial land application, attach Form TCEQ-10451
- Incineration, attach Form TCEQ-00744

Based on the selection(s) made above, complete and attach the required TCEQ forms as directed. Failure to submit the required TCEQ form will result in delays in processing the application

Attachment: [Click to enter text.](#)

b. Provide the following information for each disposal site:

Disposal site name: [Click to enter text.](#)

TCEQ Permit/Registration Number: [Click to enter text.](#)

County where disposal site is located: [Click to enter text.](#)

c. Method of sewage sludge transportation:

- truck train pipe other: [Click to enter text.](#)

TCEQ Hauler Registration Number: [Click to enter text.](#)

d. Sludge is transported as a:

- liquid semi-liquid semi-solid solid

e. Purpose of land application: reclamation soil conditioning N/A

f. If sewage sludge is transported to another WWTP for treatment, attach a written statement or copy of contractual agreements confirming that the WWTP identified above will accept and be responsible for the sludge from this facility for the life of the permit (at least 5 years).

Attachment: [Click to enter text.](#)

Item 3. Authorization for Sewage Sludge Disposal (Instructions, Page 85)

If this is a new or major amendment application which requests authorization of a new sewage sludge disposal method, check the new sewage disposal method(s) requested for authorization (check all that apply):

- Marketing and distribution by the permittee, attach Form TCEQ-00551
- Processed by the permittee, attach Form TCEQ-00744
- Surface disposal site (sludge monofill), attach Form TCEQ-00744
- Beneficial land application, attach Form TCEQ-10451
- Incineration, attach Form TCEQ-00744

Based on the selection(s) made above, complete and attach any required TCEQ forms, as directed. Failure to submit the required TCEQ form will result in delays in processing the application.

Attachment: [Click to enter text.](#)

NOTE: New authorization for beneficial land application, incineration, processing, or disposal in the TPDES permit or TLAP **requires a major amendment to the permit**. New authorization for composting may require a major amendment to the permit. See the instructions to determine if a major amendment is required or if authorization for composting can be added through the renewal process.

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following information is required for all applications for publicly-owned treatment works (POTWs).

For an explanation of the terms used in this worksheet, refer to the General Definitions on pages 4-12 and the Definitions Relating to Pretreatment on pages 13-14 of the Instructions.

Item 1. All POTWs (Instructions, Page 86)

- a. Complete the following table with the number of each type of industrial users (IUs) that discharge to the POTW and the daily average flows from each.

Industrial User Information

Type of Industrial User	Number of Industrial Users	Daily Average Flow (gallons per day)
CIU		
SIU - Non-categorical		
Other IU		

- b. In the past three years, has the POTW experienced treatment plant interference?

Yes No

If yes, identify the date(s), duration, nature of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IU(s) that may have caused the interference: [Click to enter text](#).

- c. In the past three years, has the POTW experienced pass-through?

Yes No

If yes, identify the date(s), duration, pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass-through event. Include the names of the IU(s) that may have caused the pass-through: [Click to enter text](#).

- d. Does the POTW have, or is it required to develop, an approved pretreatment program?

Yes No

If yes, answer all questions in Item 2 and skip Item 3.

If no, skip Item 2 and answer all questions in Item 3 for each SIU and CIU.

Item 2. POTWs With Approved Pretreatment Programs or Those Required To Develop A Pretreatment Program (Instructions, Page 86)

- a. Have there been any substantial modifications to the POTW's approved pretreatment program that have not been submitted to the Approval Authority (TCEQ) for approval according to 40 CFR § 403.18?

Yes No

If yes, include an attachment which identifies all substantial modifications that have not been submitted to the TCEQ and the purpose of the modifications.

Attachment: [Click to enter text.](#)

- b. Have there been any non-substantial modifications to the POTW's approved pretreatment program that have not been submitted to the Approval Authority (TCEQ)?

Yes No

If yes, include an attachment which identifies all non-substantial modifications that have not been submitted to the TCEQ and the purpose of the modification.

Attachment: [Click to enter text.](#)

- c. List all parameters measured above the MAL in the POTW's effluent monitoring during the last three years:

Effluent Parameters Measured Above the MAL

Pollutant	Concentration	MAL	Units	Date

Attachment: [Click to enter text.](#)

- d. Has any SIU, CIU, or other IU caused or contributed to any other problems (excluding interference or pass-through) at the POTW in the past three years?

Yes No

If yes, provide a description of each episode, including date(s), duration, description of problems, and probable pollutants. Include the name(s) of the SIU(s)/CIU(s)/other IU(s) that may have caused or contributed to any of the problems: [Click to enter text.](#)

Item 3. Significant Industrial User and Categorical Industrial User Information (Instructions, Pages 88-87)

POTWs that **do not** have an approved pretreatment program are **required** to provide the following information for each SIU and CIU:

- a. Mr. or Ms.: [Click to enter text.](#) First/Last Name: [Click to enter text.](#)

Organization Name: [Click to enter text.](#) SIC Code: [Click to enter text.](#)

Phone number: [Click to enter text.](#) Email address: [Click to enter text.](#)

Physical Address: [Click to enter text.](#) City/State/ZIP Code: [Click to enter text.](#)

Attachment: [Click to enter text.](#)

- b. Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (e.g., process and non-process wastewater): [Click to enter text.](#)

c. Provide a description of the principal products(s) or service(s) performed: [Click to enter text](#)

d. Flow rate information

Flow Rate Information

Effluent Type	Discharge Day (gallons per day)	Discharge Frequency (Continuous, batch, or intermittent)
Process Wastewater		
Non-process Wastewater		

e. Pretreatment Standards

1. Is the SIU or CIU subject to technology-based local limits as defined in the application instructions?

Yes No

2. Is the SIU subject to categorical pretreatment standards?

Yes No

If yes, provide the category and subcategory or subcategories in the SIUs Subject To Categorical Pretreatment Standards table.

SIUs Subject to Categorical Pretreatment Standards

Category in 40 CFR	Subcategory in 40 CFR	Subcategory in 40 CFR	Subcategory in 40 CFR	Subcategory in 40 CFR

f. Has the SIU or CIU caused or contributed to any problem(s) (e.g., interferences, pass through, odors, corrosion, blockages) at the POTW in the past three years?

Yes No

If yes, provide a description of each episode, including dates, duration, description of problems, and probable pollutants, and include the name(s) of the SIU(s)/CIU(s) that may have caused or contributed to the problem(s): [Click to enter text](#).

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 7.0: STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITIES

This worksheet is required for all TPDES permit applications requesting individual permit coverage for discharges consisting of either: 1) solely of stormwater discharges associated with industrial activities, as defined in 40 CFR § 122.26(b)(14)(i-xi), or 2) stormwater discharges associated with industrial activities and any of the listed allowable non-stormwater discharges, as defined in the MSGP (TXR05000), Part II, Section A, Item 6.

Discharges of stormwater as defined in 40 CFR § 122.26 (b)(13) are not required to obtain authorization under a TPDES permit (see exceptions at 40 CFR §§ 122.26(a)(1) and (9)). Authorization for discharge may be required from a local municipal separate storm sewer system.

Item 1. Applicability (Instructions, Page 89)

Do discharges from any of the existing/proposed outfalls consist either 1) solely of stormwater discharges associated with industrial activities or 2) stormwater discharges associated with industrial activities and any of the allowable non-stormwater discharges?

Yes No

If no, stop here. If yes, proceed as directed.

Item 2. Stormwater Coverage (Instructions, Page 89)

List each existing/proposed stormwater outfall at the facility and indicate which type of authorization covers or is proposed to cover discharges.

Authorization Coverage

Outfall	Authorization under MSGP	Authorized Under Individual Permit
	<input type="checkbox"/>	<input type="checkbox"/>

If all existing/proposed outfalls which discharge stormwater associated with industrial activities (and any of the allowable non-stormwater discharges) are authorized under the MSGP, stop here.

If seeking authorization for any outfalls which discharge stormwater associated with industrial activities (and any of the allowable non-stormwater discharges) under an individual permit, proceed.

NOTE: The following information is required for each existing/proposed stormwater outfall for which the facility is seeking individual permit authorization under this application

Item 3. Site Map (Instructions, Page 90)

Attach a site map or maps (drawn to scale) of the entire facility with the following information.

- the location of each stormwater outfall to be covered by the permit
- an outline of the drainage area that is within the facility's boundary and that contributes stormwater to each outfall to be covered by the permit
- connections or discharge points to municipal separate storm sewer systems
- locations of all structures (e.g. buildings, garages, storage tanks)
- structural control devices that are designed to reduce pollution in discharges of stormwater associated with industrial activities
- process wastewater treatment units (including ponds)
- bag house and other air treatment units exposed to stormwater (stormwater runoff, snow melt runoff, and surface runoff and drainage)
- landfills; scrapyards; surface water bodies (including wetlands)
- vehicle and equipment maintenance areas
- physical features of the site that may influence discharges of stormwater associated with industrial activities or contribute a dry weather flow
- locations where spills or leaks of reportable quality (as defined in *30 TAC § 327.4*) have occurred during the three years before this application was submitted to obtain coverage under an individual permit
- processing areas, storage areas, material loading/unloading areas, and other locations where significant materials are exposed to stormwater (stormwater runoff, snow melt runoff, and surface runoff and drainage)

Check the box to confirm all above information was provided on the facility site map(s).

Attachment: [Click to enter text.](#)

Item 4. Facility/Site Information (Instructions, Page 90)

- a. Provide the area of impervious surface and the total area drained by each stormwater outfall requested for authorization by this permit application.

Impervious Surfaces

Outfall	Area of Impervious Surface (include units)	Total Area Drained (include units)

- b. Provide the following local area rainfall information and the source of the information.

Wettest month: [Click to enter text](#).

Average rainfall for wettest month (total inches): [Click to enter text](#).

25-year, 24-hour rainfall (inches): [Click to enter text](#).

Source: [Click to enter text](#).

- c. Attach an inventory, or list, of materials currently handled at the facility that may be exposed to precipitation. **Attachment:** [Click to enter text](#).
- d. Attach narrative descriptions of the industrial processes and activities involving the materials in the above-listed inventory that occur outdoors or in some manner that may result in exposure of the materials to precipitation or runoff (see instructions for guidance). **Attachment:** [Click to enter text](#).
- e. Describe any BMPs and controls the facility uses/proposes to prevent or effectively reduce pollution in stormwater discharges from the facility: [Click to enter text](#).

Item 5. Pollutant Analysis (Instructions, Page 91)

- a. Provide the date range of all sampling events conducted to obtain the analytical data submitted with this application (e.g., 05/01/2018-05/30/2018): [Click to enter text](#).
- b. Check the box to confirm all samples were collected no more than 12 months prior to the date of application submittal.
- c. Complete Table 17 as directed on page 92 of the Instructions.

Table 17 for Outfall No.: [Click to enter text](#).

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
pH (standard units)	(max)	—	(min)	—		—
Total suspended solids						—
Chemical oxygen demand						—
Total organic carbon						—
Oil and grease						—
Arsenic, total						0.0005
Barium, total						0.003
Cadmium, total						0.001
Chromium, total						0.003
Chromium, trivalent						—
Chromium, hexavalent						0.003
Copper, total						0.002

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled	MAL (mg/L)
Lead, total						0.0005
Mercury, total						0.000005
Nickel, total						0.002
Selenium, total						0.005
Silver, total						0.0005
Zinc, total						0.005

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

d. Complete Table 18 as directed on pages 92-94 of the Instructions.

Table 18 for Outfall No.: [Click to enter text.](#)

Pollutant	Grab Sample* Maximum (mg/L)	Composite Sample** Maximum (mg/L)	Grab Sample* Average (mg/L)	Composite Sample** Average (mg/L)	Number of Storm Events Sampled

* Taken during first 30 minutes of storm event

** Flow-weighted composite sample

Attachment: [Click to enter text.](#)

Item 6. Storm Event Data (Instructions, Page 93)

Provide the following data for the storm event(s) which resulted in the maximum values for the analytical data submitted:

Date of storm event: [Click to enter text.](#)

Duration of storm event (minutes): [Click to enter text.](#)

Total rainfall during storm event (inches): [Click to enter text.](#)

Number of hours the between beginning of the storm measured and the end of the previous measurable storm event (hours): [Click to enter text.](#)

Maximum flow rate during rain event (gallons/minute): [Click to enter text.](#)

Total stormwater flow from rain event (gallons): [Click to enter text.](#)

Provide a description of the method of flow measurement or estimate:

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 8.0: AQUACULTURE

This worksheet is required for all TPDES permit applications requesting individual permit coverage for discharges of aquaculture wastewater.

Item 1. Facility/Site Information (Instructions, Page 94)

- Complete the following table with information regarding production ponds, raceways, and fabricated tanks at the facility.

Production Pond Descriptions

Number of Ponds	Dimensions (include units)	Area of Each Pond (include units)	Number of Ponds x Area of Ponds (include Units)

Total surface area of all ponds: [Click to enter text.](#)

Raceway Descriptions

Number of Raceways	Dimensions (include units)

Fabricated Tank Descriptions

Number of Tanks	Dimensions (include units)

b. Does the facility have a TPWD-approved emergency plan?

Yes No

If yes, attach a copy of the approved plan.

Attachment: [Click to enter text.](#)

c. Does the facility have an aquatic plant transplant authorization?

Yes No

If yes, attach a copy of the authorization letter.

Attachment: [Click to enter text.](#)

d. Provide the number of aquaculture facilities located within 25-miles of this facility: [Click to enter text.](#)

Item 2. Species Identification (Instructions, Page 95)

Complete the following table regarding each species raised, source, origin, and disease status of the stock. Identify and attach copies of any current relevant authorizations or permits that authorize the species.

Stock Species Information

Species	Source of Stock	Origin of Stock	Disease Status	Authorizations

Attachment: [Click to enter text.](#)

Item 3. Stock Management Plan (Instructions, Page 95)

Attach a detailed stock management plan: [Click to enter text.](#)

Item 4. Water Treatment and Discharge Description (Instructions, Page 96)

Attach a detailed description of the discharge practices and water treatment process(es): [Click to enter text.](#)

Item 5. Solid Waste Management (Instructions, Page 96)

Attach a description of the solid waste-disposal practices: [Click to enter text.](#)

Item 6. Site Assessment Report (Instructions, Page 96)

All new and expanding commercial shrimp facilities located/to be located within the coastal zone must attach a detailed site assessment report which identifies sensitive aquatic habitats within the coastal zone: [Click to enter text.](#)

WORKSHEET 9.0

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

CLASS V INJECTION WELL INVENTORY/AUTHORIZATION FORM

Submit the completed form to:

TCEQ
IUC Permits Team
Radioactive Materials Division
MC-233
PO Box 13087
Austin, Texas 78711-3087
512-239-6466

For TCEQ Use Only
Reg. No. _____
Date Received _____
Date Authorized _____

Item 1. General Information (Instructions Page 99)

1. TCEQ Program Area

Program Area (PST, VCP, IHW, etc.): [Click to enter text.](#)

Program ID: [Click to enter text.](#)

Contact Name: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

2. Agent/Consultant Contact Information

Contact Name: [Click to enter text.](#)

Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

3. Owner/Operator Contact Information

Owner Operator

Owner/Operator Name: [Click to enter text.](#)

Contact Name: [Click to enter text.](#)

Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

4. Facility Contact Information

Facility Name: [Click to enter text.](#)

Address: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Location description (if no address is available): [Click to enter text.](#)

Facility Contact Person: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

5. Latitude and Longitude, in degrees-minutes-seconds

Latitude: [Click to enter text.](#)

Longitude: [Click to enter text.](#)

Method of determination (GPS, TOPO, etc.): [Click to enter text.](#)

Attach topographic quadrangle map as attachment A.

6. Well Information

Type of Well Construction, select one:

- Vertical Injection
- Subsurface Fluid Distribution System
- Infiltration Gallery
- Temporary Injection Points
- Other, Specify: [Click to enter text.](#)

Number of Injection Wells: [Click to enter text.](#)

7. Purpose

Detailed Description regarding purpose of Injection System:

[Click to enter text.](#)

Attach a Site Map as Attachment B (Attach the Approved Remediation Plan, if appropriate.)

8. Water Well Driller/Installer

Water Well Driller/Installer Name: [Click to enter text.](#)

City, State, and Zip Code: [Click to enter text.](#)

Phone Number: [Click to enter text.](#)

License Number: [Click to enter text.](#)

Item 2. Proposed Down Hole Design

Attach a diagram signed and sealed by a licensed engineer as Attachment C.

Down Hole Design Table

Name of String	Size	Setting Depth	Sacks Cement/Grout - Slurry Volume - Top of Center	Hole Size	Weight (lbs/ft) PVC/Steel
Casing					
Tubing					
Screen					

Item 3. Proposed Trench System, Subsurface Fluid Distribution System, or Infiltration Gallery

Attach a diagram signed and sealed by a licensed engineer as Attachment D.

System(s) Dimensions: [Click to enter text.](#)

System(s) Construction: [Click to enter text.](#)

Item 4. Site Hydrogeological and Injection Zone Data

1. Name of Contaminated Aquifer: [Click to enter text.](#)

2. Receiving Formation Name of Injection Zone: [Click to enter text.](#)

3. Well/Trench Total Depth: [Click to enter text.](#)

4. Surface Elevation: [Click to enter text.](#)

5. Depth to Ground Water: [Click to enter text.](#)

6. Injection Zone Depth: [Click to enter text.](#)

7. Injection Zone vertically isolated geologically? Yes No

Impervious Strata between Injection Zone and nearest Underground Source of Drinking Water:

Name: [Click to enter text.](#)

Thickness: [Click to enter text.](#)

8. Attach a list of contaminants and the levels (ppm) in contaminated aquifer as Attachment E.

9. Attach the Horizontal and Vertical extent of contamination and injection plume as Attachment F.

10. Attach Formation (Injection Zone) Water Chemistry (Background levels) TDS, etc., as Attachment G.

11. Injection Fluid Chemistry in PPM at point of injection. Attach as Attachment H.

12. Lowest Known Depth of Ground Water with < 10,000 PPM TDS: [Click to enter text.](#)

13. Maximum injection Rate/Volume/Pressure: [Click to enter text.](#)

14. Water wells within 1/4 mile radius (attach map as Attachment I): [Click to enter text.](#)

15. Injection wells within 1/4 mile radius (attach map as Attachment J): [Click to enter text.](#)

16. Monitor wells within 1/4 mile radius (attach drillers logs and map as Attachment K):
[Click to enter text.](#)

17. Sampling frequency: [Click to enter text.](#)

18. Known hazardous components in injection fluid: [Click to enter text.](#)

Item 5. Site History

1. Type of Facility: [Click to enter text.](#)
2. Contamination Dates: [Click to enter text.](#)
3. Original Contamination (VOCs, TPH, BTEX, etc.) and Concentrations. Attach as Attachment L.
4. Previous Remediation. Attach results of any previous remediation as Attachment M.

NOTE: Authorization Form should be completed in detail and authorization given by the TCEQ before construction, operation, and/or conversion can begin. Attach additional pages as necessary.

Item 6. CLASS V INJECTION WELL DESIGNATIONS

- 5A07 Heat Pump/AC return (IW used for groundwater to heat or cool buildings)
- 5A19 Industrial Cooling Water Return Flow (IW used to cool industrial process equipment)
- 5B22 Salt Water Intrusion Barrier (IW used to inject fluids to prevent the intrusion of salt water into an aquifer)
- 5D02 Stormwater Drainage (IW designed for the disposal of rain water)
- 5D04 Industrial Stormwater Drainage Wells (IW designed for the disposal of rain water associated with industrial facilities)
- 5F01 Agricultural Drainage (IW that receive agricultural runoff)
- 5R21 Aquifer Recharge (IW used to inject fluids to recharge an aquifer)
- 5S23 Subsidence Control Wells (IW used to control land subsidence caused by groundwater withdrawal)
- 5W09 Untreated Sewage
- 5W10 Large Capacity Cesspools (Cesspools that are designed for 5,000 gpd or greater)
- 5W11 Large Capacity Septic systems (Septic systems designed for 5,000 gpd or greater)
- 5W12 WTTP disposal
- 5W20 Industrial Process Waste-disposal Wells
- 5W31 Septic System (Well Disposal method)
- 5W32 Septic System Drainfield Disposal
- 5X13 Mine Backfill (IW used to control subsidence, dispose of mining byproducts, or fill sections of a mine)
- 5X25 Experimental Wells (Pilot Test) (IW used to test new technologies or tracer dye studies)
- 5X26 Aquifer Remediation (IW used to clean up, treat, or prevent contamination of a USDW)
- 5X27 Other Wells
- 5X28 Motor Vehicle Waste-disposal Wells (IW used to dispose of waste from a motor vehicle site - These are currently banned)
- 5X29 Abandoned Drinking Water Wells (waste disposal)

INDUSTRIAL WASTEWATER PERMIT APPLICATION

WORKSHEET 10.0: QUARRIES IN THE JOHN GRAVES SCENIC RIVERWAY

This worksheet is required for all applications for individual permits for a municipal solid waste facility or mining facility located within a Water Quality Protection Area in the John Graves Scenic Riverway. Note: Review 30 TAC §§ 311.71-311.82 thoroughly prior to completing any portion of this worksheet.

Item 1. Exclusions (Instructions, Page 100)

- a. Is this a municipal solid waste facility?
 Yes No
- b. Has this quarry been in operation since January 1, 1994 without cessation of operation for more than 30 consecutive days and under the same ownership?
 Yes No
- c. Is this a coal mine?
 Yes No
- d. Is this facility mining clay and/or shale for use in manufacturing structural clay products?
 Yes No

If yes to any above question, stop here. The facility is required to maintain documentation, as outlined in 30 TAC § 311.72(c), at the facility to demonstrate the exclusion(s).

Item 2. Location of the Quarry (Instructions, Page 101)

Check the box next to the distance between the quarry and the nearest navigable water body:

- < 200 feet 200 feet - 1,500 feet 1,500 feet - 1 mile > 1 mile

NOTE: The construction or operation of any new quarry or expansion of any existing quarry is prohibited within 200 feet of any water body located within a Water Quality Protection Area in the John Graves Scenic Riverway.

Item 3. Additional Requirements (Instructions, Page 101)

Use the table in the Instructions to determine if additional application requirements apply to the facility based on distance between the quarry and the nearest waterway. Attach as appropriate or enter N/A.

- a. Attach a Restoration Plan: [Click to enter text](#).
- b. Amount of Financial Assurance for Restoration: \$ [Click to enter text](#).
Mechanism: [Click to enter text](#).
- c. Attach a Technical Demonstration: [Click to enter text](#).
- d. Attach a Reclamation Plan: [Click to enter text](#).
- e. Amount of Financial Assurance for Reclamation: \$ [Click to enter text](#).
Mechanism: [Click to enter text](#).



8.5x11 - INSET: 1:63,360 - ATTACHED XREFS: - ATTACHED IMAGES: Capture-AERIAL_1613_Capture-PLANT1RAT1_Capture-TOPO_0.6_Capture-TOPO_0.62_Capture-PLANT1RAT1_0011.0004.0001-01.dwg -- PLOT DATE: October 24, 2024 - 1:10PM -- LAYOUT: FIGURE 1
DRAWING NAME: j:\Central States Water Resources\Aransas Bay WWTF\0001-01.dwg
VERSION: 2017-10-21

SOURCE NOTE: USGS 7.5 MINUTE US TOPO SERIES TOPOGRAPHIC MAP, (W) LAMAR, 2022, AND (E) SAINT CHARLES BAY, 2022.



QUADRANGLE LOCATION
ARANSAS COUNTY, TEXAS



0 1,000 2,000
SCALE IN FEET
1" = 2,000'

PROJECT: CENTRAL STATES WATER RESOURCES ARANSAS BAY WWTF 119 LIVE OAK DRIVE ROCKPORT, TEXAS		
TITLE: SUBJECT PROPERTY LOCATION MAP DRAFT		
DRAWN BY:	J. KONIAR	PROJ NO.: 503581.0011.0004
CHECKED BY:	A. SCHULZ	FIGURE 1
APPROVED BY:	A. SCHULZ	
DATE:	OCTOBER 2024	
1000 Clark Ave. FL 4 St. Louis, MO 63102 Phone: 314.241.2694		
FILE NO.: 503581.0011.0004.0001-01.dwg		





LEGEND
— TREATMENT FACILITY BOUNDARY



PROJECT: CENTRAL STATES WATER RESOURCES
ARANSAS BAY WWTF
119 LIVE OAK DRIVE
ROCKPORT, TEXAS

TITLE: SUBJECT PROPERTY LAYOUT **DRAFT**

DRAWN BY:	J. KONIAR	PROJ NO.:	503581.0011.0004
CHECKED BY:	A. SCHULZ		
APPROVED BY:	A. SCHULZ		
DATE:	OCTOBER 2024		

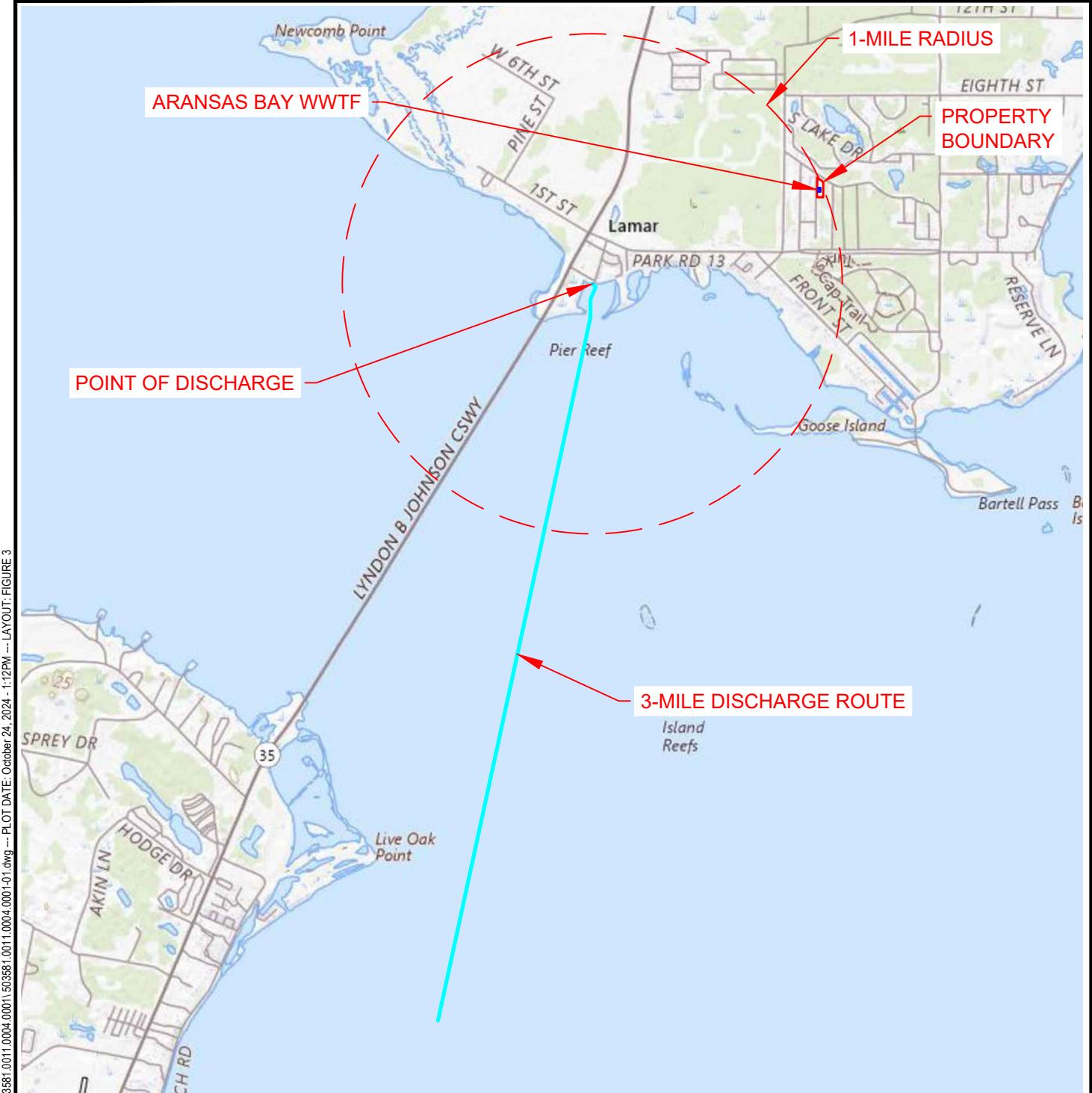
FIGURE 2

1000 Clark Ave.
FL 4
St. Louis, MO 63102
Phone: 314.241.2694



FILE NO.: 503581.0011.0004.0001-01.dwg

SOURCE NOTE: AERIAL PROVIDED BY GOOGLE EARTH, JUNE, 2023.



8.5x11 - INSET: KODAK -- ATTACHED XREFS -- ATTACHED IMAGES: CADRE-AERIAL 1613; Cadre-AERIAL 1613; Cadre-AERIAL 1613; Capture-PLANT PANTRAT 1; Capture-TOPO 0.6; Capture-TOPO 0.62; Capture-TOPO 0.62; 503581.0011.0004.0001-01.dwg -- PLOT DATE: October 24, 2024 - 1:12PM -- LAYOUT: FIGURE 3
DRAWING NAME: j:\Central States Water Resources\Aransas Bay WWTF.dwg

SOURCE NOTE: USGS 7.5 MINUTE US TOPO SERIES TOPOGRAPHIC MAP, (W) LAMAR, 2022, AND (E) SAINT CHARLES BAY, 2022.



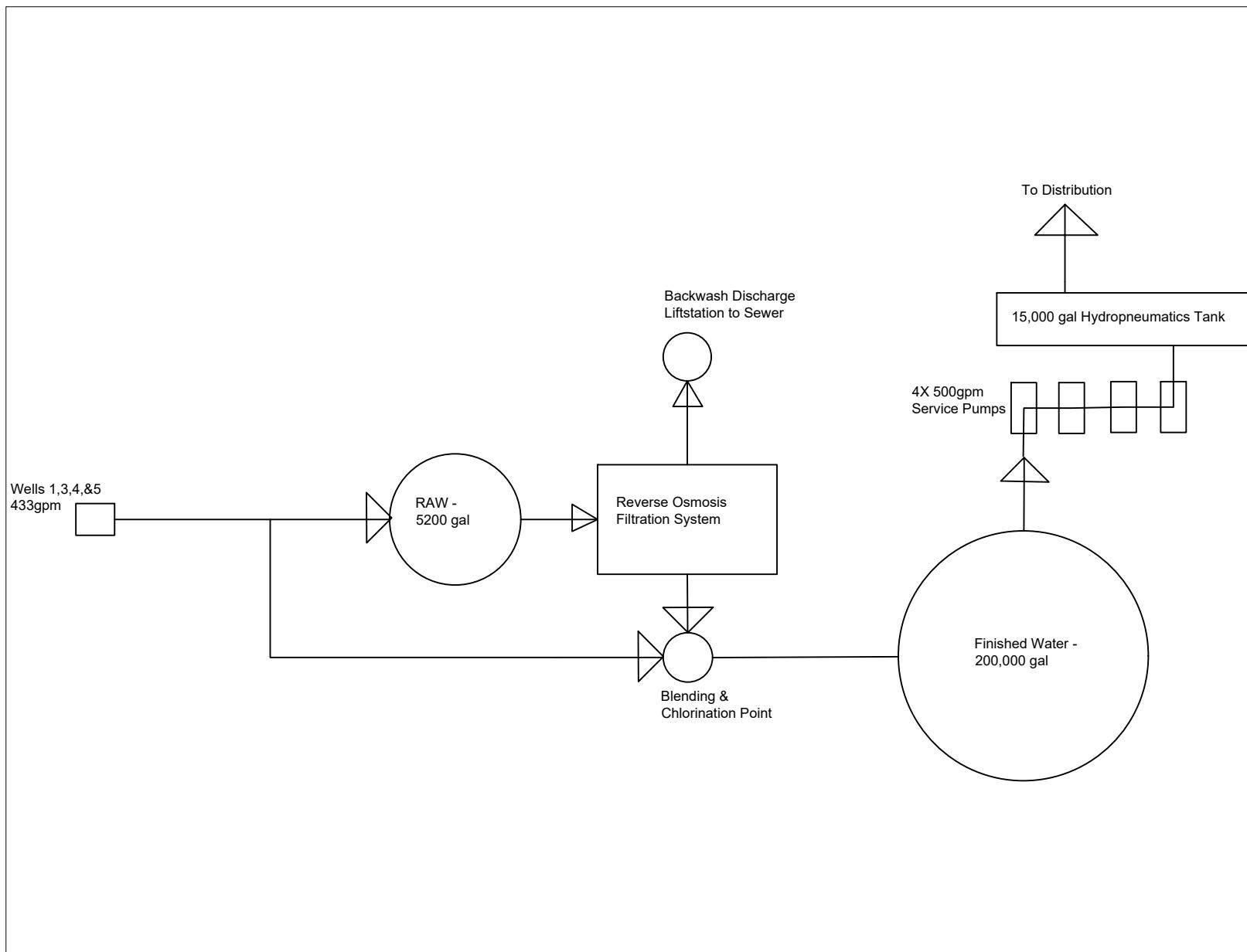
QUADRANGLE LOCATION
ARANSAS COUNTY, TEXAS



0 1,500 3,000
SCALE IN FEET
1" = 3,000'

PROJECT: CENTRAL STATES WATER RESOURCES ARANSAS BAY WWTF 119 LIVE OAK DRIVE ROCKPORT, TEXAS		
TITLE: TOPO MAP DRAFT WITH DOWNSTREAM PATH		
DRAWN BY: J. KONIAR	PROJ NO.: 503581.0011.0004	
CHECKED BY: A. SCHULZ		
APPROVED BY: A. SCHULZ		
DATE: OCTOBER 2024		
FIGURE 3		
1000 Clark Ave. FL 4 St. Louis, MO 63102 Phone: 314.241.2694		
FILE NO.: 503581.0011.0004.0001-01.dwg		

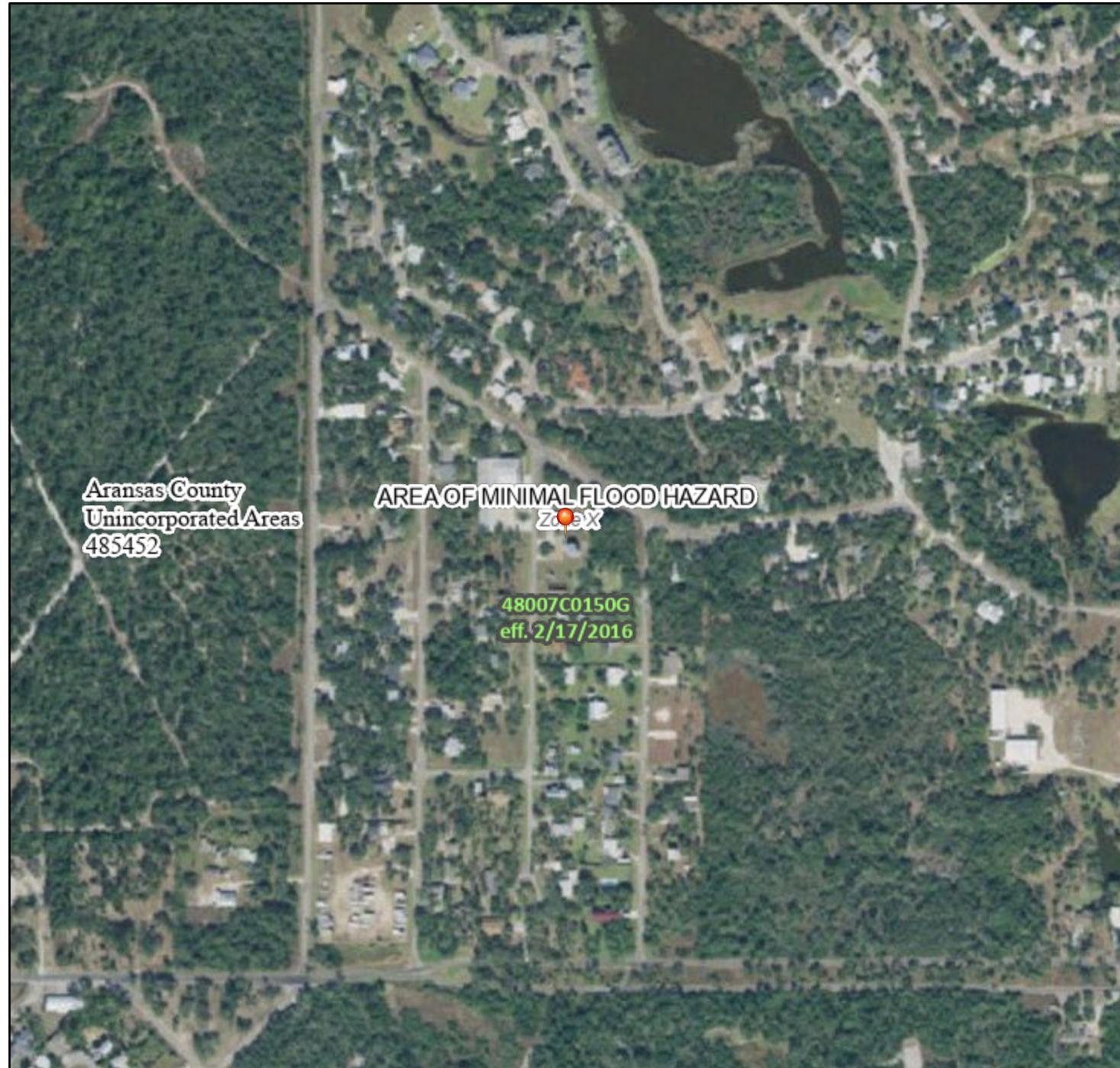




National Flood Hazard Layer FIRMette



96°59'49"W 28°8'48"N



Legend

SEE FIS REPORT FOR DETAILED LEGEND AND INDEX MAP FOR FIRM PANEL LAYOUT

SPECIAL FLOOD HAZARD AREAS

- Without Base Flood Elevation (BFE) Zone A, V, A99
- With BFE or Depth Zone AE, AO, AH, VE, AR
- Regulatory Floodway

- 0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
- Future Conditions 1% Annual Chance Flood Hazard Zone X
- Area with Reduced Flood Risk due to Levee. See Notes. Zone X
- Area with Flood Risk due to Levee Zone D

OTHER AREAS OF FLOOD HAZARD

- 0.2% Annual Chance Flood Hazard, Areas of 1% annual chance flood with average depth less than one foot or with drainage areas of less than one square mile Zone X
- Future Conditions 1% Annual Chance Flood Hazard Zone X
- Area with Reduced Flood Risk due to Levee. See Notes. Zone X
- Area with Flood Risk due to Levee Zone D

OTHER AREAS

- NO SCREEN Area of Minimal Flood Hazard Zone X
- Effective LOMRs
- Area of Undetermined Flood Hazard Zone D

GENERAL STRUCTURES

- Channel, Culvert, or Storm Sewer
- Levee, Dike, or Floodwall

- Cross Sections with 1% Annual Chance
- Water Surface Elevation
- Coastal Transect
- Base Flood Elevation Line (BFE)
- Limit of Study
- Jurisdiction Boundary
- Coastal Transect Baseline
- Profile Baseline
- Hydrographic Feature

- Digital Data Available
- No Digital Data Available
- Unmapped



The pin displayed on the map is an approximate point selected by the user and does not represent an authoritative property location.

This map complies with FEMA's standards for the use of digital flood maps if it is not void as described below. The basemap shown complies with FEMA's basemap accuracy standards

The flood hazard information is derived directly from the authoritative NFHL web services provided by FEMA. This map was exported on 10/23/2024 at 11:56 AM and does not reflect changes or amendments subsequent to this date and time. The NFHL and effective information may change or become superseded by new data over time.

This map image is void if the one or more of the following map elements do not appear: basemap imagery, flood zone labels, legend, scale bar, map creation date, community identifiers, FIRM panel number, and FIRM effective date. Map images for unmapped and unmodernized areas cannot be used for regulatory purposes.



WATER PLANT SITE EXHIBIT

NOT TO SCALE

AERO VALLEY WATER SERVICE

PROJECT #: L202

DATE: 11/1/2019

LIGHTPOINT ENGINEERING, LLC
TBPE Firm No. 18938

Untitled Map

Write a description for your map.

Legend





ANALYTICAL REPORT

October 22, 2024

¹Cp

²Tc

³Ss

⁴Cn

⁵Sr

⁶Qc

⁷GI

⁸AI

⁹Sc

CSWR - Texas Utility Operating Company

Sample Delivery Group: L1785704
Samples Received: 10/05/2024
Project Number:
Description: Aransas Bay Utilities

Report To: Callie Derzapf
211 Douglas St.
Richmond, TX 77469

Entire Report Reviewed By:

Lori A Vahrenkamp
Project Manager

Results relate only to the items tested or calibrated and are reported as rounded values. This test report shall not be reproduced, except in full, without written approval of the laboratory. Where applicable, sampling conducted by Pace Analytical National is performed per guidance provided in laboratory standard operating procedures ENV-SOP-MTJL-0067 and ENV-SOP-MTJL-0068. Where sampling conducted by the customer, results relate to the accuracy of the information provided, and as the samples are received.

Pace Analytical National

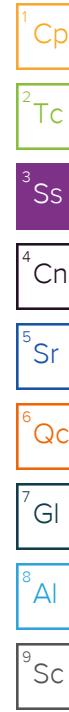
12065 Lebanon Rd Mount Juliet, TN 37122 615-758-5858 800-767-5859 mydata.pacelabs.com

TABLE OF CONTENTS

<p>Cp: Cover Page</p> <p>Tc: Table of Contents</p> <p>Ss: Sample Summary</p> <p>Cn: Case Narrative</p> <p>Sr: Sample Results</p> <p style="margin-left: 20px;">RO BRINE L1785704-01</p> <p>Qc: Quality Control Summary</p> <p style="margin-left: 20px;">Gravimetric Analysis by Method 2540C</p> <p style="margin-left: 20px;">Gravimetric Analysis by Method 2540D</p> <p style="margin-left: 20px;">Wet Chemistry by Method 1664B</p> <p style="margin-left: 20px;">Wet Chemistry by Method 2320B</p> <p style="margin-left: 20px;">Wet Chemistry by Method 300.0</p> <p style="margin-left: 20px;">Wet Chemistry by Method 3500Cr-B</p> <p style="margin-left: 20px;">Wet Chemistry by Method 351.2</p> <p style="margin-left: 20px;">Wet Chemistry by Method 4500CN-E</p> <p style="margin-left: 20px;">Wet Chemistry by Method 4500P-E</p> <p style="margin-left: 20px;">Wet Chemistry by Method 5210 B-2016</p> <p style="margin-left: 20px;">Wet Chemistry by Method 5220D</p> <p style="margin-left: 20px;">Wet Chemistry by Method 5310C</p> <p style="margin-left: 20px;">Wet Chemistry by Method SM4500NH3H</p> <p>Metals (ICP) by Method 200.7</p> <p>Gl: Glossary of Terms</p> <p>Al: Accreditations & Locations</p> <p>Sc: Sample Chain of Custody</p>	<table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; text-align: center; vertical-align: top;">1</td> <td style="width: 33%; text-align: center; vertical-align: top;">2</td> <td style="width: 33%; text-align: center; vertical-align: top;">3</td> </tr> <tr> <td style="text-align: center; vertical-align: top;"> Cp</td> <td style="text-align: center; vertical-align: top;"> Tc</td> <td style="text-align: center; vertical-align: top;"> Ss</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">4</td> <td style="text-align: center; vertical-align: top;">5</td> <td style="text-align: center; vertical-align: top;">6</td> </tr> <tr> <td style="text-align: center; vertical-align: top;"> Cn</td> <td style="text-align: center; vertical-align: top;"> Sr</td> <td style="text-align: center; vertical-align: top;"> Qc</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">7</td> <td style="text-align: center; vertical-align: top;">8</td> <td style="text-align: center; vertical-align: top;">9</td> </tr> <tr> <td style="text-align: center; vertical-align: top;"> Gl</td> <td style="text-align: center; vertical-align: top;"> Al</td> <td style="text-align: center; vertical-align: top;"> Sc</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">10</td> <td style="text-align: center; vertical-align: top;">11</td> <td style="text-align: center; vertical-align: top;">12</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">13</td> <td style="text-align: center; vertical-align: top;">14</td> <td style="text-align: center; vertical-align: top;">15</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">16</td> <td style="text-align: center; vertical-align: top;">17</td> <td style="text-align: center; vertical-align: top;">18</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">19</td> <td style="text-align: center; vertical-align: top;">20</td> <td style="text-align: center; vertical-align: top;">21</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">22</td> <td style="text-align: center; vertical-align: top;">23</td> <td style="text-align: center; vertical-align: top;">24</td> </tr> <tr> <td style="text-align: center; vertical-align: top;">25</td> <td style="text-align: center; vertical-align: top;">26</td> <td style="text-align: center; vertical-align: top;">27</td> </tr> </table>	1	2	3	 Cp	 Tc	 Ss	4	5	6	 Cn	 Sr	 Qc	7	8	9	 Gl	 Al	 Sc	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27
1	2	3																																			
 Cp	 Tc	 Ss																																			
4	5	6																																			
 Cn	 Sr	 Qc																																			
7	8	9																																			
 Gl	 Al	 Sc																																			
10	11	12																																			
13	14	15																																			
16	17	18																																			
19	20	21																																			
22	23	24																																			
25	26	27																																			

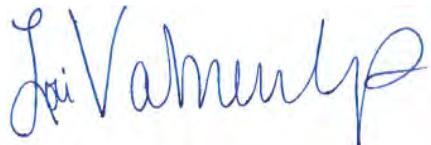
SAMPLE SUMMARY

RO BRINE L1785704-01 WW			Collected by Jonathan Helm	Collected date/time 10/04/24 13:45	Received date/time 10/05/24 08:55	
Method	Batch	Dilution	Preparation date/time	Analysis date/time	Analyst	Location
Calculated Results	WG2379856	1	10/17/24 11:14	10/17/24 11:14	DJS	Mt. Juliet, TN
Gravimetric Analysis by Method 2540C	WG2376908	1	10/06/24 10:16	10/06/24 11:34	QQT	Allen, TX
Gravimetric Analysis by Method 2540D	WG2378767	1	10/09/24 11:24	10/09/24 13:30	QQT	Allen, TX
Wet Chemistry by Method 1664B	WG2383877	1	10/17/24 09:07	10/17/24 20:45	DAL	Mt. Juliet, TN
Wet Chemistry by Method 2320B	WG2377248	1	10/07/24 09:27	10/07/24 09:27	SKW	Allen, TX
Wet Chemistry by Method 300.0	WG2376636	1	10/05/24 13:18	10/05/24 13:18	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2377309	1	10/08/24 19:30	10/08/24 19:30	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2377309	1	10/09/24 10:46	10/09/24 10:46	SMC	Allen, TX
Wet Chemistry by Method 3500Cr-B	WG2381655	1	10/14/24 12:54	10/14/24 12:54	KCM	Allen, TX
Wet Chemistry by Method 351.2	WG2377798	1	10/08/24 10:21	10/09/24 12:04	EIG	Allen, TX
Wet Chemistry by Method 4500CN-E	WG2379739	1	10/10/24 14:19	10/10/24 17:14	SMC	Allen, TX
Wet Chemistry by Method 4500CN-G	WG2379739	1	10/10/24 17:14	10/10/24 17:14	SMC	Allen, TX
Wet Chemistry by Method 4500P-E	WG2377427	1	10/08/24 14:51	10/08/24 14:51	SMC	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2376613	1	10/05/24 14:09	10/10/24 09:51	SKW	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2376635	1	10/05/24 14:48	10/10/24 10:40	SKW	Allen, TX
Wet Chemistry by Method 5220D	WG2377263	1	10/07/24 10:45	10/07/24 13:25	JBS	Allen, TX
Wet Chemistry by Method 5310C	WG2377936	1	10/09/24 01:29	10/09/24 01:29	EIG	Allen, TX
Wet Chemistry by Method SM4500NH3H	WG2379691	1	10/10/24 13:47	10/10/24 13:47	EIG	Allen, TX
Metals (ICP) by Method 200.7	WG2379856	1	10/16/24 19:05	10/17/24 11:14	DJS	Mt. Juliet, TN
Metals (ICP) by Method 200.7	WG2384344	1	10/18/24 17:43	10/19/24 11:33	JTM	Mt. Juliet, TN
Subcontracted Analyses	WG2378971	1	10/22/24 00:00	10/22/24 00:00	JWW	Green Bay, WI 54302



CASE NARRATIVE

All sample aliquots were received at the correct temperature, in the proper containers, with the appropriate preservatives, and within method specified holding times, unless qualified or notated within the report. Where applicable, all MDL (LOD) and RDL (LOQ) values reported for environmental samples have been corrected for the dilution factor used in the analysis. All Method and Batch Quality Control are within established criteria except where addressed in this case narrative, a non-conformance form or properly qualified within the sample results. By my digital signature below, I affirm to the best of my knowledge, all problems/anomalies observed by the laboratory as having the potential to affect the quality of the data have been identified by the laboratory, and no information or data have been knowingly withheld that would affect the quality of the data.



Lori A Vahrenkamp
Project Manager

Project Narrative

L1785704 -01 contains subout data that is included after the chain of custody.

- ¹ Cp
- ² Tc
- ³ Ss
- ⁴ Cn
- ⁵ Sr
- ⁶ Qc
- ⁷ GI
- ⁸ AI
- ⁹ SC

Calculated Results

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Trivalent	<0.00300		0.00300	1	10/17/2024 11:14	WG2379856

¹ Cp² Tc³ Ss⁴ Cn⁵ Sr⁶ Qc⁷ Gl⁸ Al⁹ Sc

Gravimetric Analysis by Method 2540C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Total Dissolved Solids	4750		250	1	10/06/2024 11:34	WG2376908

Gravimetric Analysis by Method 2540D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Suspended Solids	2.80		2.50	1	10/09/2024 13:30	WG2378767

Wet Chemistry by Method 1664B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Oil & Grease (Hexane Extr)	<5.56		5.56	1	10/17/2024 20:45	WG2383877

Wet Chemistry by Method 2320B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Alkalinity	857		20.0	1	10/07/2024 09:27	WG2377248
Alkalinity,Bicarbonate	857		20.0	1	10/07/2024 09:27	WG2377248
Alkalinity,Carbonate	<20.0		20.0	1	10/07/2024 09:27	WG2377248
Alkalinity,Hydroxide	<20.0		20.0	1	10/07/2024 09:27	WG2377248
Phenolphthalein Alkalinity	<20.0		20.0	1	10/07/2024 09:27	WG2377248

Wet Chemistry by Method 300.0

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chloride	2080		0.800	1	10/09/2024 10:46	WG2377309
Fluoride	2.25		0.500	1	10/05/2024 13:18	WG2376636
Nitrate	0.525		0.500	1	10/05/2024 13:18	WG2376636
Sulfate	516		0.700	1	10/08/2024 19:30	WG2377309

Wet Chemistry by Method 3500Cr-B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Hexavalent	0.00468	<u>J6</u>	0.00300	1	10/14/2024 12:54	WG2381655

Wet Chemistry by Method 351.2

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Kjeldahl Nitrogen, TKN	<0.250		0.250	1	10/09/2024 12:04	WG2377798

Wet Chemistry by Method 4500CN-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide	<0.0100		0.0100	1	10/10/2024 17:14	WG2379739

Wet Chemistry by Method 4500CN-G

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide,amenable	<0.0100		0.0100	1	10/10/2024 17:14	WG2379739

¹ Cp² Tc³ Ss⁴ Cn⁵ Sr⁶ Qc⁷ Gl⁸ Al⁹ Sc

Wet Chemistry by Method 4500P-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Phosphorus,Total	0.746		0.0500	1	10/08/2024 14:51	WG2377427

Wet Chemistry by Method 5210 B-2016

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
BOD	<1.00		1.00	1	10/10/2024 09:51	WG2376613
CBOD	<1.00		1.00	1	10/10/2024 10:40	WG2376635

⁵ Sr⁶ Qc⁷ Gl⁸ Al⁹ Sc

Wet Chemistry by Method 5220D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
COD	76.6		35.0	1	10/07/2024 13:25	WG2377263

Wet Chemistry by Method 5310C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
TOC (Total Organic Carbon)	2.68		0.700	1	10/09/2024 01:29	WG2377936

Wet Chemistry by Method SM4500NH3H

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Ammonia Nitrogen	<0.100		0.100	1	10/10/2024 13:47	WG2379691

Metals (ICP) by Method 200.7

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Aluminum	<0.200		0.200	1	10/17/2024 11:14	WG2379856
Antimony	<0.0100		0.0100	1	10/17/2024 11:14	WG2379856
Arsenic	<0.0100		0.0100	1	10/17/2024 11:14	WG2379856
Barium	0.0972		0.00500	1	10/17/2024 11:14	WG2379856
Beryllium	<0.00200		0.00200	1	10/17/2024 11:14	WG2379856
Cadmium	<0.00200		0.00200	1	10/17/2024 11:14	WG2379856
Chromium	<0.0100		0.0100	1	10/17/2024 11:14	WG2379856
Copper	<0.0100		0.0100	1	10/17/2024 11:14	WG2379856
Lead	<0.00500		0.00500	1	10/17/2024 11:14	WG2379856
Magnesium	72.3		1.00	1	10/17/2024 11:14	WG2379856
Nickel	<0.0100		0.0100	1	10/17/2024 11:14	WG2379856
Selenium	<0.0100		0.0100	1	10/17/2024 11:14	WG2379856
Silver	<0.00500		0.00500	1	10/17/2024 11:14	WG2379856
Thallium	<0.0100		0.0100	1	10/17/2024 11:14	WG2379856
Zinc	<0.0500		0.0500	1	10/19/2024 11:33	WG2384344

WG2376908

Gravimetric Analysis by Method 2540C

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4129386-1 10/06/24 11:34

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Total Dissolved Solids	<25.0		25.0	25.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1785236-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1785236-01 10/06/24 11:34 • (DUP) R4129386-3 10/06/24 11:34

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Total Dissolved Solids	868	879	1	1.23		10

L1785236-02 Original Sample (OS) • Duplicate (DUP)

(OS) L1785236-02 10/06/24 11:34 • (DUP) R4129386-4 10/06/24 11:34

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Total Dissolved Solids	552	530	1	4.07		10

Laboratory Control Sample (LCS)

(LCS) R4129386-2 10/06/24 11:34

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Total Dissolved Solids	2260	2420	107	85.0-115	

WG2378767

Gravimetric Analysis by Method 2540D

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4131141-1 10/09/24 13:30

¹Cp

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Suspended Solids	<2.50		2.50	2.50

²Tc³Ss⁴Cn⁵Sr⁶Qc

L1784764-03 Original Sample (OS) • Duplicate (DUP)

(OS) L1784764-03 10/09/24 13:30 • (DUP) R4131141-3 10/09/24 13:30

⁷Gl

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Suspended Solids	51.0	47.0	1	8.16		10

⁸Al

L1784764-04 Original Sample (OS) • Duplicate (DUP)

(OS) L1784764-04 10/09/24 13:30 • (DUP) R4131141-4 10/09/24 13:30

⁹Sc

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Suspended Solids	36.0	37.0	1	2.74		10

Laboratory Control Sample (LCS)

(LCS) R4131141-2 10/09/24 13:30

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Suspended Solids	854	846	99.1	85.0-115	

WG2383877

Wet Chemistry by Method 1664B

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4134311-1 10/17/24 20:45

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Oil & Grease (Hexane Extr)	<1.40		1.40	5.00

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS) • Laboratory Control Sample Duplicate (LCSD)

(LCS) R4134311-2 10/17/24 20:45 • (LCSD) R4134311-3 10/17/24 20:45

Analyte	Spike Amount mg/l	LCS Result mg/l	LCSD Result mg/l	LCS Rec. %	LCSD Rec. %	Rec. Limits %	<u>LCS Qualifier</u>	<u>LCSD Qualifier</u>	RPD %	RPD Limits %
Oil & Grease (Hexane Extr)	40.0	33.2	36.5	83.0	91.3	78.0-114			9.47	20

L1785672-02 Original Sample (OS) • Matrix Spike (MS)

(OS) L1785672-02 10/17/24 20:45 • (MS) R4134311-4 10/17/24 20:45

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>
Oil & Grease (Hexane Extr)	40.0	<5.00	34.1	85.2	1	78.0-114	

WG2377248

Wet Chemistry by Method 2320B

QUALITY CONTROL SUMMARY

[L1785704-01](#)

Method Blank (MB)

(MB) R4129401-1 10/07/24 09:27

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Alkalinity	<20.0		20.0	20.0
Alkalinity,Bicarbonate	<20.0		20.0	20.0
Alkalinity,Carbonate	<20.0		20.0	20.0
Alkalinity,Hydroxide	<20.0		20.0	20.0
Phenolphthalein Alkalinity	<20.0		20.0	20.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1784193-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1784193-01 10/07/24 09:27 • (DUP) R4129401-3 10/07/24 09:27

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD	<u>DUP Qualifier</u>	DUP RPD Limits
Alkalinity	290	292	1	0.687		20

Laboratory Control Sample (LCS)

(LCS) R4129401-2 10/07/24 09:27

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Alkalinity	250	240	96.0	90.0-110	

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1785704

PAGE:

10 of 42

10/22/24 15:28

WG2376636

Wet Chemistry by Method 300.0

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4129203-1 10/05/24 12:54

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Fluoride	<0.0947		0.0947	0.500
Nitrate	<0.379		0.379	0.500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4129203-2 10/05/24 13:06

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Fluoride	5.00	5.08	102	90.0-110	
Nitrate	5.00	5.09	102	90.0-110	

L1785704-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785704-01 10/05/24 13:18 • (MS) R4129203-3 10/05/24 13:43 • (MSD) R4129203-4 10/05/24 13:55

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD	RPD Limits
Fluoride	5.00	2.25	6.84	6.85	91.9	92.0	1	90.0-110			0.0950	20
Nitrate	5.00	0.525	5.52	5.48	99.9	99.2	1	90.0-110			0.643	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

PAGE:

L1785704

10/22/24 15:28

11 of 42

WG2377309

Wet Chemistry by Method 300.0

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4130347-1 10/08/24 16:20

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chloride	<0.325		0.325	0.800
Sulfate	<0.211		0.211	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4130347-2 10/08/24 16:32

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chloride	5.00	4.85	97.0	90.0-110	
Sulfate	5.00	4.98	99.6	90.0-110	

L1785246-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785246-01 10/09/24 10:11 • (MS) R4130347-5 10/09/24 10:23 • (MSD) R4130347-6 10/09/24 10:35

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD	RPD Limits
Chloride	250	278	481	490	81.3	84.8	1	90.0-110	J6	J6	1.77	20
Sulfate	250	220	443	451	89.2	92.4	1	90.0-110	J6		1.81	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1785704

PAGE:

12 of 42

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4132287-1 10/14/24 12:54

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chromium,Hexavalent	<0.00200		0.00200	0.00300

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4132287-2 10/14/24 12:54

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chromium,Hexavalent	0.200	0.200	99.9	85.0-115	

L1785704-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785704-01 10/14/24 12:54 • (MS) R4132287-3 10/14/24 12:54 • (MSD) R4132287-4 10/14/24 12:54

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Chromium,Hexavalent	0.200	0.00468	0.135	0.150	65.4	72.8	1	85.0-115	J6	J6	10.4	20

QUALITY CONTROL SUMMARY

[L1785704-01](#)

Method Blank (MB)

(MB) R4130388-1 10/09/24 11:45

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Kjeldahl Nitrogen, TKN	<0.140		0.140	0.250

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4130388-2 10/09/24 11:47

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Kjeldahl Nitrogen, TKN	4.00	3.67	91.8	90.0-110	

L1784716-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1784716-01 10/09/24 11:52 • (MS) R4130388-3 10/09/24 12:07 • (MSD) R4130388-4 10/09/24 12:08

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Kjeldahl Nitrogen, TKN	4.00	1.03	5.14	5.26	103	106	1	90.0-110		2.31	20

WG2379739

Wet Chemistry by Method 4500CN-E

QUALITY CONTROL SUMMARY

[L1785704-01](#)

Method Blank (MB)

(MB) R4131205-1 10/10/24 17:14

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Cyanide	<0.00430		0.00430	0.0100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4131205-2 10/10/24 17:14

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Cyanide	0.100	0.105	105	85.0-115	

L1786275-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1786275-01 10/10/24 17:14 • (MS) R4131205-3 10/10/24 17:15 • (MSD) R4131205-4 10/10/24 17:15

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Cyanide	0.100	<0.0100	0.0928	0.0951	92.8	95.1	1	85.0-115			2.46	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

L1785704

DATE/TIME:

10/22/24 15:28

PAGE:

15 of 42

WG2377427

Wet Chemistry by Method 4500P-E

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4129957-1 10/08/24 14:50

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Phosphorus,Total	<0.0152		0.0152	0.0500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4129957-2 10/08/24 14:50

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Phosphorus,Total	0.500	0.538	108	80.0-120	

L1784827-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1784827-02 10/08/24 14:50 • (MS) R4129957-3 10/08/24 14:52 • (MSD) R4129957-4 10/08/24 14:52

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Phosphorus,Total	0.500	0.0671	0.592	0.601	105	107	1	80.0-120			1.59	20

L1785236-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785236-01 10/08/24 14:51 • (MS) R4129957-5 10/08/24 14:52 • (MSD) R4129957-6 10/08/24 14:52

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Phosphorus,Total	0.500	<0.0500	0.532	0.528	106	106	1	80.0-120			0.896	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1785704

PAGE:

16 of 42

WG2376613

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

[L1785704-01](#)

Method Blank (MB)

(MB) R4130863-1 10/10/24 09:06

Analyst	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
BOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1785689-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1785689-01 10/10/24 09:26 • (DUP) R4130863-3 10/10/24 10:07

Analyst	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
BOD	7.44	8.13	1	8.86		20

Laboratory Control Sample (LCS)

(LCS) R4130863-2 10/10/24 09:11

Analyst	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
BOD	198	195	98.2	85-115	

WG2376635

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4130901-1 10/10/24 10:31

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
CBOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1785740-02 Original Sample (OS) • Duplicate (DUP)

(OS) L1785740-02 10/10/24 11:04 • (DUP) R4130901-3 10/10/24 11:12

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
CBOD	5.44	5.15	1	5.48		20

Laboratory Control Sample (LCS)

(LCS) R4130901-2 10/10/24 10:36

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
CBOD	198	192	96.7	85-115	

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4129389-1 10/07/24 13:25

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
COD	<16.1		16.1	35.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4129389-2 10/07/24 13:25

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
COD	500	518	104	80.0-120	

L1784118-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1784118-01 10/07/24 13:25 • (MS) R4129389-3 10/07/24 13:25 • (MSD) R4129389-4 10/07/24 13:25

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
COD	500	66.2	529	533	92.5	93.4	1	80.0-120			0.789	20

L1784914-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1784914-01 10/07/24 13:25 • (MS) R4129389-5 10/07/24 13:25 • (MSD) R4129389-6 10/07/24 13:25

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
COD	500	41.1	520	527	95.9	97.1	1	80.0-120			1.20	20

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4130351-1 10/08/24 14:26

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
TOC (Total Organic Carbon)	<0.270		0.270	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4130351-2 10/08/24 16:26

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
TOC (Total Organic Carbon)	10.0	10.8	108	90.0-110	

L1784579-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1784579-01 10/08/24 18:07 • (MS) R4130351-3 10/08/24 16:47 • (MSD) R4130351-4 10/08/24 17:07

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits
TOC (Total Organic Carbon)	10.0	5.28	10.9	10.7	56.1	54.3	1	80.0-120	J6	J6	1.67	20

L1784579-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1784579-02 10/09/24 01:56 • (MS) R4130351-5 10/08/24 17:27 • (MSD) R4130351-6 10/08/24 17:47

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits
TOC (Total Organic Carbon)	10.0	4.67	10.0	10.1	53.3	54.0	1	80.0-120	J6	J6	0.698	20

WG2379691

Wet Chemistry by Method SM4500NH3H

QUALITY CONTROL SUMMARY

L1785704-01

Method Blank (MB)

(MB) R4131154-1 10/10/24 13:17

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Ammonia Nitrogen	<0.0280		0.0280	0.100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4131154-2 10/10/24 13:19

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Ammonia Nitrogen	5.00	5.06	101	80.0-120	

L1783764-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1783764-01 10/10/24 13:28 • (MS) R4131154-3 10/10/24 13:21 • (MSD) R4131154-4 10/10/24 13:23

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Ammonia Nitrogen	5.00	0.738	5.73	5.74	99.8	100	1	80.0-120			0.174	20

L1783782-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1783782-01 10/10/24 13:30 • (MS) R4131154-5 10/10/24 13:24 • (MSD) R4131154-6 10/10/24 13:26

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Ammonia Nitrogen	5.00	<0.100	4.80	4.81	96.0	96.2	1	80.0-120			0.208	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1785704

PAGE:

21 of 42

QUALITY CONTROL SUMMARY

[L1785704-01](#)

Method Blank (MB)

(MB) R4134035-1 10/17/24 10:42

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Aluminum	<0.0592		0.0592	0.200
Antimony	<0.00398		0.00398	0.0100
Arsenic	<0.00645		0.00645	0.0100
Barium	<0.000795		0.000795	0.00500
Beryllium	<0.000401		0.000401	0.00200
Cadmium	<0.000552		0.000552	0.00200
Chromium	<0.00163		0.00163	0.0100
Copper	<0.00226		0.00226	0.0100
Lead	<0.00227		0.00227	0.00500
Magnesium	<0.115		0.115	1.00
Nickel	<0.00182		0.00182	0.0100
Selenium	<0.00616		0.00616	0.0100
Silver	<0.00131		0.00131	0.00500
Thallium	<0.00460		0.00460	0.0100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4134035-2 10/17/24 10:44

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Aluminum	10.0	9.46	94.6	85.0-115	
Antimony	1.00	0.935	93.5	85.0-115	
Arsenic	1.00	0.948	94.8	85.0-115	
Barium	1.00	0.964	96.4	85.0-115	
Beryllium	1.00	0.972	97.2	85.0-115	
Cadmium	1.00	0.952	95.2	85.0-115	
Chromium	1.00	0.953	95.3	85.0-115	
Copper	1.00	0.958	95.8	85.0-115	
Lead	1.00	0.914	91.4	85.0-115	
Magnesium	10.0	9.39	93.9	85.0-115	
Nickel	1.00	0.915	91.5	85.0-115	
Selenium	1.00	0.933	93.3	85.0-115	
Silver	0.200	0.195	97.4	85.0-115	
Thallium	1.00	0.971	97.1	85.0-115	

QUALITY CONTROL SUMMARY

L1785704-01

L1785674-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785674-01 10/17/24 10:46 • (MS) R4134035-4 10/17/24 10:49 • (MSD) R4134035-5 10/17/24 10:51

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	MS Qualifier	MSD Qualifier	RPD	RPD Limits
Aluminum	10.0	1.01	10.4	10.6	93.7	95.8	1	70.0-130			1.97	20
Antimony	1.00	<0.0100	0.947	0.974	94.7	97.4	1	70.0-130			2.75	20
Arsenic	1.00	<0.0100	0.972	0.988	97.2	98.8	1	70.0-130			1.71	20
Barium	1.00	0.0668	1.02	1.05	95.7	98.6	1	70.0-130			2.75	20
Beryllium	1.00	<0.00200	0.972	0.993	97.2	99.3	1	70.0-130			2.13	20
Cadmium	1.00	<0.00200	0.958	0.984	95.8	98.4	1	70.0-130			2.61	20
Chromium	1.00	<0.0100	0.953	0.977	95.3	97.7	1	70.0-130			2.48	20
Copper	1.00	<0.0100	0.954	0.983	95.1	98.1	1	70.0-130			3.06	20
Lead	1.00	<0.00500	0.937	0.963	93.7	96.3	1	70.0-130			2.76	20
Magnesium	10.0	5.17	14.2	14.5	90.1	93.4	1	70.0-130			2.37	20
Nickel	1.00	<0.0100	0.944	0.972	94.4	97.2	1	70.0-130			2.90	20
Selenium	1.00	<0.0100	0.956	0.980	95.6	98.0	1	70.0-130			2.46	20
Silver	0.200	<0.00500	0.196	0.201	98.2	100	1	70.0-130			2.22	20
Thallium	1.00	<0.0100	0.979	1.01	97.9	101	1	70.0-130			2.90	20

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1785734-09 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785734-09 10/17/24 10:52 • (MS) R4134035-6 10/17/24 10:54 • (MSD) R4134035-7 10/17/24 10:56

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	MS Qualifier	MSD Qualifier	RPD	RPD Limits
Aluminum	10.0	<0.200	9.30	9.74	91.5	95.9	1	70.0-130			4.69	20
Antimony	1.00	<0.0100	0.932	0.967	93.2	96.7	1	70.0-130			3.71	20
Arsenic	1.00	<0.0100	0.974	0.991	97.4	99.1	1	70.0-130			1.71	20
Barium	1.00	0.169	1.10	1.13	92.9	96.3	1	70.0-130			3.06	20
Beryllium	1.00	<0.00200	0.935	0.974	93.5	97.4	1	70.0-130			4.04	20
Cadmium	1.00	<0.00200	0.946	0.970	94.6	97.0	1	70.0-130			2.45	20
Chromium	1.00	<0.0100	0.919	0.955	91.9	95.5	1	70.0-130			3.88	20
Copper	1.00	<0.0100	0.912	0.949	91.2	94.9	1	70.0-130			3.98	20
Lead	1.00	<0.00500	0.923	0.954	92.1	95.2	1	70.0-130			3.31	20
Magnesium	10.0	68.3	74.4	77.5	60.5	91.7	1	70.0-130	V		4.12	20
Nickel	1.00	<0.0100	0.948	0.964	94.6	96.1	1	70.0-130			1.61	20
Selenium	1.00	<0.0100	0.969	0.982	96.9	98.2	1	70.0-130			1.28	20
Silver	0.200	<0.00500	0.194	0.200	96.9	99.8	1	70.0-130			3.01	20
Thallium	1.00	<0.0100	0.937	0.968	93.7	96.8	1	70.0-130			3.22	20

QUALITY CONTROL SUMMARY

[L1785704-01](#)

Method Blank (MB)

(MB) R4134983-1 10/19/24 11:12

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Zinc	0.0172	J	0.00578	0.0500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4134983-2 10/19/24 11:14

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Zinc	1.00	1.02	102	85.0-115	

L1785702-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785702-01 10/19/24 11:15 • (MS) R4134983-4 10/19/24 11:18 • (MSD) R4134983-5 10/19/24 11:20

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Zinc	1.00	<0.0500	1.01	1.02	97.5	99.1	1	70.0-130			1.55	20

GLOSSARY OF TERMS

Guide to Reading and Understanding Your Laboratory Report

The information below is designed to better explain the various terms used in your report of analytical results from the Laboratory. This is not intended as a comprehensive explanation, and if you have additional questions please contact your project representative.

Results Disclaimer - Information that may be provided by the customer, and contained within this report, include Permit Limits, Project Name, Sample ID, Sample Matrix, Sample Preservation, Field Blanks, Field Spikes, Field Duplicates, On-Site Data, Sampling Collection Dates/Times, and Sampling Location. Results relate to the accuracy of this information provided, and as the samples are received.

Abbreviations and Definitions

MDL	Method Detection Limit.	¹ Cp
RDL	Reported Detection Limit.	² Tc
Rec.	Recovery.	³ Ss
RPD	Relative Percent Difference.	⁴ Cn
SDG	Sample Delivery Group.	⁵ Sr
Analyte	The name of the particular compound or analysis performed. Some Analyses and Methods will have multiple analytes reported.	⁶ Qc
Dilution	If the sample matrix contains an interfering material, the sample preparation volume or weight values differ from the standard, or if concentrations of analytes in the sample are higher than the highest limit of concentration that the laboratory can accurately report, the sample may be diluted for analysis. If a value different than 1 is used in this field, the result reported has already been corrected for this factor.	⁷ Gl
Limits	These are the target % recovery ranges or % difference value that the laboratory has historically determined as normal for the method and analyte being reported. Successful QC Sample analysis will target all analytes recovered or duplicated within these ranges.	⁸ Al
Original Sample	The non-spiked sample in the prep batch used to determine the Relative Percent Difference (RPD) from a quality control sample. The Original Sample may not be included within the reported SDG.	⁹ Sc
Qualifier	This column provides a letter and/or number designation that corresponds to additional information concerning the result reported. If a Qualifier is present, a definition per Qualifier is provided within the Glossary and Definitions page and potentially a discussion of possible implications of the Qualifier in the Case Narrative if applicable.	
Result	The actual analytical final result (corrected for any sample specific characteristics) reported for your sample. If there was no measurable result returned for a specific analyte, the result in this column may state "ND" (Not Detected) or "BDL" (Below Detectable Levels). The information in the results column should always be accompanied by either an MDL (Method Detection Limit) or RDL (Reporting Detection Limit) that defines the lowest value that the laboratory could detect or report for this analyte.	
Uncertainty (Radiochemistry)	Confidence level of 2 sigma.	
Case Narrative (Cn)	A brief discussion about the included sample results, including a discussion of any non-conformances to protocol observed either at sample receipt by the laboratory from the field or during the analytical process. If present, there will be a section in the Case Narrative to discuss the meaning of any data qualifiers used in the report.	
Quality Control Summary (Qc)	This section of the report includes the results of the laboratory quality control analyses required by procedure or analytical methods to assist in evaluating the validity of the results reported for your samples. These analyses are not being performed on your samples typically, but on laboratory generated material.	
Sample Chain of Custody (Sc)	This is the document created in the field when your samples were initially collected. This is used to verify the time and date of collection, the person collecting the samples, and the analyses that the laboratory is requested to perform. This chain of custody also documents all persons (excluding commercial shippers) that have had control or possession of the samples from the time of collection until delivery to the laboratory for analysis.	
Sample Results (Sr)	This section of your report will provide the results of all testing performed on your samples. These results are provided by sample ID and are separated by the analyses performed on each sample. The header line of each analysis section for each sample will provide the name and method number for the analysis reported.	
Sample Summary (Ss)	This section of the Analytical Report defines the specific analyses performed for each sample ID, including the dates and times of preparation and/or analysis.	

Qualifier Description

J	The identification of the analyte is acceptable; the reported value is an estimate.
J6	The sample matrix interfered with the ability to make any accurate determination; spike value is low.
V	The sample concentration is too high to evaluate accurate spike recoveries.

ACCREDITATIONS & LOCATIONS

Pace Analytical National 12065 Lebanon Rd Mount Juliet, TN 37122

Alabama	40660	Nebraska	NE-OS-15-05
Alaska	17-026	Nevada	TN000032021-1
Arizona	AZ0612	New Hampshire	2975
Arkansas	88-0469	New Jersey—NELAP	TN002
California	2932	New Mexico ¹	TN00003
Colorado	TN00003	New York	11742
Connecticut	PH-0197	North Carolina	Env375
Florida	E87487	North Carolina ¹	DW21704
Georgia	NELAP	North Carolina ³	41
Georgia ¹	923	North Dakota	R-140
Idaho	TN00003	Ohio—VAP	CL0069
Illinois	200008	Oklahoma	9915
Indiana	C-TN-01	Oregon	TN200002
Iowa	364	Pennsylvania	68-02979
Kansas	E-10277	Rhode Island	LA000356
Kentucky ^{1,6}	KY90010	South Carolina	84004002
Kentucky ²	16	South Dakota	n/a
Louisiana	AI30792	Tennessee ^{1,4}	2006
Louisiana	LA018	Texas	T104704245-20-18
Maine	TN00003	Texas ⁵	LAB0152
Maryland	324	Utah	TN000032021-11
Massachusetts	M-TN003	Vermont	VT2006
Michigan	9958	Virginia	110033
Minnesota	047-999-395	Washington	C847
Mississippi	TN00003	West Virginia	233
Missouri	340	Wisconsin	998093910
Montana	CERT0086	Wyoming	A2LA
A2LA – ISO 17025	1461.01	AIHA-LAP,LLC EMLAP	100789
A2LA – ISO 17025 ⁵	1461.02	DOD	1461.01
Canada	1461.01	USDA	P330-15-00234
EPA-Crypto	TN00003		

Pace Analytical Services, LLC -Dallas 400 W. Bethany Drive Suite 190 Allen, TX 75013

Arkansas	88-0647	Kansas	E10388
Florida	E871118	Texas	T104704232-23-39
Iowa	408	Oklahoma	8727
Louisiana	30686		

¹ Drinking Water ² Underground Storage Tanks ³ Aquatic Toxicity ⁴ Chemical/Microbiological ⁵ Mold ⁶ Wastewater n/a Accreditation not applicable

* Not all certifications held by the laboratory are applicable to the results reported in the attached report.

* Accreditation is only applicable to the test methods specified on each scope of accreditation held by Pace Analytical.

¹ Cp

² Tc

³ Ss

⁴ Cn

⁵ Sr

⁶ Qc

⁷ Gl

⁸ Al

⁹ Sc

Company Name/Address: CSWR - Texas Utility Operating Company 211 Douglas St.		Billing Information: Krista Oberneufemann 1650 Des Peres Rd, Ste 303 Des Peres, MO 63131			Pres Chk	Analysis / Container / Preservative					Chain of Custody	Page ____ of ____					
Report to: Justin Gonzales Callie@pwg.services		Email To: cswr@njsoft.com;andrea.cloy@clearwatersol.c								Pace® PEOPLE ADVANCING SCIENCE							
Project Description: Aransas Bay Utilities		City/State Collected:		Please Circle: PT MT CT ET								ALLEN, TX 400 W. Bethany Drive Suite 190 Allen, TX 75013 Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at: https://info.pacelabs.com/hubs/pas-standard-terms.pdf					
Phone: 361-412-8924		Client Project #		Lab Project # MIDWATWMO-ARABAYRTX								SDG #					
Collected by (print): Jonathon Helm		Site/Facility ID #		P.O. #								Table # L1785704					
Collected by (signature): 		Rush? (Lab MUST Be Notified)		Quote #								Acctnum: MIDWATWMO					
Immediately		<input type="checkbox"/> Same Day <input type="checkbox"/> Five Day		Date Results Needed								Template: T261605					
Packed on Ice <input type="checkbox"/> N <input checked="" type="checkbox"/> Y ✓		<input type="checkbox"/> Next Day <input type="checkbox"/> 5 Day (Rad Only)										Preligin: P1106689					
		<input type="checkbox"/> Two Day <input type="checkbox"/> 10 Day (Rad Only)										PM: 3587 - Lori A Vahrenkamp					
		<input type="checkbox"/> Three Day										PB:					
Sample ID		Comp/Grab	Matrix *	Depth	Date	Time	No. of Cntrs						Shipped Via: FedEX Ground				
RO Brine		G	WW		10/04/24	1345	12	X	X	X	X	X	X	X	X	Remarks Sample # (lab only)	
															-01		
* Matrix: SS - Soil AIR - Air F - Filter GW - Groundwater B - Bioassay WW - WasteWater DW - Drinking Water OT - Other _____		Remarks:		TDS- 639.2			Temp 79.7		Flow _____ Other _____					Sample Receipt Checklist			
				Total residual - 0.00										COC Seal Present/Intact: <input type="checkbox"/> NP <input type="checkbox"/> Y <input type="checkbox"/> N COC Signed/Accurate: <input type="checkbox"/> Y <input type="checkbox"/> N Bottles arrive intact: <input type="checkbox"/> Y <input type="checkbox"/> N Correct bottles used: <input type="checkbox"/> Y <input type="checkbox"/> N Sufficient volume sent: <input type="checkbox"/> Y <input type="checkbox"/> N If Applicable VOA Zero Headspace: <input type="checkbox"/> Y <input type="checkbox"/> N Preservation Correct/Checked: <input type="checkbox"/> Y <input type="checkbox"/> N RAD Screen <0.5 mR/hr: <input type="checkbox"/> Y <input type="checkbox"/> N			
Relinquished by : (Signature) 		Date: 10/4/24	Time: 1526	Received by: (Signature)			Trip Blank Received: Yes / No HCl / MeOH TBR		If preservation required by Login: Date/Time								
Relinquished by : (Signature) 		Date: 10/4/24	Time: 1700	Received by: (Signature)			Temp: °C Bottles Received:										
Relinquished by : (Signature) FedEx		Date: 10/5/24	Time: 0855	Received for lab by: (Signature)			Date: 10/5/24 Time: 0855		Hold: Condition: NCF / OK								

CSWR - TEXAS UTILITY Operating Company

211 Douglas St.

Report to:

Justin Gonzales callie@pwg.services

Project Description:
Aransas Bay Utilities

Phone: 361-412-8924

Krista Oberneufemann
1650 Des Peres Rd, Ste 303
Des Peres, MO 63131Pres
Chk

Analysis / Container / Preservative

Chain of Custody Page ___ of ___



PEOPLE ADVANCING SCIENCE

ALLEN, TX

 400 W. Bethany Drive Suite 190 Allen, TX 75013
 Submitting a sample via this chain of custody
 constitutes acknowledgment and acceptance of the
 Pace Terms and Conditions found at:
<https://info.pacelabs.com/hubs/pai-standard-terms.pdf>

SDG #

Table # L1785704

Acctnum: MIDWATWMO

Template: T261605

Prelogin: P1106689

PM: 3587 - Lori A Vahrenkamp

PB:

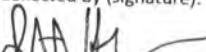
Shipped Via: FedEX Ground

Remarks | Sample # (lab only)

Collected by (print):

Jonathon Helm

Collected by (signature):



Immediately

Packed on Ice N Y ✓

City/State
Collected:Please Circle:
PT MT CT ETClient Project # Lab Project #
MIDWATWMO-ARABAYRTX

Site/Facility ID #

P.O. #

Rush? (Lab MUST Be Notified)

 Same Day Five Day
 Next Day 5 Day (Rad Only)
 Two Day 10 Day (Rad Only)
 Three Day

Quote #

Date Results Needed

No.
of
Cntrs

Sample ID

Comp/Grab

Matrix *

Depth

Date

Time

Cntrs

Ro Brine

G

ww

10/04/24

1345

12

X

* Matrix:

SS - Soil AIR - Air F - Filter
GW - Groundwater B - Bioassay

WW - WasteWater

DW - Drinking Water

OT - Other

Remarks:

pH _____ Temp _____

Flow _____ Other _____

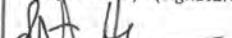
Samples returned via:

UPS FedEx Courier

Tracking #

Sample Receipt Checklist	
COC Seal Present/Intact:	<input type="checkbox"/> Y <input type="checkbox"/> N
COC Signed/Accurate:	<input type="checkbox"/> Y <input type="checkbox"/> N
Bottles arrive intact:	<input type="checkbox"/> Y <input type="checkbox"/> N
Correct bottles used:	<input type="checkbox"/> Y <input type="checkbox"/> N
Sufficient volume sent:	<input type="checkbox"/> Y <input type="checkbox"/> N
If Applicable	
VOA Zero Headspace:	<input type="checkbox"/> Y <input type="checkbox"/> N
Preservation Correct/Checked:	<input type="checkbox"/> Y <input type="checkbox"/> N
RAD Screen <0.5 mR/hr:	<input type="checkbox"/> Y <input type="checkbox"/> N

Relinquished by : (Signature)



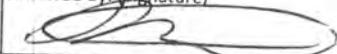
Date:

10-4-24

Time:

1526

Received by: (Signature)

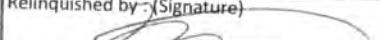


Trip Blank Received: Yes / No

HCl / MeOH

TBR

Relinquished by : (Signature)



Date:

10/4/24

Time:

1100

Received by: (Signature)

Felix

Temp: °C Bottles Received:

10

BOTTLES

If preservation required by Login: Date/Time

Relinquished by : (Signature)

FedEx

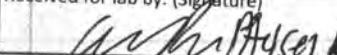
Date:

10/5/24

Time:

0855

Received for lab by: (Signature)



Date: Time:

10/5/24 0855

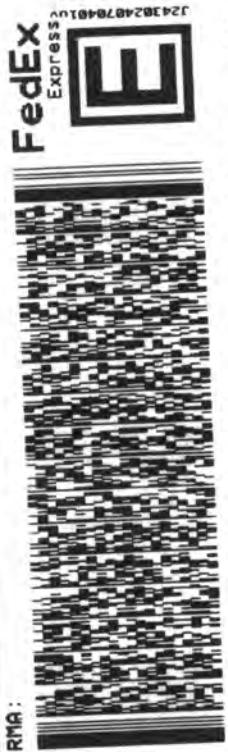
BOTTLES

Hold:

Condition:
NCF / OK

ORIGIN ID: VCTA (361) 446-0565 SHIP DATE: 20SEP24
ACTWT: 50.00 LB MAN
CADDR: 0917226/CAFE3854

589C2/AEF9/FEBD
524302407040100
To SAMPLE RECEIVING
PACE
400 W. BETHANY DR.
SUITE 190
ALLEN TX 75013
(972) 727-1123
REF: DEPT:
RMA: INV: PO:
RMN: 75013-3714.99
ALLEN,TX
CLPD100Y 738705664137
ETP1
400 W BETHANY DR
(808) 10/05-10/06
4759SAT 10/05 08-06
CLOSED - 800



SATURDAY 12:00P
PRIORITY OVERNIGHT
75013 DFW
TX-US
XO DNEA

*3923357 10/04 58CJ2/5254/16C4



SDR

every Saturday
151967 REV 3/21

<i>Pace</i> Master Receiving	DC#_Title: ENV-FRM-ALLE-0017 v15_Sample Condition Upon Receipt
	Effective Date: 12/18/2023

Sample Condition Upon Receipt

Dallas

Ft Worth

Corpus Christi

Austin

Client Name: CSWR - Texas Utility Project Work order (place label): L178 5704
 Courier: FedEx UPS USPS Client LSO PACE Other:

Tracking #: 4367 0544 4137

Custody Seal on Cooler/Box: Yes No

Received on ice: Wet Blue No ice

Receiving Lab 1 Thermometer Used: 12/8 Cooler Temp °C: 2.9 (Recorded) 0.0 (Correction Factor) 2.9 (Actual)

Receiving Lab 2 Thermometer Used: _____ Cooler Temp °C: _____ (Recorded) _____ (Correction Factor) _____ (Actual)

Chain of Custody relinquished

Sampler name & signature on COC

Short HT analyses (<72 hrs)

Temperature should be above freezing to 6°C unless collected same day as receipt in which evidence of cooling is acceptable.

Triage Person: <u>M</u> Date: <u>10/5</u>	Sufficient Volume received <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Correct Container used <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	Container intact <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Sample pH Acceptable <u>6460007</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	pH Strips: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Residual Chlorine Present <u>14800</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	Cl Strips: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>
Sulfide Present <input checked="" type="checkbox"/> Lead Acetate Strips: <u>14800</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
Are soil samples (volatiles, TPH) received in 5035A Kits (not applicable to TCLP VOA or PST Program TPH) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Unpreserved 5035A soil frozen within 48 hrs <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>
Headspace in VOA (>6mm) <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>	Project sampled in USDA Regulated Area outside of Texas <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>
State Sampled: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Non-Conformance(s): _____ <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Login Person: <u>MP</u> Date: <u>10/5</u>	Labeling Person (if different than log-in): _____ Date: _____

Quailtrax ID: 48806



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

October 18, 2024

Tim Gramling
Pace Analytical Allen
400 West Bethany Drive
Suite 190
Allen, TX 75013

RE: Project: L1785704 ARKANSAS BAY UTILITES
Pace Project No.: 40285539

Dear Tim Gramling:

Enclosed are the analytical results for sample(s) received by the laboratory on October 10, 2024. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Green Bay

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Cindy Varga
cindy.varga@pacelabs.com
(920)469-2436
Project Manager

Enclosures

cc: Client Services, Pace Analytical Allen



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

CERTIFICATIONS

Project: L1785704 ARKANSAS BAY UTILITES
Pace Project No.: 40285539

Pace Analytical Services Green Bay

1241 Bellevue Street, Green Bay, WI 54302
Florida/NELAP Certification #: E87948
Illinois Certification #: 200050
Kentucky UST Certification #: 82
Louisiana Certification #: 04168
Minnesota Certification #: 055-999-334
New York Certification #: 12064
North Dakota Certification #: R-150

South Carolina Certification #: 83006001
Texas Certification #: T104704529-21-8
Virginia VELAP Certification ID: 11873
Wisconsin Certification #: 405132750
Wisconsin DATCP Certification #: 105-444
USDA Soil Permit #: P330-21-00008
Federal Fish & Wildlife Permit #: 51774A

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE SUMMARY

Project: L1785704 ARKANSAS BAY UTILITES

Pace Project No.: 40285539

Lab ID	Sample ID	Matrix	Date Collected	Date Received
40285539001	RO BRINE	Water	10/04/24 13:45	10/10/24 09:30

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE ANALYTE COUNT

Project: L1785704 ARKANSAS BAY UTILITES

Pace Project No.: 40285539

Lab ID	Sample ID	Method	Analysts	Analytics Reported
40285539001	RO BRINE	EPA 1631E	MRP	1

PASI-G = Pace Analytical Services - Green Bay

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

ANALYTICAL RESULTS

Project: L1785704 ARKANSAS BAY UTILITES
Pace Project No.: 40285539

Sample: RO BRINE	Lab ID: 40285539001	Collected: 10/04/24 13:45	Received: 10/10/24 09:30	Matrix: Water				
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level	Analytical Method: EPA 1631E Preparation Method: EPA 1631E Pace Analytical Services - Green Bay							
Mercury	ND	ng/L	0.50	1	10/11/24 14:28	10/16/24 17:22	7439-97-6	

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALITY CONTROL DATA

Project: L1785704 ARKANSAS BAY UTILITES

Pace Project No.: 40285539

QC Batch:	487000	Analysis Method:	EPA 1631E
QC Batch Method:	EPA 1631E	Analysis Description:	1631E Mercury
		Laboratory:	Pace Analytical Services - Green Bay
Associated Lab Samples:	40285539001		

METHOD BLANK: 2789012 Matrix: Water

Associated Lab Samples: 40285539001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/16/24 16:32	

METHOD BLANK: 2789013 Matrix: Water

Associated Lab Samples: 40285539001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/16/24 17:37	

METHOD BLANK: 2789014 Matrix: Water

Associated Lab Samples: 40285539001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/16/24 18:17	

METHOD BLANK: 2789015 Matrix: Water

Associated Lab Samples: 40285539001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.53	10/16/24 16:37	

LABORATORY CONTROL SAMPLE: 2789016

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	5.28	106	79-121	

LABORATORY CONTROL SAMPLE: 2789017

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	4.33	87	79-121	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

QUALITY CONTROL DATA

Project: L1785704 ARKANSAS BAY UTILITES

Pace Project No.: 40285539

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:			2791615		2791616							
Parameter	Units	40285568001	MS	MSD	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Max Qual
			Spike Conc.	Spike Conc.								
Mercury	ng/L	10.5	21.1	21.1	33.0	31.8	107	101	75-125	4	24	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:			2791617		2791618							
Parameter	Units	40285543001	MS	MSD	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Max Qual
			Spike Conc.	Spike Conc.								
Mercury	ng/L	0.990	2	2	3.04	2.74	102	88	75-125	10	24	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,

without the written consent of Pace Analytical Services, LLC.

QUALIFIERS

Project: L1785704 ARKANSAS BAY UTILITES

Pace Project No.: 40285539

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Reported results are not rounded until the final step prior to reporting. Therefore, calculated parameters that are typically reported as "Total" may vary slightly from the sum of the reported component parameters.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: L1785704 ARKANSAS BAY UTILITES
Pace Project No.: 40285539

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
40285539001	RO BRINE	EPA 1631E	487000	EPA 1631E	487503

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

40285539

CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Section A**Required Client Information:**

Company: Pace Analytical

Address: 400 W. Bethany Drive Suite 190

Allen, TX 75013

Email: Dallas_Sub@pacelabs.com

Phone: (972) 727-1123 | Fax

Requested Due Date: 14-Oct

Section B**Required Project Information:**

Report To: Pace Analytical Subout Team

Copy To:

Purchase Order #: L1785704

Project Name: Aransas Bay Utilities

Project #:

Section C**Invoice Information:**

Attention: Callie Derzapf

Company Name:

Address:

Pace Quote:

Pace Project Manager: Cindy Varga

Pace Profile #: 38076

Page : 1 Of 1

Regulatory Agency:

State./ Location:

MO

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 / , -) Sample Ids must be unique	MATRIX Drinking Water Water Waste Water Product Soil/Solid Oil Wipe Air Other Tissue	CODE DW WT WW P SL OL WP AR OT TS	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED				# OF CONTAINERS	Preservatives							Requested Analysis Filtered (Y/N)										Residual Chlorine (Y/N)			
						START		END																							
						DATE	TIME	DATE	TIME		Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Analyses Test	Y/N	Low Level Hg										
1	RO BRINE		WT					04-Oct	13:45	1									X										001		
2																															
3																															
4																															
5																															
6																															
7																															
8																															
9																															
10																															
11																															
12																															

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS
Pace Analytical Batch: WG2378971	John Jaisen Ramos/FedEx FedEx	10/9/24	1200	FedEx	10/9/24	1700	
Pace Analytical SDGs: L1785704		10/10/24	0930	Brian Brindon	10/10/24	0930	N/A N N Y
Location: Green Bay, WI 54302							

SAMPLER NAME AND SIGNATURE		TEMP in C Received on Ice (Y/N) Custody Sealed Cooler (Y/N) Samples Intact (Y/N)
PRINT Name of SAMPLER:		
SIGNATURE of SAMPLER:		
DATE Signed:		

Effective Date: 8/16/2022

Client Name: Pace TX

All containers needing preservation have been checked and noted below:

Lab Lot# of pH paper:

Sample Preservation Receipt Form

Project #

 Yes No N/A40285539

Pace Lab #	Glass				Plastic				Vials				Jars				General				VOA Vials (>6mm)*	Initial when completed:	Date/ Time:						
	AG1U	BG1U	AG1H	AG4S	AG5U	AG2S	BG3U	BP1U	BP3U	BP3B	BP3N	BP3S	BP2Z	VG9C	DG9T	VG9U	VG9H	VG9M	VG9D	JGFU	JG9U	WGFU	WPFU	SP5T	ZPLC	GN 1	GN 2		
001																											2.5 / 5		
002																											2.5 / 5		
003																											2.5 / 5		
004																											2.5 / 5		
005																											2.5 / 5		
006																											2.5 / 5		
007																											2.5 / 5		
008																											2.5 / 5		
009																											2.5 / 5		
010																											2.5 / 5		
011																											2.5 / 5		
012																											2.5 / 5		
013																											2.5 / 5		
014																											2.5 / 5		
015																											2.5 / 5		
016																											2.5 / 5		
017																											2.5 / 5		
018																											2.5 / 5		
019																											2.5 / 5		
020																											2.5 / 5		

Exceptions to preservation check: VOA, Coliform, TOC, TOX, TOH, O&G, WI DRO, Phenolics, Other:

Headspace in VOA Vials (>6mm): Yes No N/A

*If yes look in headspace column

AG1U	1 liter amber glass	BP1U	1 liter plastic unpres	VG9C	40 mL clear ascorbic w/ HCl	JGFU	4 oz amber jar unpres
BG1U	1 liter clear glass	BP3U	250 mL plastic unpres	DG9T	40 mL amber Na Thio	JG9U	9 oz amber jar unpres
AG1H	1 liter amber glass HCL	BP3B	250 mL plastic NaOH	VG9U	40 mL clear vial unpres	WGFU	4 oz clear jar unpres
AG4S	125 mL amber glass H2SO4	BP3N	250 mL plastic HNO3	VG9H	40 mL clear vial HCL	WPFU	4 oz plastic jar unpres
AG5U	100 mL amber glass unpres	BP3S	250 mL plastic H2SO4	VG9M	40 mL clear vial MeOH	SP5T	120 mL plastic Na Thiosulfate
AG2S	500 mL amber glass H2SO4	BP2Z	500 mL plastic NaOH + Zn	VG9D	40 mL clear vial DI	ZPLC	ziploc bag
BG3U	250 mL clear glass unpres					GN 1	250 mL clear glass HCL
						GN 2	

Page 1 of 2

Sample Condition Upon Receipt Form (SCUR)

Project #:

Client Name: Pace TX

WO# : 40285539

Courier: CS Logistics Fed Ex Speedee UPS Waltco
 Client Pace Other: _____

40285539

Tracking #: 4171 1262 7703Custody Seal on Cooler/Box Present: yes no Seals intact: yes noCustody Seal on Samples Present: yes no Seals intact: yes noPacking Material: Bubble Wrap Bubble Bags None OtherThermometer Used SR - 141 Type of Ice: Wet Blue Dry None Meltwater OnlyCooler Temperature Uncorr: N/A /Corr: N/ATemp Blank Present: yes noBiological Tissue is Frozen: yes no

Temp should be above freezing to 6°C.

Biota Samples may be received at ≤ 0°C if shipped on Dry Ice.

Person examining contents:

Date: 10/10/22 /Initials: GRLabeled By Initials: MR

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name & Signature on COC:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	<u>irwo</u> 10/10/22 6F
Samples Arrived within Hold Time: - DI VOA Samples frozen upon receipt	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Date/Time:
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6.
Rush Turn Around Time Requested:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	7.
Sufficient Volume: For Analysis: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No MS/MSD: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	9.
Correct Type: Pace Green Bay, Pace IR, Non-Pace		
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC: -Includes date/time/ID/Analysis	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
Matrix: <u>W</u>		
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

Client Notification/ Resolution:

If checked, see attached form for additional comments

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

PM Review is documented electronically in LIMs. By releasing the project, the PM acknowledges they have reviewed the sample log!

Page 2 of 2



ANALYTICAL REPORT

October 25, 2024

¹Cp

²Tc

³Ss

⁴Cn

⁵Sr

⁶Qc

⁷GI

⁸AI

⁹Sc

CSWR - Texas Utility Operating Company

Sample Delivery Group: L1787826
Samples Received: 10/11/2024
Project Number:
Description: Aransas Bay Utilities

Report To: Callie Derzapf
211 Douglas St.
Richmond, TX 77469

Entire Report Reviewed By:

Lori A Vahrenkamp
Project Manager

Results relate only to the items tested or calibrated and are reported as rounded values. This test report shall not be reproduced, except in full, without written approval of the laboratory. Where applicable, sampling conducted by Pace Analytical National is performed per guidance provided in laboratory standard operating procedures ENV-SOP-MTJL-0067 and ENV-SOP-MTJL-0068. Where sampling conducted by the customer, results relate to the accuracy of the information provided, and as the samples are received.

Pace Analytical National

12065 Lebanon Rd Mount Juliet, TN 37122 615-758-5858 800-767-5859 mydata.pacelabs.com

TABLE OF CONTENTS

Cp: Cover Page	1	
Tc: Table of Contents	2	
Ss: Sample Summary	3	
Cn: Case Narrative	4	
Sr: Sample Results	5	
RO BRINE L1787826-01	5	
Qc: Quality Control Summary	7	
Gravimetric Analysis by Method 2540C	7	
Gravimetric Analysis by Method 2540D	8	
Wet Chemistry by Method 1664B	9	
Wet Chemistry by Method 2320B	10	
Wet Chemistry by Method 300.0	11	
Wet Chemistry by Method 3500Cr-B	13	
Wet Chemistry by Method 351.2	14	
Wet Chemistry by Method 4500CN-E	15	
Wet Chemistry by Method 4500P-E	16	
Wet Chemistry by Method 5210 B-2016	17	
Wet Chemistry by Method 5220D	19	
Wet Chemistry by Method 5310C	20	
Wet Chemistry by Method SM4500NH3H	21	
Metals (ICP) by Method 200.7	22	
Gl: Glossary of Terms	24	
Al: Accreditations & Locations	25	
Sc: Sample Chain of Custody	26	

SAMPLE SUMMARY

RO BRINE L1787826-01 WW Collected by Jonathan Helm Collected date/time 10/10/24 10:00 Received date/time 10/11/24 09:00

Method	Batch	Dilution	Preparation date/time	Analysis date/time	Analyst	Location
Calculated Results	WG2382527	1	10/24/24 08:59	10/24/24 08:59	DJS	Mt. Juliet, TN
Gravimetric Analysis by Method 2540C	WG2380619	1	10/11/24 17:08	10/11/24 18:09	QQT	Allen, TX
Gravimetric Analysis by Method 2540D	WG2381392	1	10/13/24 14:27	10/13/24 16:26	QQT	Allen, TX
Wet Chemistry by Method 1664B	WG2385868	1	10/21/24 07:35	10/21/24 15:18	TJL	Mt. Juliet, TN
Wet Chemistry by Method 2320B	WG2381691	1	10/14/24 10:14	10/14/24 10:14	SKW	Allen, TX
Wet Chemistry by Method 300.0	WG2380568	1	10/11/24 19:55	10/11/24 19:55	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2381716	1	10/15/24 15:49	10/15/24 15:49	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2381716	1	10/15/24 16:01	10/15/24 16:01	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2381716	1	10/15/24 16:13	10/15/24 16:13	SMC	Allen, TX
Wet Chemistry by Method 3500Cr-B	WG2383960	1	10/17/24 16:19	10/17/24 16:19	KCM	Allen, TX
Wet Chemistry by Method 351.2	WG2383123	1	10/16/24 10:20	10/16/24 18:56	EIG	Allen, TX
Wet Chemistry by Method 4500CN-E	WG2381652	1	10/15/24 14:00	10/15/24 16:51	KCM	Allen, TX
Wet Chemistry by Method 4500CN-G	WG2381652	1	10/15/24 16:51	10/15/24 16:51	KCM	Allen, TX
Wet Chemistry by Method 4500P-E	WG2383256	1	10/17/24 16:44	10/17/24 16:44	SMC	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2380245	1	10/11/24 15:00	10/16/24 09:14	JBS	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2380285	1	10/11/24 16:29	10/16/24 10:31	SKW	Allen, TX
Wet Chemistry by Method 5220D	WG2381675	1	10/14/24 10:32	10/14/24 13:17	JBS	Allen, TX
Wet Chemistry by Method 5310C	WG2381772	1	10/14/24 21:08	10/14/24 21:08	EIG	Allen, TX
Wet Chemistry by Method SM4500NH3H	WG2382396	1	10/15/24 14:13	10/15/24 14:13	EIG	Allen, TX
Metals (ICP) by Method 200.7	WG2382527	1	10/23/24 17:08	10/24/24 08:59	DJS	Mt. Juliet, TN
Subcontracted Analyses	WG2382639	1	10/23/24 00:00	10/23/24 00:00	JWW	Green Bay, WI 54302

¹Cp

²Tc

³Ss

⁴Cn

⁵Sr

⁶Qc

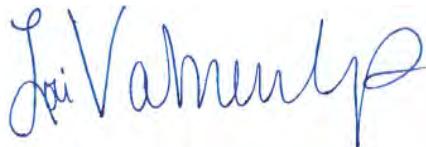
⁷Gl

⁸Al

⁹Sc

CASE NARRATIVE

All sample aliquots were received at the correct temperature, in the proper containers, with the appropriate preservatives, and within method specified holding times, unless qualified or notated within the report. Where applicable, all MDL (LOD) and RDL (LOQ) values reported for environmental samples have been corrected for the dilution factor used in the analysis. All Method and Batch Quality Control are within established criteria except where addressed in this case narrative, a non-conformance form or properly qualified within the sample results. By my digital signature below, I affirm to the best of my knowledge, all problems/anomalies observed by the laboratory as having the potential to affect the quality of the data have been identified by the laboratory, and no information or data have been knowingly withheld that would affect the quality of the data.



Lori A Vahrenkamp
Project Manager

Project Narrative

L1787826 -01 contains subout data that is included after the chain of custody.

Sample Delivery Group (SDG) Narrative

The following analysis were performed from an unpreserved, insufficiently or inadequately preserved sample.

<u>Lab Sample ID</u>	<u>Project Sample ID</u>	<u>Method</u>
L1787826-01	RO BRINE	1664B

- 1 Cp
- 2 Tc
- 3 Ss
- 4 Cn
- 5 Sr
- 6 Qc
- 7 GI
- 8 AI
- 9 SC

Calculated Results

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Trivalent	<0.00300		0.00300	1	10/24/2024 08:59	WG2382527

¹ Cp² Tc³ Ss⁴ Cn⁵ Sr⁶ Qc⁷ Gl⁸ Al⁹ Sc

Gravimetric Analysis by Method 2540C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Total Dissolved Solids	7900		50.0	1	10/11/2024 18:09	WG2380619

Gravimetric Analysis by Method 2540D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Suspended Solids	5.65		2.95	1	10/13/2024 16:26	WG2381392

Wet Chemistry by Method 1664B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Oil & Grease (Hexane Extr)	<5.05		5.05	1	10/21/2024 15:18	WG2385868

Wet Chemistry by Method 2320B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Alkalinity	1300		20.0	1	10/14/2024 10:14	WG2381691
Alkalinity,Bicarbonate	1300		20.0	1	10/14/2024 10:14	WG2381691
Alkalinity,Carbonate	<20.0		20.0	1	10/14/2024 10:14	WG2381691
Alkalinity,Hydroxide	<20.0		20.0	1	10/14/2024 10:14	WG2381691
Phenolphthalein Alkalinity	<20.0		20.0	1	10/14/2024 10:14	WG2381691

Wet Chemistry by Method 300.0

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chloride	3230		0.800	1	10/15/2024 16:13	WG2381716
Fluoride	2.83		0.500	1	10/15/2024 15:49	WG2381716
Nitrate	0.711		0.500	1	10/11/2024 19:55	WG2380568
Sulfate	749		0.700	1	10/15/2024 16:01	WG2381716

Wet Chemistry by Method 3500Cr-B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Hexavalent	<0.00300	<u>J6</u>	0.00300	1	10/17/2024 16:19	WG2383960

Wet Chemistry by Method 351.2

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Kjeldahl Nitrogen, TKN	0.926	<u>J6</u>	0.250	1	10/16/2024 18:56	WG2383123

Wet Chemistry by Method 4500CN-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide	<0.0100		0.0100	1	10/15/2024 16:51	WG2381652

Wet Chemistry by Method 4500CN-G

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide,amenable	<0.0100		0.0100	1	10/15/2024 16:51	WG2381652

¹ Cp

Wet Chemistry by Method 4500P-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Phosphorus,Total	0.951		0.0500	1	10/17/2024 16:44	WG2383256

² Tc³ Ss⁴ Cn⁵ Sr⁶ Qc⁷ GI⁸ Al⁹ Sc

Wet Chemistry by Method 5210 B-2016

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
BOD	<1.00		1.00	1	10/16/2024 10:31	WG2380285
CBOD	<1.00		1.00	1	10/16/2024 09:14	WG2380245

Wet Chemistry by Method 5220D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
COD	162		35.0	1	10/14/2024 13:17	WG2381675

Wet Chemistry by Method 5310C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
TOC (Total Organic Carbon)	2.45		0.700	1	10/14/2024 21:08	WG2381772

Wet Chemistry by Method SM4500NH3H

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Ammonia Nitrogen	<0.100		0.100	1	10/15/2024 14:13	WG2382396

Metals (ICP) by Method 200.7

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Aluminum	<0.200		0.200	1	10/24/2024 08:59	WG2382527
Antimony	<0.0100		0.0100	1	10/24/2024 08:59	WG2382527
Arsenic	<0.0100		0.0100	1	10/24/2024 08:59	WG2382527
Barium	0.155		0.00500	1	10/24/2024 08:59	WG2382527
Beryllium	<0.00200		0.00200	1	10/24/2024 08:59	WG2382527
Cadmium	<0.00200		0.00200	1	10/24/2024 08:59	WG2382527
Chromium	<0.0100		0.0100	1	10/24/2024 08:59	WG2382527
Copper	<0.0100		0.0100	1	10/24/2024 08:59	WG2382527
Lead	<0.00500		0.00500	1	10/24/2024 08:59	WG2382527
Magnesium	106		1.00	1	10/24/2024 08:59	WG2382527
Nickel	<0.0100		0.0100	1	10/24/2024 08:59	WG2382527
Selenium	<0.0100		0.0100	1	10/24/2024 08:59	WG2382527
Silver	<0.00500		0.00500	1	10/24/2024 08:59	WG2382527
Thallium	<0.0100		0.0100	1	10/24/2024 08:59	WG2382527
Zinc	<0.0500		0.0500	1	10/24/2024 08:59	WG2382527

WG2380619

Gravimetric Analysis by Method 2540C

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4132065-1 10/11/24 18:09

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Total Dissolved Solids	<25.0		25.0	25.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1786309-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1786309-01 10/11/24 18:09 • (DUP) R4132065-3 10/11/24 18:09

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
Total Dissolved Solids	8660	8980	1	3.63		10

Laboratory Control Sample (LCS)

(LCS) R4132065-2 10/11/24 18:09

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Total Dissolved Solids	2260	2550	113	85.0-115	

WG2381392

Gravimetric Analysis by Method 2540D

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4132787-1 10/13/24 16:26

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Suspended Solids	<2.50		2.50	2.50

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1788090-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1788090-01 10/13/24 16:26 • (DUP) R4132787-3 10/13/24 16:26

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Suspended Solids	2280	3240	1	34.8	J3	10

L1788097-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1788097-01 10/13/24 16:26 • (DUP) R4132787-4 10/13/24 16:26

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Suspended Solids	210	215	1	2.35		10

Laboratory Control Sample (LCS)

(LCS) R4132787-2 10/13/24 16:26

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Suspended Solids	854	856	100	85.0-115	

WG2385868

Wet Chemistry by Method 1664B

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4135497-1 10/21/24 15:18

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Oil & Grease (Hexane Extr)	<1.40		1.40	5.00

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS) • Laboratory Control Sample Duplicate (LCSD)

(LCS) R4135497-2 10/21/24 15:18 • (LCSD) R4135497-3 10/21/24 15:18

Analyte	Spike Amount mg/l	LCS Result mg/l	LCSD Result mg/l	LCS Rec. %	LCSD Rec. %	Rec. Limits %	<u>LCS Qualifier</u>	<u>LCSD Qualifier</u>	RPD %	RPD Limits %
Oil & Grease (Hexane Extr)	40.0	41.3	41.2	103	103	78.0-114			0.242	20

L1786521-01 Original Sample (OS) • Matrix Spike (MS)

(OS) L1786521-01 10/21/24 15:18 • (MS) R4135497-4 10/21/24 15:18

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>
Oil & Grease (Hexane Extr)	40.0	<5.00	7.78	19.5	1	78.0-114	<u>J6</u>

⁷Gl⁸Al⁹Sc

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

L1787826

DATE/TIME:

10/25/24 10:40

PAGE:

9 of 41

WG2381691

Wet Chemistry by Method 2320B

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4132398-1 10/14/24 10:14

¹Cp

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Alkalinity	<20.0		20.0	20.0
Alkalinity,Bicarbonate	<20.0		20.0	20.0
Alkalinity,Carbonate	<20.0		20.0	20.0
Alkalinity,Hydroxide	<20.0		20.0	20.0
Phenolphthalein Alkalinity	<20.0		20.0	20.0

²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1786408-04 Original Sample (OS) • Duplicate (DUP)

(OS) L1786408-04 10/14/24 10:14 • (DUP) R4132398-3 10/14/24 10:14

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD	<u>DUP Qualifier</u>	DUP RPD Limits
Alkalinity	<20.0	<20.0	1	0.000		20

L1786441-03 Original Sample (OS) • Duplicate (DUP)

(OS) L1786441-03 10/14/24 10:14 • (DUP) R4132398-4 10/14/24 10:14

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD	<u>DUP Qualifier</u>	DUP RPD Limits
Alkalinity	185	185	1	0.000		20

Laboratory Control Sample (LCS)

(LCS) R4132398-2 10/14/24 10:14

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Alkalinity	250	240	96.0	90.0-110	

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4134408-1 10/11/24 19:26

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Nitrate	<0.379		0.379	0.500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4134408-2 10/11/24 19:41

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Nitrate	5.00	4.80	96.0	90.0-110	

L1787833-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787833-02 10/11/24 20:55 • (MS) R4134408-3 10/11/24 22:24 • (MSD) R4134408-4 10/11/24 22:39

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Nitrate	5.00	<0.500	4.78	4.92	95.6	98.5	1	90.0-110			2.93	20

WG2381716

Wet Chemistry by Method 300.0

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4133257-1 10/15/24 13:03

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chloride	<0.325		0.325	0.800
Fluoride	<0.0947		0.0947	0.500
Sulfate	<0.211		0.211	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4133257-2 10/15/24 13:15

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chloride	5.00	4.87	97.3	90.0-110	
Fluoride	5.00	4.94	98.8	90.0-110	
Sulfate	5.00	5.03	101	90.0-110	

L1787303-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787303-01 10/15/24 14:38 • (MS) R4133257-3 10/15/24 17:00 • (MSD) R4133257-4 10/15/24 17:12

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD	RPD Limits
Chloride	500	1490	1890	1880	79.2	76.8	1	90.0-110	EJ6	EJ6	0.637	20
Sulfate	500	522	886	889	72.7	73.4	1	90.0-110	J6	J6	0.371	20

L1787303-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787303-01 10/15/24 14:26 • (MS) R4133257-5 10/15/24 17:48 • (MSD) R4133257-6 10/15/24 18:00

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD	RPD Limits
Fluoride	5.00	0.856	5.44	5.40	91.6	90.8	1	90.0-110			0.720	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

L1787826

DATE/TIME:

10/25/24 10:40

PAGE:

12 of 41

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4134190-1 10/17/24 16:19

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chromium,Hexavalent	<0.00200		0.00200	0.00300

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4134190-2 10/17/24 16:19

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chromium,Hexavalent	0.200	0.192	95.8	85.0-115	

L1787303-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787303-01 10/17/24 16:19 • (MS) R4134190-3 10/17/24 16:19 • (MSD) R4134190-4 10/17/24 16:19

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Chromium,Hexavalent	0.200	<0.00300	0.187	0.188	93.7	94.1	1	85.0-115			0.462	20

L1787826-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787826-01 10/17/24 16:19 • (MS) R4134190-5 10/17/24 16:19 • (MSD) R4134190-6 10/17/24 16:19

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Chromium,Hexavalent	0.200	<0.00300	0.166	0.169	83.2	84.5	1	85.0-115	J6	J6	1.55	20

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4133694-1 10/16/24 18:52

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Kjeldahl Nitrogen, TKN	<0.140		0.140	0.250

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4133694-2 10/16/24 18:53

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Kjeldahl Nitrogen, TKN	4.00	4.09	102	90.0-110	

L1787826-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787826-01 10/16/24 18:56 • (MS) R4133694-3 10/16/24 19:01 • (MSD) R4133694-4 10/16/24 19:02

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Kjeldahl Nitrogen, TKN	4.00	0.926	4.30	4.38	84.4	86.4	1	90.0-110	J6	1.84	20

WG2381652

Wet Chemistry by Method 4500CN-E

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4133054-1 10/15/24 16:51

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Cyanide	<0.00430		0.00430	0.0100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4133054-2 10/15/24 16:51

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Cyanide	0.100	0.0942	94.2	85.0-115	

L1785451-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1785451-02 10/15/24 16:51 • (MS) R4133054-3 10/15/24 16:51 • (MSD) R4133054-4 10/15/24 16:51

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Cyanide	0.100	<0.0100	0.0974	0.0906	97.4	90.6	1	85.0-115			7.21	20

L1786994-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1786994-02 10/15/24 16:51 • (MS) R4133054-5 10/15/24 16:51 • (MSD) R4133054-6 10/15/24 16:51

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Cyanide	0.100	<0.0100	0.0917	0.0882	91.7	88.2	1	85.0-115			3.97	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1787826

PAGE:

15 of 41

WG2383256

Wet Chemistry by Method 4500P-E

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4134207-1 10/17/24 16:44

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Phosphorus,Total	<0.0152		0.0152	0.0500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4134207-2 10/17/24 16:44

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Phosphorus,Total	0.500	0.530	106	80.0-120	

L1787834-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787834-02 10/17/24 16:44 • (MS) R4134207-3 10/17/24 16:45 • (MSD) R4134207-4 10/17/24 16:45

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Phosphorus,Total	0.500	0.0820	0.620	0.616	108	107	1	80.0-120		0.583	20

WG2380245

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4133299-1 10/16/24 08:59

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
CBOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1787396-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1787396-01 10/16/24 09:08 • (DUP) R4133299-3 10/16/24 10:06

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
CBOD	1.49	1.65	1	10.2		20

Laboratory Control Sample (LCS)

(LCS) R4133299-2 10/16/24 09:05

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
CBOD	198	187	94.4	85-115	

WG2380285

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4133338-1 10/16/24 10:16

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
BOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1787970-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1787970-01 10/16/24 10:54 • (DUP) R4133338-3 10/16/24 11:01

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
BOD	<1.00	<1.00	1	0		20

Laboratory Control Sample (LCS)

(LCS) R4133338-2 10/16/24 10:21

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
BOD	198	192	96.8	85-115	

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4132309-1 10/14/24 13:17

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
COD	<16.1		16.1	35.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4132309-2 10/14/24 13:17

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
COD	500	520	104	80.0-120	

L1786413-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1786413-01 10/14/24 13:17 • (MS) R4132309-3 10/14/24 13:17 • (MSD) R4132309-4 10/14/24 13:17

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
COD	500	62.0	527	527	92.9	92.9	1	80.0-120			0.000	20

L1787850-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787850-01 10/14/24 13:17 • (MS) R4132309-5 10/14/24 13:17 • (MSD) R4132309-6 10/14/24 13:17

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
COD	500	<35.0	516	529	99.2	102	1	80.0-120			2.40	20

WG2381772

Wet Chemistry by Method 5310C

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4132814-1 10/14/24 16:29

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
TOC (Total Organic Carbon)	<0.270		0.270	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4132814-4 10/15/24 10:11

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
TOC (Total Organic Carbon)	10.0	10.2	102	90.0-110	

L1787303-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787303-01 10/14/24 20:00 • (MS) R4132814-5 10/15/24 10:34 • (MSD) R4132814-6 10/15/24 10:57

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
TOC (Total Organic Carbon)	10.0	10.3	20.0	20.0	96.7	96.3	1	80.0-120			0.200	20

WG2382396

Wet Chemistry by Method SM4500NH3H

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4133418-1 10/15/24 13:22

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Ammonia Nitrogen	<0.0280		0.0280	0.100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4133418-2 10/15/24 13:24

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Ammonia Nitrogen	5.00	5.17	103	80.0-120	

L1786421-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1786421-01 10/15/24 13:36 • (MS) R4133418-3 10/15/24 13:25 • (MSD) R4133418-4 10/15/24 13:27

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Ammonia Nitrogen	5.00	<0.100	4.94	4.92	98.8	98.4	1	80.0-120			0.406	20

L1786424-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1786424-01 10/15/24 13:38 • (MS) R4133418-5 10/15/24 13:29 • (MSD) R4133418-6 10/15/24 13:31

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Ammonia Nitrogen	5.00	<0.100	4.86	4.85	97.2	97.0	1	80.0-120			0.206	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1787826

PAGE:

21 of 41

QUALITY CONTROL SUMMARY

[L1787826-01](#)

Method Blank (MB)

(MB) R4137130-1 10/24/24 08:18

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Aluminum	<0.0592		0.0592	0.200
Antimony	<0.00398		0.00398	0.0100
Arsenic	<0.00645		0.00645	0.0100
Barium	<0.000795		0.000795	0.00500
Beryllium	<0.000401		0.000401	0.00200
Cadmium	<0.000552		0.000552	0.00200
Chromium	<0.00163		0.00163	0.0100
Copper	<0.00226		0.00226	0.0100
Lead	<0.00227		0.00227	0.00500
Magnesium	<0.115		0.115	1.00
Nickel	0.00262	J	0.00182	0.0100
Selenium	<0.00616		0.00616	0.0100
Silver	0.00425	J	0.00131	0.00500
Thallium	<0.00460		0.00460	0.0100
Zinc	<0.00578		0.00578	0.0500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4137130-2 10/24/24 08:20

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Aluminum	10.0	10.1	101	85.0-115	
Antimony	1.00	0.994	99.4	85.0-115	
Arsenic	1.00	0.995	99.5	85.0-115	
Barium	1.00	1.02	102	85.0-115	
Beryllium	1.00	1.00	100	85.0-115	
Cadmium	1.00	0.969	96.9	85.0-115	
Chromium	1.00	1.00	100	85.0-115	
Copper	1.00	0.959	95.9	85.0-115	
Lead	1.00	0.986	98.6	85.0-115	
Magnesium	10.0	9.69	96.9	85.0-115	
Nickel	1.00	0.962	96.2	85.0-115	
Selenium	1.00	1.00	100	85.0-115	
Silver	0.200	0.202	101	85.0-115	
Thallium	1.00	1.01	101	85.0-115	
Zinc	1.00	1.01	101	85.0-115	

QUALITY CONTROL SUMMARY

L1787826-01

L1787788-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787788-01 10/24/24 08:21 • (MS) R4137130-4 10/24/24 08:25 • (MSD) R4137130-5 10/24/24 08:26

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	MS Qualifier	MSD Qualifier	RPD %	RPD Limits %
Aluminum	10.0	12.5	21.9	22.7	94.0	102	1	70.0-130			3.44	20
Antimony	1.00	<0.0100	0.993	1.03	99.3	103	1	70.0-130			4.16	20
Arsenic	1.00	0.0313	1.04	1.07	101	104	1	70.0-130			2.89	20
Barium	1.00	<0.00500	0.990	1.02	98.8	102	1	70.0-130			3.40	20
Beryllium	1.00	<0.00200	0.990	1.02	99.0	102	1	70.0-130			3.37	20
Cadmium	1.00	<0.00200	0.974	1.01	97.4	101	1	70.0-130			3.88	20
Chromium	1.00	<0.0100	0.984	1.01	98.0	101	1	70.0-130			2.74	20
Copper	1.00	<0.0100	1.00	1.04	99.2	103	1	70.0-130			4.08	20
Lead	1.00	<0.00500	0.976	1.02	97.6	102	1	70.0-130			4.17	20
Magnesium	10.0	2.18	11.4	11.7	91.9	95.7	1	70.0-130			3.24	20
Nickel	1.00	0.258	1.23	1.27	96.9	101	1	70.0-130			3.22	20
Selenium	1.00	<0.0100	1.03	1.06	103	106	1	70.0-130			2.45	20
Silver	0.200	<0.00500	0.203	0.211	100	104	1	70.0-130			3.94	20
Thallium	1.00	<0.0100	0.997	1.03	99.7	103	1	70.0-130			2.82	20
Zinc	1.00	<0.0500	1.01	1.04	99.1	102	1	70.0-130			2.79	20

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1787791-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787791-01 10/24/24 08:28 • (MS) R4137130-6 10/24/24 08:30 • (MSD) R4137130-7 10/24/24 08:31

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	MS Qualifier	MSD Qualifier	RPD %	RPD Limits %
Aluminum	10.0	6.07	16.1	15.7	101	96.3	1	70.0-130			2.66	20
Antimony	1.00	<0.0100	1.00	1.00	100	100	1	70.0-130			0.319	20
Arsenic	1.00	<0.0100	1.02	1.01	101	99.7	1	70.0-130			1.43	20
Barium	1.00	<0.00500	1.01	0.984	100	97.9	1	70.0-130			2.26	20
Beryllium	1.00	<0.00200	1.01	0.988	101	98.8	1	70.0-130			2.09	20
Cadmium	1.00	<0.00200	0.980	0.966	98.0	96.6	1	70.0-130			1.41	20
Chromium	1.00	<0.0100	1.01	0.989	100	98.2	1	70.0-130			2.01	20
Copper	1.00	<0.0100	0.995	0.975	98.7	96.6	1	70.0-130			2.09	20
Lead	1.00	<0.00500	0.991	0.967	99.1	96.7	1	70.0-130			2.45	20
Magnesium	10.0	1.54	11.1	10.8	95.6	92.6	1	70.0-130			2.73	20
Nickel	1.00	0.644	1.64	1.61	99.5	96.1	1	70.0-130			2.09	20
Selenium	1.00	<0.0100	1.04	1.01	104	101	1	70.0-130			2.38	20
Silver	0.200	<0.00500	0.201	0.196	100	98.0	1	70.0-130			2.41	20
Thallium	1.00	<0.0100	1.01	0.983	101	98.3	1	70.0-130			3.02	20
Zinc	1.00	1.68	2.69	2.65	101	97.2	1	70.0-130			1.50	20

GLOSSARY OF TERMS

Guide to Reading and Understanding Your Laboratory Report

The information below is designed to better explain the various terms used in your report of analytical results from the Laboratory. This is not intended as a comprehensive explanation, and if you have additional questions please contact your project representative.

Results Disclaimer - Information that may be provided by the customer, and contained within this report, include Permit Limits, Project Name, Sample ID, Sample Matrix, Sample Preservation, Field Blanks, Field Spikes, Field Duplicates, On-Site Data, Sampling Collection Dates/Times, and Sampling Location. Results relate to the accuracy of this information provided, and as the samples are received.

Abbreviations and Definitions

MDL	Method Detection Limit.	1 Cp
RDL	Reported Detection Limit.	2 Tc
Rec.	Recovery.	3 Ss
RPD	Relative Percent Difference.	4 Cn
SDG	Sample Delivery Group.	5 Sr
Analyte	The name of the particular compound or analysis performed. Some Analyses and Methods will have multiple analytes reported.	6 Qc
Dilution	If the sample matrix contains an interfering material, the sample preparation volume or weight values differ from the standard, or if concentrations of analytes in the sample are higher than the highest limit of concentration that the laboratory can accurately report, the sample may be diluted for analysis. If a value different than 1 is used in this field, the result reported has already been corrected for this factor.	7 Gl
Limits	These are the target % recovery ranges or % difference value that the laboratory has historically determined as normal for the method and analyte being reported. Successful QC Sample analysis will target all analytes recovered or duplicated within these ranges.	8 Al
Original Sample	The non-spiked sample in the prep batch used to determine the Relative Percent Difference (RPD) from a quality control sample. The Original Sample may not be included within the reported SDG.	9 Sc
Qualifier	This column provides a letter and/or number designation that corresponds to additional information concerning the result reported. If a Qualifier is present, a definition per Qualifier is provided within the Glossary and Definitions page and potentially a discussion of possible implications of the Qualifier in the Case Narrative if applicable.	
Result	The actual analytical final result (corrected for any sample specific characteristics) reported for your sample. If there was no measurable result returned for a specific analyte, the result in this column may state "ND" (Not Detected) or "BDL" (Below Detectable Levels). The information in the results column should always be accompanied by either an MDL (Method Detection Limit) or RDL (Reporting Detection Limit) that defines the lowest value that the laboratory could detect or report for this analyte.	
Uncertainty (Radiochemistry)	Confidence level of 2 sigma.	
Case Narrative (Cn)	A brief discussion about the included sample results, including a discussion of any non-conformances to protocol observed either at sample receipt by the laboratory from the field or during the analytical process. If present, there will be a section in the Case Narrative to discuss the meaning of any data qualifiers used in the report.	
Quality Control Summary (Qc)	This section of the report includes the results of the laboratory quality control analyses required by procedure or analytical methods to assist in evaluating the validity of the results reported for your samples. These analyses are not being performed on your samples typically, but on laboratory generated material.	
Sample Chain of Custody (Sc)	This is the document created in the field when your samples were initially collected. This is used to verify the time and date of collection, the person collecting the samples, and the analyses that the laboratory is requested to perform. This chain of custody also documents all persons (excluding commercial shippers) that have had control or possession of the samples from the time of collection until delivery to the laboratory for analysis.	
Sample Results (Sr)	This section of your report will provide the results of all testing performed on your samples. These results are provided by sample ID and are separated by the analyses performed on each sample. The header line of each analysis section for each sample will provide the name and method number for the analysis reported.	
Sample Summary (Ss)	This section of the Analytical Report defines the specific analyses performed for each sample ID, including the dates and times of preparation and/or analysis.	

Qualifier Description

E	The analyte concentration exceeds the upper limit of the calibration range of the instrument established by the initial calibration (ICAL).
J	The identification of the analyte is acceptable; the reported value is an estimate.
J3	The associated batch QC was outside the established quality control range for precision.
J6	The sample matrix interfered with the ability to make any accurate determination; spike value is low.

ACCREDITATIONS & LOCATIONS

Pace Analytical National 12065 Lebanon Rd Mount Juliet, TN 37122

Alabama	40660	Nebraska	NE-OS-15-05
Alaska	17-026	Nevada	TN000032021-1
Arizona	AZ0612	New Hampshire	2975
Arkansas	88-0469	New Jersey—NELAP	TN002
California	2932	New Mexico ¹	TN00003
Colorado	TN00003	New York	11742
Connecticut	PH-0197	North Carolina	Env375
Florida	E87487	North Carolina ¹	DW21704
Georgia	NELAP	North Carolina ³	41
Georgia ¹	923	North Dakota	R-140
Idaho	TN00003	Ohio—VAP	CL0069
Illinois	200008	Oklahoma	9915
Indiana	C-TN-01	Oregon	TN200002
Iowa	364	Pennsylvania	68-02979
Kansas	E-10277	Rhode Island	LA000356
Kentucky ^{1,6}	KY90010	South Carolina	84004002
Kentucky ²	16	South Dakota	n/a
Louisiana	AI30792	Tennessee ^{1,4}	2006
Louisiana	LA018	Texas	T104704245-20-18
Maine	TN00003	Texas ⁵	LAB0152
Maryland	324	Utah	TN000032021-11
Massachusetts	M-TN003	Vermont	VT2006
Michigan	9958	Virginia	110033
Minnesota	047-999-395	Washington	C847
Mississippi	TN00003	West Virginia	233
Missouri	340	Wisconsin	998093910
Montana	CERT0086	Wyoming	A2LA
A2LA – ISO 17025	1461.01	AIHA-LAP,LLC EMLAP	100789
A2LA – ISO 17025 ⁵	1461.02	DOD	1461.01
Canada	1461.01	USDA	P330-15-00234
EPA-Crypto	TN00003		

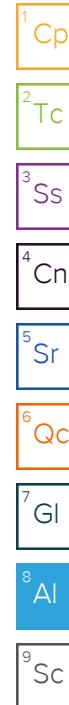
Pace Analytical Services, LLC -Dallas 400 W. Bethany Drive Suite 190 Allen, TX 75013

Arkansas	88-0647	Kansas	E10388
Florida	E871118	Texas	T104704232-23-39
Iowa	408	Oklahoma	8727
Louisiana	30686		

¹ Drinking Water ² Underground Storage Tanks ³ Aquatic Toxicity ⁴ Chemical/Microbiological ⁵ Mold ⁶ Wastewater n/a Accreditation not applicable

* Not all certifications held by the laboratory are applicable to the results reported in the attached report.

* Accreditation is only applicable to the test methods specified on each scope of accreditation held by Pace Analytical.



Company Name/Address:

CSWR - Texas Utility Operating Company

211 Douglas St.

Report to:
Justin Gonzales Callie DProject Description:
Aransas Bay UtilitiesPhone: **361-412-8924**
1-903-816-9056Collected by (print):
Jonathon HelmCollected by (signature):
John HelmImmediately
Packed on Ice N Y

Sample ID

City/State
Collected:Pres
ChkBilling Information:
Krista Oberneufemann
1650 Des Peres Rd, Ste 303
Des Peres, MO 63131Email To:
cswr@njbsoft.com; andrea.doy@clearwatersolutions.comPlease Circle:
PT MT CT ETClient Project #
MIDWATWMO-ARABAYRTXSite/Facility ID #
P.O. #Rush? (Lab MUST Be Notified)
Same Day Five Day
Next Day 5 Day (Rad Only)
Two Day 10 Day (Rad Only)
Three Day Date Results Needed
No. of Cntrs

Comp/Grab Matrix * Depth Date Time Cntrs

RD Brine Grab WW 10/10/24 10:00 12

* Matrix:
 SS - Soil AIR - Air F - Filter
 GW - Groundwater B - Bioassay
 WW - WasteWater
 DW - Drinking Water
 OT - Other _____

Remarks:

TDS - 655.3pH **7.43** Temp **79.9**

Total Residual - 0.00

Flow _____ Other _____

Samples returned via:
UPS FedEx Courier

Tracking #

Relinquished by : (Signature)

Date: **10/10/24** Time: **1238**

Received by: (Signature)

Trip Blank Received: Yes / No
HCL / MeOH
TBR

Sample Receipt Checklist
 COC Seal Present/Intact: NP Y N
 COC Signed/Accurate: Y N
 Bottles arrive intact: Y N
 Correct bottles used: Y N
 Sufficient volume sent: Y N
 If Applicable
 VOA Zero Headspace: Y N
 Preservation Correct/Checked: Y N
 RAD Screen <0.5 mR/hr: Y N

Relinquished by : (Signature)

Date: **10/10/24** Time: **1700**

Received by: (Signature)

Temp: **°C** Bottles Received:

If preservation required by Login: Date/Time

Relinquished by : (Signature)

Date: **10/11/24** Time: **0900**

Received for lab by: (Signature)

Date: **10/11/24** Time: **0900**

Hold: Condition: NCF / OK

Chain of Custody Page **1** of **2**
ALLEN, TX
 400 W. Bethany Drive Suite 190 Allen, TX 75013
 Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at:
<https://info.pacelabs.com/hubs/pas-standard-terms.pdf>
SDG # **L1987826**

Table #

Acctnum: **MIDWATWMO**Template: **T261605**Prelogin: **P1106689**

PM: 3587 - Lori A Vahrenkamp

PB:

Shipped Via: **FedEX Ground**

Remarks Sample # (lab only)

Company Name/Address: CSWR - Texas Utility Operating Company 211 Douglas St.			Billing Information: Krista Oberneufemann 1650 Des Peres Rd, Ste 303 Des Peres, MO 63131			Pres Chk	Analysis / Container / Preservative						Chain of Custody	Page 2 of 2																																																																																																																																																
Report to: Justin Gonzales Callie D.			Email To: cswr@njbsoft.com;andrea.cloy@clearwatersol.c									 PEOPLE ADVANCING SCIENCE																																																																																																																																																		
Project Description: Aransas Bay Utilities			City/State Collected:			Please Circle: PT MT CT ET																																																																																																																																																								
Phone: 361-412-8924 1-903-816-9056	Client Project #			Lab Project # MIDWATWMO-ARABAYRTX																																																																																																																																																										
Collected by (print):	Site/Facility ID #			P.O. #																																																																																																																																																										
Collected by (signature):	Rush? (Lab MUST Be Notified)			Quote #																																																																																																																																																										
Immediately Packed on Ice N <input type="checkbox"/> Y <input checked="" type="checkbox"/>	<input type="checkbox"/> Same Day <input type="checkbox"/> Next Day <input type="checkbox"/> Two Day <input type="checkbox"/> Three Day			<input type="checkbox"/> Five Day <input type="checkbox"/> 5 Day (Rad Only) <input type="checkbox"/> 10 Day (Rad Only)			Date Results Needed			No. of Cntrs																																																																																																																																																				
Sample ID	Comp/Grab	Matrix *	Depth	Date	Time										Remarks	Sample # (lab only)																																																																																																																																														
RO Brine	Grab	WW		10/10/24	1000	12	X									81																																																																																																																																														
<table border="1"> <thead> <tr> <th colspan="2">* Matrix:</th> <th colspan="12">Nitrate: Alk 125mlHDPE-NoPres</th> </tr> </thead> <tbody> <tr> <td>SS - Soil</td> <td>AIR - Air</td> <td>F - Filter</td> <td colspan="12"></td> </tr> <tr> <td>GW - Groundwater</td> <td>B - Bioassay</td> <td></td> <td colspan="12"></td> </tr> <tr> <td>WW - WasteWater</td> <td></td> <td></td> <td colspan="12"></td> </tr> <tr> <td>DW - Drinking Water</td> <td></td> <td></td> <td colspan="12"></td> </tr> <tr> <td>OT - Other</td> <td></td> <td></td> <td colspan="12"></td> </tr> </tbody> </table> <p>Remarks:</p> <p>pH _____ Temp _____</p> <p>Flow _____ Other _____</p> <p>Samples returned via: <input type="checkbox"/> UPS <input type="checkbox"/> FedEx <input type="checkbox"/> Courier _____</p> <p>Tracking # _____</p> <p>Received by: (Signature) _____</p> <p>Trip Blank Received: Yes / No HCl / MeOH TBR</p> <p>Relinquished by : (Signature) _____ Date: 10/10/24 Time: 1238 Received by: (Signature) _____ Trip Blank Received: Yes / No HCl / MeOH TBR</p> <p>Relinquished by : (Signature) _____ Date: 10/10/24 Time: 1700 Received by: (Signature) _____ Temp: °C Bottles Received: _____ If preservation required by Login: Date/Time</p> <p>Relinquished by : (Signature) _____ Date: _____ Time: _____ Received for lab by: (Signature) _____ Date: _____ Time: _____ Hold: _____ Condition: NCF / OK</p> <table border="1"> <thead> <tr> <th colspan="16">Sample Receipt Checklist</th> </tr> </thead> <tbody> <tr> <td>COC Seal Present/Intact:</td> <td><input type="checkbox"/> NP</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> <tr> <td>COC Signed/Accurate:</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> <tr> <td>Bottles arrive intact:</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> <tr> <td>Correct bottles used:</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> <tr> <td>Sufficient volume sent:</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> <tr> <td>If Applicable</td> <td colspan="12"></td> </tr> <tr> <td>VOA Zero Headspace:</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> <tr> <td>Preservation Correct/Checked:</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> <tr> <td>RAD Screen <0.5 mR/hr:</td> <td><input type="checkbox"/> Y</td> <td><input type="checkbox"/> N</td> </tr> </tbody> </table>																* Matrix:		Nitrate: Alk 125mlHDPE-NoPres												SS - Soil	AIR - Air	F - Filter													GW - Groundwater	B - Bioassay														WW - WasteWater															DW - Drinking Water															OT - Other															Sample Receipt Checklist																COC Seal Present/Intact:	<input type="checkbox"/> NP	<input type="checkbox"/> Y	<input type="checkbox"/> N	COC Signed/Accurate:	<input type="checkbox"/> Y	<input type="checkbox"/> N	Bottles arrive intact:	<input type="checkbox"/> Y	<input type="checkbox"/> N	Correct bottles used:	<input type="checkbox"/> Y	<input type="checkbox"/> N	Sufficient volume sent:	<input type="checkbox"/> Y	<input type="checkbox"/> N	If Applicable													VOA Zero Headspace:	<input type="checkbox"/> Y	<input type="checkbox"/> N	Preservation Correct/Checked:	<input type="checkbox"/> Y	<input type="checkbox"/> N	RAD Screen <0.5 mR/hr:	<input type="checkbox"/> Y	<input type="checkbox"/> N
* Matrix:		Nitrate: Alk 125mlHDPE-NoPres																																																																																																																																																												
SS - Soil	AIR - Air	F - Filter																																																																																																																																																												
GW - Groundwater	B - Bioassay																																																																																																																																																													
WW - WasteWater																																																																																																																																																														
DW - Drinking Water																																																																																																																																																														
OT - Other																																																																																																																																																														
Sample Receipt Checklist																																																																																																																																																														
COC Seal Present/Intact:	<input type="checkbox"/> NP	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																											
COC Signed/Accurate:	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																												
Bottles arrive intact:	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																												
Correct bottles used:	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																												
Sufficient volume sent:	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																												
If Applicable																																																																																																																																																														
VOA Zero Headspace:	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																												
Preservation Correct/Checked:	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																												
RAD Screen <0.5 mR/hr:	<input type="checkbox"/> Y	<input type="checkbox"/> N																																																																																																																																																												

ORIGIN ID: VCTA (361) 446-0565
PAGE 1606 E BRAZOS ST.
SUITE 0
VICTORIA TX 77901
UNITED STATES US

SHIP DATE: 20SP24
ACTWGT: 50.00 LB
CRD: 0917226 CAFE3854

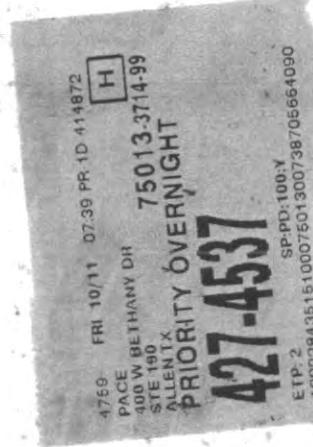
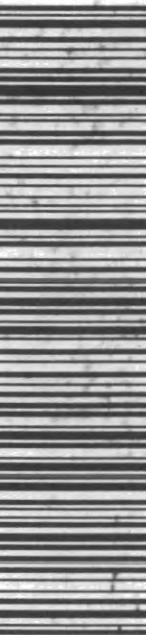
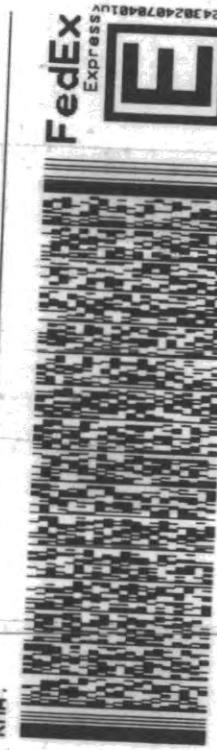
TO SAMPLE RECEIVING

PACE
400 W. BETHANY DR.
SUITE 190
ALLEN TX 75013
(972) 727-1123

REF:

DEPT:

RMA:





DC#_Title: ENV-FRM-ALLE-0017 v15_Sample Condition Upon Receipt

Effective Date: 12/18/2023

ANALYTICAL SERVICES

Sample Condition Upon Receipt

 Dallas Ft Worth Corpus Christi AustinClient Name: CswR - Texas Utility Project Work order (place label):Courier: FedEX UPS USPS Client LSO PACI Other: _____Tracking #: 7387 0506 4090Custody Seal on Cooler/Box: Yes No Received on ice: Wet Blue No ice Receiving Lab 1 Thermometer Used: 1218

Receiving Lab 2 Thermometer Used: _____

Cooler Temp °C: 2.3 (Recorded) 0.0 (Correction Factor) 2.3 (Actual)
Cooler Temp °C: 2.3 (Recorded) 0.0 (Correction Factor) 2.3 (Actual)

Chain of Custody relinquished

Sampler name & signature on COC

Short HT analyses (<72 hrs)

Temperature should be above freezing to 6°C unless collected same day as receipt in which evidence of cooling is acceptable.

Triage Person: <u>MP</u>	Date: <u>10/11</u>	Sufficient Volume received	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Correct Container used		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Container Intact		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Sample pH Acceptable	<u>6400007</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
pH Strips:	<u>14806</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Residual Chlorine Present	<u>14806</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Cl Strips:	<u>14806</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Sulfide Present	<u>14806</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Lead Acetate Strips:	<u>14806</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Are soil samples (volatiles, TPH) received in 5035A Kits (not applicable to TCLP VOA or PST Program TPH)		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Unpreserved 5035A soil frozen within 48 hrs		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Headspace in VOA (>6mm)		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Project sampled in USDA Regulated Area outside of Texas		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
State Sampled:		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Non-Conformance(s):		<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>

Login Person: OC Date: 10/11

Labeling Person (if different than log-in): _____

Date: _____



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

October 23, 2024

Tim Gramling
Pace Analytical Allen
400 West Bethany Drive
Suite 190
Allen, TX 75013

RE: Project: L1787826 WG2382639
Pace Project No.: 40285883

Dear Tim Gramling:

Enclosed are the analytical results for sample(s) received by the laboratory on October 16, 2024. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Green Bay

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Cindy Varga
cindy.varga@pacelabs.com
(920)469-2436
Project Manager

Enclosures

cc: Client Services, Pace Analytical Allen



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



CERTIFICATIONS

Project: L1787826 WG2382639
Pace Project No.: 40285883

Pace Analytical Services Green Bay

1241 Bellevue Street, Green Bay, WI 54302
Florida/NELAP Certification #: E87948
Illinois Certification #: 200050
Kentucky UST Certification #: 82
Louisiana Certification #: 04168
Minnesota Certification #: 055-999-334
New York Certification #: 12064
North Dakota Certification #: R-150

South Carolina Certification #: 83006001
Texas Certification #: T104704529-21-8
Virginia VELAP Certification ID: 11873
Wisconsin Certification #: 405132750
Wisconsin DATCP Certification #: 105-444
USDA Soil Permit #: P330-21-00008
Federal Fish & Wildlife Permit #: 51774A

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE SUMMARY

Project: L1787826 WG2382639

Pace Project No.: 40285883

Lab ID	Sample ID	Matrix	Date Collected	Date Received
40285883001	RO BRINE	Water	10/10/24 10:00	10/16/24 09:50

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE ANALYTE COUNT

Project: L1787826 WG2382639

Pace Project No.: 40285883

Lab ID	Sample ID	Method	Analysts	Analytics Reported
40285883001	RO BRINE	EPA 1631E	MRP	1

PASI-G = Pace Analytical Services - Green Bay

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

ANALYTICAL RESULTS

Project: L1787826 WG2382639

Pace Project No.: 40285883

Sample: RO BRINE	Lab ID: 40285883001	Collected: 10/10/24 10:00	Received: 10/16/24 09:50	Matrix: Water				
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level	Analytical Method: EPA 1631E Preparation Method: EPA 1631E Pace Analytical Services - Green Bay							
Mercury	ND	ng/L	0.50	1	10/18/24 12:20	10/22/24 13:31	7439-97-6	1q

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALITY CONTROL DATA

Project: L1787826 WG2382639

Pace Project No.: 40285883

QC Batch:	487667	Analysis Method:	EPA 1631E
QC Batch Method:	EPA 1631E	Analysis Description:	1631E Mercury
		Laboratory:	Pace Analytical Services - Green Bay
Associated Lab Samples:	40285883001		

METHOD BLANK: 2792677 Matrix: Water

Associated Lab Samples: 40285883001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/22/24 11:56	

METHOD BLANK: 2792678 Matrix: Water

Associated Lab Samples: 40285883001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/22/24 13:01	

METHOD BLANK: 2792679 Matrix: Water

Associated Lab Samples: 40285883001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/22/24 14:01	

METHOD BLANK: 2792680 Matrix: Water

Associated Lab Samples: 40285883001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.53	10/22/24 12:01	

LABORATORY CONTROL SAMPLE: 2792681

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	5.24	105	79-121	

LABORATORY CONTROL SAMPLE: 2792682

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	4.10	82	79-121	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALITY CONTROL DATA

Project: L1787826 WG2382639

Pace Project No.: 40285883

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:			2794878		2794879							
Parameter	Units	Result	MS	MSD	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
			Spike Conc.	Spike Conc.								
Mercury	ng/L	1.62	2	2	3.39	3.55	89	96	75-125	5	24	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:			2794880		2794881							
Parameter	Units	Result	MS	MSD	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
			Spike Conc.	Spike Conc.								
Mercury	ng/L	47.6	105	105	145	140	93	88	75-125	3	24	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

QUALIFIERS

Project: L1787826 WG2382639

Pace Project No.: 40285883

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Reported results are not rounded until the final step prior to reporting. Therefore, calculated parameters that are typically reported as "Total" may vary slightly from the sum of the reported component parameters.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

ANALYTE QUALIFIERS

1q Sample Received With Headspace

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: L1787826 WG2382639

Pace Project No.: 40285883

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
40285883001	RO BRINE	EPA 1631E	487667	EPA 1631E	488017

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

40285883

CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Section A**Required Client Information:**

Company: Pace Analytical
Address: 400 W. Bethany Drive Suite 190
Allen, TX 75013
Email: Dallas_Sub@pacelabs.com
Phone: (972) 727-1123 | Fax: Requested Due Date: 18-Oct

Section B**Required Project Information:**

Report To: Pace Analytical Subout Team
Copy To:
Purchase Order #: L1787826
Project Name: Aransas Bay Utilities
Project #: Project #:

Section C**Invoice Information:**

Attention: Callie Derzapf
Company Name:
Address:
Pace Quote:
Pace Project Manager: Cindy Varga
Pace Profile #: 38076

Page : 1 Of 1

Regulatory Agency

State / Location

MO

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 /, -) Sample Ids must be unique	MATRIX Drinking Water Water Waste Water Product Soil/Solid Oil Wipe Air Other Tissue	CODE DW WT WW P SL OL WP AR OT TS	MATRIX CODE (see valid codes to left) G=GRAB C=COMP	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives						Analyses Test	Requested Analysis Filtered (Y/N)				Residual Chlorine (Y/N)		
					START		END				H2SO4	HNO3	HCl	NaOH	Na2SO3	Methanol	Other	Y/N	Low Level Hg					
					DATE	TIME	DATE	TIME			Unpreserved							X	/					
1	RO BRINE		WT				10-Oct	10:00		1													001	
2																								
3																								
4																								
5																								
6																								
7																								
8																								
9																								
10																								
11																								
12																								

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS
Pace Analytical Batch: WG2382639	John M. Phalen Famos /Pace FedEx	10/15/24	10:00	FedEx	10/15/24	10:00	
Pace Analytical SDGs: L1787826	FedEx	10/16/24	09:50	Kristen Staub - Pace	10/16/24	09:50	040 N N Y
Location: Green Bay, WI 54302							

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER:

SIGNATURE of SAMPLER:

DATE Signed:

TEMP in C	Received on Ice (Y/N)
Custody Sealed (Y/N)	
Cooler Sealed (Y/N)	
Samples intact (Y/N)	
Page 10 of 12	

Effective Date: 8/16/2022

Client Name: Pace TX

All containers needing preservation have been checked and noted below:

Lab Lot# of pH paper:

Sample Preservation Receipt Form

Project # 40285883 Yes No N/A

Lab Std #ID of preservation (if pH adjusted):

Initial when completed:

Date/
Time:

Pace Lab #	AG1U	BG1U	AG1H	AG4S	AG5U	AG2S	BG3U	BP1U	BP3U	BP3B	BP3N	BP3S	BP2Z	VG9C	DG9T	VG9U	VG9H	VG9M	VG9D	JGFU	JG9U	WGFU	WPFU	SP5T	ZPLC	GN 1	GN 2	VOA Vials (>6mm)*	H2SO4 pH ≤2	NaOH+Zn Act pH ≥8	NaOH pH ≥12	HNO3 pH ≤2	pH after adjusted	Volume (mL)
001																													2.5 / 5					
002																													2.5 / 5					
003																													2.5 / 5					
004																													2.5 / 5					
005																													2.5 / 5					
006																													2.5 / 5					
007																													2.5 / 5					
008																													2.5 / 5					
009																													2.5 / 5					
010																													2.5 / 5					
011																													2.5 / 5					
012																													2.5 / 5					
013																													2.5 / 5					
014																													2.5 / 5					
015																													2.5 / 5					
016																													2.5 / 5					
017																													2.5 / 5					
018																													2.5 / 5					
019																													2.5 / 5					
020																													2.5 / 5					

Exceptions to preservation check: VOA, Coliform, TOC, TOX, TOH, O&G, WI DRO, Phenolics, Other _____

Headspace in VOA Vials (>6mm) : Yes No N/A *If yes look in headspace column

AG1U	1 liter amber glass	BP1U	1 liter plastic unpres	VG9C	40 mL clear ascorbic w/ HCl	JGFU	4 oz amber jar unpres
BG1U	1 liter clear glass	BP3U	250 mL plastic unpres	DG9T	40 mL amber Na Thio	JG9U	9 oz amber jar unpres
AG1H	1 liter amber glass HCL	BP3B	250 mL plastic NaOH	VG9U	40 mL clear vial unpres	WGFU	4 oz clear jar unpres
AG4S	125 mL amber glass H2SO4	BP3N	250 mL plastic HNO3	VG9H	40 mL clear vial HCL	WPFU	4 oz plastic jar unpres
AG5U	100 mL amber glass unpres	BP3S	250 mL plastic H2SO4	VG9M	40 mL clear vial MeOH	SP5T	120 mL plastic Na Thiosulfate
AG2S	500 mL amber glass H2SO4	BP2Z	500 mL plastic NaOH + Zn	VG9D	40 mL clear vial DI	ZPLC	ziploc bag
BG3U	250 mL clear glass unpres					GN 1	
						GN 2	

Page 1 of 2

Sample Condition Upon Receipt Form (SCUR)

Project #:

Client Name: Pace TXCourier: CS Logistics Fed Ex Speedee UPS Waltco Client Pace Other: _____Tracking #: 4171 1262 3880Custody Seal on Cooler/Box Present: yes no Seals intact: yes noCustody Seal on Samples Present: yes no Seals intact: yes noPacking Material: Bubble Wrap Bubble Bags None OtherThermometer Used SR - 123 Type of Ice: Wet Blue Dry None Meltwater OnlyCooler Temperature Uncorr: 24.0 /Corr: 24.0Temp Blank Present: yes noBiological Tissue is Frozen: yes no

Temp should be above freezing to 6°C.

Biota Samples may be received at ≤ 0°C if shipped on Dry Ice.

Person examining contents:

Date: 10/16/24 Initials: KKSLabeled By Initials: MW

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name & Signature on COC:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4. <u>No name/signature KKS 10/16/24</u>
Samples Arrived within Hold Time: - DI VOA Samples frozen upon receipt	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	5. Date/Time:
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7.
Sufficient Volume: For Analysis: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No MS/MSD: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A		8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	9.
Correct Type: <u>Pace Green Bay</u> Pace IR, Non-Pace		
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC: -Includes date/time/ID/Analysis Matrix: <u>WATER</u>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

Client Notification/ Resolution:

If checked, see attached form for additional comments

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

PM Review is documented electronically in LIMs. By releasing the project, the PM acknowledges they have reviewed the sample log.

Page 2 of 2



ANALYTICAL REPORT

October 28, 2024

¹Cp

²Tc

³Ss

⁴Cn

⁵Sr

⁶Qc

⁷GI

⁸AI

⁹Sc

CSWR - Texas Utility Operating Company

Sample Delivery Group: L1789286
Samples Received: 10/16/2024
Project Number:
Description: Aransas Bay Utilities

Report To: Callie Derzapf
211 Douglas St.
Richmond, TX 77469

Entire Report Reviewed By:

Lori A Vahrenkamp
Project Manager

Results relate only to the items tested or calibrated and are reported as rounded values. This test report shall not be reproduced, except in full, without written approval of the laboratory. Where applicable, sampling conducted by Pace Analytical National is performed per guidance provided in laboratory standard operating procedures ENV-SOP-MTJL-0067 and ENV-SOP-MTJL-0068. Where sampling conducted by the customer, results relate to the accuracy of the information provided, and as the samples are received.

Pace Analytical National

12065 Lebanon Rd Mount Juliet, TN 37122 615-758-5858 800-767-5859 mydata.pacelabs.com

TABLE OF CONTENTS

Cp: Cover Page	1	
Tc: Table of Contents	2	
Ss: Sample Summary	3	
Cn: Case Narrative	4	
Sr: Sample Results	5	
RO BRINE L1789286-01	5	
Qc: Quality Control Summary	7	
Gravimetric Analysis by Method 2540C	7	
Gravimetric Analysis by Method 2540D	8	
Wet Chemistry by Method 1664B	9	
Wet Chemistry by Method 2320B	10	
Wet Chemistry by Method 300.0	11	
Wet Chemistry by Method 3500Cr-B	13	
Wet Chemistry by Method 351.2	14	
Wet Chemistry by Method 4500CN-E	15	
Wet Chemistry by Method 4500P-E	16	
Wet Chemistry by Method 5210 B-2016	17	
Wet Chemistry by Method 5220D	19	
Wet Chemistry by Method 5310C	20	
Wet Chemistry by Method SM4500NH3H	21	
Metals (ICP) by Method 200.7	22	
Gl: Glossary of Terms	24	
Al: Accreditations & Locations	25	
Sc: Sample Chain of Custody	26	

SAMPLE SUMMARY

RO BRINE L1789286-01 WW

			Collected by	Collected date/time	Received date/time	
Method	Batch	Dilution	Preparation date/time	Analysis date/time	Analyst	Location
Calculated Results	WG2385521	1	10/26/24 13:59	10/26/24 13:59	JTM	Mt. Juliet, TN
Gravimetric Analysis by Method 2540C	WG2384442	1	10/17/24 17:21	10/17/24 18:35	QQT	Allen, TX
Gravimetric Analysis by Method 2540D	WG2384740	1	10/18/24 08:18	10/18/24 10:39	QQT	Allen, TX
Wet Chemistry by Method 1664B	WG2387573	1	10/23/24 08:21	10/23/24 13:01	TJL	Mt. Juliet, TN
Wet Chemistry by Method 2320B	WG2386264	1	10/21/24 09:22	10/21/24 09:22	JBS	Allen, TX
Wet Chemistry by Method 300.0	WG2383111	1	10/16/24 12:57	10/16/24 12:57	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2383402	1	10/16/24 16:41	10/16/24 16:41	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2383402	1	10/16/24 16:53	10/16/24 16:53	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2383402	1	10/16/24 17:05	10/16/24 17:05	SMC	Allen, TX
Wet Chemistry by Method 3500Cr-B	WG2383960	1	10/17/24 16:19	10/17/24 16:19	KCM	Allen, TX
Wet Chemistry by Method 351.2	WG2386892	1	10/22/24 10:48	10/22/24 20:55	EIG	Allen, TX
Wet Chemistry by Method 4500CN-E	WG2384784	1	10/22/24 09:30	10/22/24 17:17	KCM	Allen, TX
Wet Chemistry by Method 4500CN-G	WG2388096	1	10/23/24 16:37	10/23/24 16:37	KCM	Allen, TX
Wet Chemistry by Method 4500P-E	WG2386234	5	10/21/24 16:28	10/21/24 16:28	SMC	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2383141	1	10/16/24 14:42	10/21/24 09:46	SKW	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2383143	1	10/16/24 15:59	10/21/24 11:11	SKW	Allen, TX
Wet Chemistry by Method 5220D	WG2386267	1	10/21/24 12:32	10/21/24 13:43	JBS	Allen, TX
Wet Chemistry by Method 5310C	WG2386939	1	10/22/24 21:22	10/22/24 21:22	EIG	Allen, TX
Wet Chemistry by Method SM4500NH3H	WG2384199	1	10/17/24 17:52	10/17/24 17:52	EIG	Allen, TX
Metals (ICP) by Method 200.7	WG2385521	1	10/25/24 17:50	10/26/24 13:59	JTM	Mt. Juliet, TN
Subcontracted Analyses	WG2383530	1	10/24/24 00:00	10/24/24 00:00	JWW	Green Bay, WI 54302

1 Cp

2 Tc

3 Ss

4 Cn

5 Sr

6 Qc

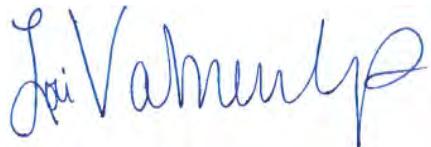
7 Gl

8 Al

9 Sc

CASE NARRATIVE

All sample aliquots were received at the correct temperature, in the proper containers, with the appropriate preservatives, and within method specified holding times, unless qualified or notated within the report. Where applicable, all MDL (LOD) and RDL (LOQ) values reported for environmental samples have been corrected for the dilution factor used in the analysis. All Method and Batch Quality Control are within established criteria except where addressed in this case narrative, a non-conformance form or properly qualified within the sample results. By my digital signature below, I affirm to the best of my knowledge, all problems/anomalies observed by the laboratory as having the potential to affect the quality of the data have been identified by the laboratory, and no information or data have been knowingly withheld that would affect the quality of the data.



Lori A Vahrenkamp
Project Manager

Project Narrative

L1789286 -01 contains subout data that is included after the chain of custody.

- ¹ Cp
- ² Tc
- ³ Ss
- ⁴ Cn
- ⁵ Sr
- ⁶ Qc
- ⁷ GI
- ⁸ AI
- ⁹ SC

Calculated Results

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Trivalent	<0.00300		0.00300	1	10/26/2024 13:59	WG2385521

¹ Cp² Tc³ Ss⁴ Cn⁵ Sr⁶ Qc⁷ Gl⁸ Al⁹ Sc

Gravimetric Analysis by Method 2540C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Total Dissolved Solids	4110		250	1	10/17/2024 18:35	WG2384442

Gravimetric Analysis by Method 2540D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Suspended Solids	3.20		2.50	1	10/18/2024 10:39	WG2384740

Wet Chemistry by Method 1664B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Oil & Grease (Hexane Extr)	<5.21		5.21	1	10/23/2024 13:01	WG2387573

Wet Chemistry by Method 2320B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Alkalinity	863		20.0	1	10/21/2024 09:22	WG2386264
Alkalinity,Bicarbonate	863		20.0	1	10/21/2024 09:22	WG2386264
Alkalinity,Carbonate	<20.0		20.0	1	10/21/2024 09:22	WG2386264
Alkalinity,Hydroxide	<20.0		20.0	1	10/21/2024 09:22	WG2386264
Phenolphthalein Alkalinity	<20.0		20.0	1	10/21/2024 09:22	WG2386264

Wet Chemistry by Method 300.0

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chloride	2230		0.800	1	10/16/2024 17:05	WG2383402
Fluoride	2.24		0.500	1	10/16/2024 16:41	WG2383402
Nitrate	0.553		0.500	1	10/16/2024 12:57	WG2383111
Sulfate	533		0.700	1	10/16/2024 16:53	WG2383402

Wet Chemistry by Method 3500Cr-B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Hexavalent	<0.00300		0.00300	1	10/17/2024 16:19	WG2383960

Wet Chemistry by Method 351.2

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Kjeldahl Nitrogen, TKN	<0.250	J6	0.250	1	10/22/2024 20:55	WG2386892

Wet Chemistry by Method 4500CN-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide	<0.0100		0.0100	1	10/22/2024 17:17	WG2384784

Wet Chemistry by Method 4500CN-G

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide,amenable	<0.0100	J	0.0100	1	10/23/2024 16:37	WG2388096

¹ Cp

Wet Chemistry by Method 4500P-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Phosphorus,Total	0.780		0.250	5	10/21/2024 16:28	WG2386234

² Tc

Wet Chemistry by Method 5210 B-2016

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
BOD	<1.00		1.00	1	10/21/2024 09:46	WG2383141
CBOD	<1.00		1.00	1	10/21/2024 11:11	WG2383143

³ Ss⁴ Cn

Wet Chemistry by Method 5220D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
COD	102		35.0	1	10/21/2024 13:43	WG2386267

⁵ Sr

Wet Chemistry by Method 5310C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
TOC (Total Organic Carbon)	2.58		0.700	1	10/22/2024 21:22	WG2386939

⁶ Qc

Wet Chemistry by Method SM4500NH3H

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Ammonia Nitrogen	<0.100		0.100	1	10/17/2024 17:52	WG2384199

⁷ Gl

Metals (ICP) by Method 200.7

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Aluminum	<0.200		0.200	1	10/26/2024 13:59	WG2385521
Antimony	<0.0100		0.0100	1	10/26/2024 13:59	WG2385521
Arsenic	<0.0100		0.0100	1	10/26/2024 13:59	WG2385521
Barium	0.104		0.00500	1	10/26/2024 13:59	WG2385521
Beryllium	<0.00200		0.00200	1	10/26/2024 13:59	WG2385521
Cadmium	<0.00200		0.00200	1	10/26/2024 13:59	WG2385521
Chromium	<0.0100		0.0100	1	10/26/2024 13:59	WG2385521
Copper	<0.0100		0.0100	1	10/26/2024 13:59	WG2385521
Lead	<0.00500		0.00500	1	10/26/2024 13:59	WG2385521
Magnesium	73.9		1.00	1	10/26/2024 13:59	WG2385521
Nickel	<0.0100		0.0100	1	10/26/2024 13:59	WG2385521
Selenium	<0.0100		0.0100	1	10/26/2024 13:59	WG2385521
Silver	<0.00500		0.00500	1	10/26/2024 13:59	WG2385521
Thallium	<0.0100		0.0100	1	10/26/2024 13:59	WG2385521
Zinc	<0.0500		0.0500	1	10/26/2024 13:59	WG2385521

⁸ Al⁹ Sc

WG238442

Gravimetric Analysis by Method 2540C

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4134965-1 10/17/24 18:35

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Total Dissolved Solids	<25.0		25.0	25.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1788671-03 Original Sample (OS) • Duplicate (DUP)

(OS) L1788671-03 10/17/24 18:35 • (DUP) R4134965-3 10/17/24 18:35

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Total Dissolved Solids	510	543	1	6.27		10

L1788671-04 Original Sample (OS) • Duplicate (DUP)

(OS) L1788671-04 10/17/24 18:35 • (DUP) R4134965-4 10/17/24 18:35

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Total Dissolved Solids	896	567	1	45.0	<u>J3</u>	10

Laboratory Control Sample (LCS)

(LCS) R4134965-2 10/17/24 18:35

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Total Dissolved Solids	2260	2530	112	85.0-115	

WG2384740

Gravimetric Analysis by Method 2540D

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4135210-1 10/18/24 10:39

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Suspended Solids	<2.50		2.50	2.50

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1789755-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1789755-01 10/18/24 10:39 • (DUP) R4135210-3 10/18/24 10:39

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Suspended Solids	810	850	1	4.82		10

L1789768-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1789768-01 10/18/24 10:39 • (DUP) R4135210-4 10/18/24 10:39

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Suspended Solids	760	680	1	11.1	<u>P1</u>	10

Laboratory Control Sample (LCS)

(LCS) R4135210-2 10/18/24 10:39

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Suspended Solids	854	851	99.6	85.0-115	

WG2387573

Wet Chemistry by Method 1664B

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4136551-1 10/23/24 13:01

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Oil & Grease (Hexane Extr)	<1.40		1.40	5.00

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS) • Laboratory Control Sample Duplicate (LCSD)

(LCS) R4136551-2 10/23/24 13:01 • (LCSD) R4136551-3 10/23/24 13:01

Analyte	Spike Amount mg/l	LCS Result mg/l	LCSD Result mg/l	LCS Rec. %	LCSD Rec. %	Rec. Limits %	<u>LCS Qualifier</u>	<u>LCSD Qualifier</u>	RPD %	RPD Limits %
Oil & Grease (Hexane Extr)	40.0	33.7	34.2	84.3	85.5	78.0-114			1.47	20

L1789158-01 Original Sample (OS) • Matrix Spike (MS)

(OS) L1789158-01 10/23/24 13:01 • (MS) R4136551-4 10/23/24 13:01

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>
Oil & Grease (Hexane Extr)	40.0	9.20	32.2	57.5	1	78.0-114	<u>J6</u>

⁹Sc

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

L1789286

DATE/TIME:

10/28/24 11:06

PAGE:

9 of 41

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4135421-1 10/21/24 09:22

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Alkalinity	<20.0		20.0	20.0
Alkalinity,Bicarbonate	<20.0		20.0	20.0
Alkalinity,Carbonate	<20.0		20.0	20.0
Alkalinity,Hydroxide	<20.0		20.0	20.0
Phenolphthalein Alkalinity	<20.0		20.0	20.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1789288-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1789288-01 10/21/24 09:22 • (DUP) R4135421-3 10/21/24 09:22

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD	<u>DUP Qualifier</u>	DUP RPD Limits
Alkalinity	203	200	1	1.24		20

Laboratory Control Sample (LCS)

(LCS) R4135421-2 10/21/24 09:22

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Alkalinity	250	240	96.0	90.0-110	

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4133934-1 10/16/24 11:42

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Nitrate	<0.379		0.379	0.500

¹Cp

Laboratory Control Sample (LCS)

(LCS) R4133934-2 10/16/24 11:56

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Nitrate	5.00	4.98	99.6	90.0-110	

²Tc³Ss⁴Cn⁵Sr⁶Qc

L1788929-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1788929-01 10/16/24 12:11 • (MS) R4133934-3 10/16/24 12:28 • (MSD) R4133934-4 10/16/24 12:43

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Nitrate	5.00	4.73	9.84	9.68	102	99.0	1	90.0-110			1.64	20

⁷Gl⁸Al⁹Sc

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4133926-1 10/16/24 16:05

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chloride	<0.325		0.325	0.800
Fluoride	<0.0947		0.0947	0.500
Sulfate	<0.211		0.211	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4133926-2 10/16/24 16:17

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chloride	5.00	5.20	104	90.0-110	
Fluoride	5.00	5.36	107	90.0-110	
Sulfate	5.00	5.35	107	90.0-110	

L1789288-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789288-01 10/16/24 17:16 • (MS) R4133926-3 10/16/24 18:40 • (MSD) R4133926-4 10/16/24 18:51

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Fluoride	5.00	0.654	5.82	5.77	103	102	1	90.0-110			0.893	20

L1789288-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789288-01 10/16/24 17:28 • (MS) R4133926-5 10/16/24 19:03 • (MSD) R4133926-6 10/16/24 19:15

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Chloride	50.0	92.1	149	149	114	115	1	90.0-110	J5	J5	0.138	20
Sulfate	50.0	55.1	109	109	108	108	1	90.0-110			0.0229	20

Method Blank (MB)

(MB) R4134190-1 10/17/24 16:19

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chromium,Hexavalent	<0.00200		0.00200	0.00300

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4134190-2 10/17/24 16:19

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chromium,Hexavalent	0.200	0.192	95.8	85.0-115	

L1787303-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787303-01 10/17/24 16:19 • (MS) R4134190-3 10/17/24 16:19 • (MSD) R4134190-4 10/17/24 16:19

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Chromium,Hexavalent	0.200	<0.00300	0.187	0.188	93.7	94.1	1	85.0-115			0.462	20

L1787826-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1787826-01 10/17/24 16:19 • (MS) R4134190-5 10/17/24 16:19 • (MSD) R4134190-6 10/17/24 16:19

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Chromium,Hexavalent	0.200	<0.00300	0.166	0.169	83.2	84.5	1	85.0-115	J6	J6	1.55	20

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4136539-1 10/22/24 20:51

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Kjeldahl Nitrogen, TKN	<0.140		0.140	0.250

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4136539-3 10/22/24 21:07

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Kjeldahl Nitrogen, TKN	4.00	3.92	98.0	90.0-110	

L1789286-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789286-01 10/22/24 20:55 • (MS) R4136539-4 10/22/24 21:19 • (MSD) R4136539-5 10/22/24 21:21

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Kjeldahl Nitrogen, TKN	4.00	<0.250	3.68	3.57	92.0	89.3	1	90.0-110	J6		3.03	20

L1789310-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789310-01 10/22/24 20:58 • (MS) R4136539-6 10/22/24 21:22 • (MSD) R4136539-7 10/22/24 21:23

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Kjeldahl Nitrogen, TKN	4.00	<0.250	3.94	4.01	98.5	100	1	90.0-110			1.76	20

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4136604-1 10/22/24 17:17

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Cyanide	0.00465		0.00430	0.0100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4136604-2 10/22/24 17:17

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Cyanide	0.100	0.0993	99.3	85.0-115	

L1790449-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1790449-02 10/22/24 17:17 • (MS) R4136604-3 10/22/24 17:17 • (MSD) R4136604-4 10/22/24 17:17

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Cyanide	0.100	<0.0100	0.0898	0.0977	89.8	97.7	1	85.0-115			8.33	20

L1790449-06 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1790449-06 10/22/24 17:17 • (MS) R4136604-5 10/22/24 17:17 • (MSD) R4136604-6 10/22/24 17:17

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Cyanide	0.100	<0.0100	0.0929	0.0875	84.9	79.4	1	85.0-115	J6	J6	6.02	20

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4135492-1 10/21/24 16:28

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Phosphorus,Total	<0.0152		0.0152	0.0500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4135492-2 10/21/24 16:28

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Phosphorus,Total	0.500	0.508	102	80.0-120	

L1789270-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789270-02 10/21/24 16:28 • (MS) R4135492-3 10/21/24 16:29 • (MSD) R4135492-4 10/21/24 16:29

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Phosphorus,Total	0.500	0.0681	0.580	0.582	102	103	1	80.0-120			0.399	20

L1790304-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1790304-01 10/21/24 16:29 • (MS) R4135492-5 10/21/24 16:29 • (MSD) R4135492-6 10/21/24 16:29

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Phosphorus,Total	0.500	5.22	5.55	5.67	67.1	90.3	10	80.0-120	V		2.06	20

WG2383141

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4135275-1 10/21/24 08:56

Analyst	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
BOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1789040-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1789040-01 10/21/24 09:19 • (DUP) R4135275-3 10/21/24 09:59

Analyst	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
BOD	4.73	4.25	1	10.7		20

Laboratory Control Sample (LCS)

(LCS) R4135275-2 10/21/24 09:01

Analyst	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
BOD	198	197	99.7	85-115	

WG2383143

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4135322-1 10/21/24 10:25

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
CBOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1788932-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1788932-01 10/21/24 10:38 • (DUP) R4135322-3 10/21/24 11:28

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
CBOD	1.12	1.33	1	17.1		20

Laboratory Control Sample (LCS)

(LCS) R4135322-2 10/21/24 10:30

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
CBOD	198	196	99.1	85-115	

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4135396-1 10/21/24 13:43

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
COD	<16.1		16.1	35.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4135396-2 10/21/24 13:43

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
COD	500	525	105	80.0-120	

L1789313-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789313-01 10/21/24 13:43 • (MS) R4135396-3 10/21/24 13:43 • (MSD) R4135396-4 10/21/24 13:43

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
COD	500	57.8	527	537	93.8	95.9	1	80.0-120			1.97	20

L1790264-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1790264-01 10/21/24 13:43 • (MS) R4135396-5 10/21/24 13:43 • (MSD) R4135396-6 10/21/24 13:43

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
COD	500	<35.0	508	520	97.5	100	1	80.0-120			2.44	20

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4136547-1 10/22/24 18:12

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
TOC (Total Organic Carbon)	<0.270		0.270	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4136547-2 10/22/24 18:32

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
TOC (Total Organic Carbon)	10.0	10.3	103	90.0-110	

L1789289-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789289-01 10/22/24 18:55 • (MS) R4136547-3 10/22/24 19:42 • (MSD) R4136547-4 10/22/24 20:05

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
TOC (Total Organic Carbon)	10.0	5.89	15.9	15.7	100	97.9	1	80.0-120			1.46	20

L1789324-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789324-01 10/22/24 23:33 • (MS) R4136547-5 10/22/24 20:28 • (MSD) R4136547-6 10/22/24 20:52

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
TOC (Total Organic Carbon)	10.0	4.65	14.6	14.7	99.8	100	1	80.0-120			0.273	20

WG2384199

Wet Chemistry by Method SM4500NH3H

QUALITY CONTROL SUMMARY

L1789286-01

Method Blank (MB)

(MB) R4135267-1 10/17/24 17:02

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Ammonia Nitrogen	<0.0280		0.0280	0.100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4135267-2 10/17/24 17:04

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Ammonia Nitrogen	5.00	5.18	104	80.0-120	

L1788825-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1788825-01 10/17/24 17:34 • (MS) R4135267-3 10/17/24 17:06 • (MSD) R4135267-4 10/17/24 17:08

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits
Ammonia Nitrogen	5.00	9.71	14.6	14.6	97.8	97.8	1	80.0-120	E	0.000	20

L1789257-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789257-02 10/17/24 17:48 • (MS) R4135267-5 10/17/24 17:09 • (MSD) R4135267-6 10/17/24 17:11

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits
Ammonia Nitrogen	5.00	<0.100	4.92	4.94	97.1	97.5	1	80.0-120		0.406	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

L1789286

DATE/TIME:

10/28/24 11:06

PAGE:

21 of 41

QUALITY CONTROL SUMMARY

[L1789286-01](#)

Method Blank (MB)

(MB) R4138094-1 10/26/24 13:18

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l	¹ Cp
Aluminum	<0.0592		0.0592	0.200	² Tc
Antimony	<0.00398		0.00398	0.0100	³ Ss
Arsenic	<0.00645		0.00645	0.0100	⁴ Cn
Barium	<0.000795		0.000795	0.00500	⁵ Sr
Beryllium	<0.000401		0.000401	0.00200	⁶ Qc
Cadmium	<0.000552		0.000552	0.00200	⁷ Gl
Chromium	<0.00163		0.00163	0.0100	⁸ Al
Copper	<0.00226		0.00226	0.0100	⁹ Sc
Lead	<0.00227		0.00227	0.00500	
Magnesium	<0.115		0.115	1.00	
Nickel	0.00245	J	0.00182	0.0100	
Selenium	<0.00616		0.00616	0.0100	
Silver	<0.00131		0.00131	0.00500	
Thallium	<0.00460		0.00460	0.0100	
Zinc	<0.00578		0.00578	0.0500	

Laboratory Control Sample (LCS)

(LCS) R4138094-2 10/26/24 13:19

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Aluminum	10.0	9.99	99.9	85.0-115	
Antimony	1.00	0.932	93.2	85.0-115	
Arsenic	1.00	0.977	97.7	85.0-115	
Barium	1.00	0.990	99.0	85.0-115	
Beryllium	1.00	0.978	97.8	85.0-115	
Cadmium	1.00	0.966	96.6	85.0-115	
Chromium	1.00	0.991	99.1	85.0-115	
Copper	1.00	0.932	93.2	85.0-115	
Lead	1.00	0.975	97.5	85.0-115	
Magnesium	10.0	9.70	97.0	85.0-115	
Nickel	1.00	0.960	96.0	85.0-115	
Selenium	1.00	0.999	99.9	85.0-115	
Silver	0.200	0.198	99.0	85.0-115	
Thallium	1.00	0.981	98.1	85.0-115	
Zinc	1.00	1.00	100	85.0-115	

QUALITY CONTROL SUMMARY

L1789286-01

L1789253-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789253-01 10/26/24 13:21 • (MS) R4138094-4 10/26/24 13:24 • (MSD) R4138094-5 10/26/24 13:26

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	MS Qualifier	MSD Qualifier	RPD	RPD Limits
Aluminum	10.0	<0.200	10.2	10.2	101	102	1	70.0-130			0.226	20
Antimony	1.00	<0.0100	1.01	1.01	101	101	1	70.0-130			0.621	20
Arsenic	1.00	<0.0100	1.05	1.04	105	104	1	70.0-130			0.485	20
Barium	1.00	0.0352	1.03	1.03	99.5	99.9	1	70.0-130			0.361	20
Beryllium	1.00	<0.00200	1.01	1.01	101	101	1	70.0-130			0.0557	20
Cadmium	1.00	<0.00200	1.01	1.01	101	101	1	70.0-130			0.336	20
Chromium	1.00	<0.0100	1.01	1.00	101	100	1	70.0-130			0.325	20
Copper	1.00	0.0623	1.08	1.07	102	101	1	70.0-130			0.292	20
Lead	1.00	<0.00500	0.987	0.982	98.7	98.2	1	70.0-130			0.567	20
Magnesium	10.0	20.4	30.8	30.5	104	101	1	70.0-130			0.983	20
Nickel	1.00	0.124	1.12	1.12	99.7	99.2	1	70.0-130			0.467	20
Selenium	1.00	<0.0100	1.03	1.04	103	104	1	70.0-130			1.41	20
Silver	0.200	<0.00500	0.210	0.209	104	104	1	70.0-130			0.170	20
Thallium	1.00	<0.0100	0.991	1.01	99.1	101	1	70.0-130			1.77	20
Zinc	1.00	<0.0500	1.06	1.06	101	101	1	70.0-130			0.126	20

¹ Cp² Tc³ Ss⁴ Cn⁵ Sr⁶ Qc⁷ Gl⁸ Al⁹ Sc

L1789313-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789313-01 10/26/24 13:27 • (MS) R4138094-6 10/26/24 13:29 • (MSD) R4138094-8 10/26/24 17:28

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	MS Qualifier	MSD Qualifier	RPD	RPD Limits
Aluminum	10.0	<0.200	10.0	10.4	99.5	103	1	70.0-130			3.19	20
Antimony	1.00	<0.0100	0.965	0.987	96.5	98.7	1	70.0-130			2.19	20
Arsenic	1.00	<0.0100	1.03	1.03	103	102	1	70.0-130			0.186	20
Barium	1.00	0.179	1.17	1.22	99.2	104	1	70.0-130			4.02	20
Beryllium	1.00	<0.00200	0.987	1.02	98.7	102	1	70.0-130			3.42	20
Cadmium	1.00	<0.00200	1.00	1.01	100	101	1	70.0-130			0.957	20
Chromium	1.00	<0.0100	0.985	1.00	98.1	99.7	1	70.0-130			1.53	20
Copper	1.00	0.0487	1.05	1.06	99.8	101	1	70.0-130			1.47	20
Lead	1.00	<0.00500	0.974	0.994	97.4	99.4	1	70.0-130			1.99	20
Magnesium	10.0	75.1	86.4	91.9	113	168	1	70.0-130	Y		6.19	20
Nickel	1.00	<0.0100	0.981	0.992	97.5	98.6	1	70.0-130			1.14	20
Selenium	1.00	<0.0100	1.02	1.00	102	100	1	70.0-130			1.64	20
Silver	0.200	<0.00500	0.207	0.211	104	105	1	70.0-130			1.67	20
Thallium	1.00	<0.0100	0.979	1.01	97.9	101	1	70.0-130			2.71	20
Zinc	1.00	0.0941	1.08	1.09	98.9	100	1	70.0-130			0.997	20

GLOSSARY OF TERMS

Guide to Reading and Understanding Your Laboratory Report

The information below is designed to better explain the various terms used in your report of analytical results from the Laboratory. This is not intended as a comprehensive explanation, and if you have additional questions please contact your project representative.

Results Disclaimer - Information that may be provided by the customer, and contained within this report, include Permit Limits, Project Name, Sample ID, Sample Matrix, Sample Preservation, Field Blanks, Field Spikes, Field Duplicates, On-Site Data, Sampling Collection Dates/Times, and Sampling Location. Results relate to the accuracy of this information provided, and as the samples are received.

Abbreviations and Definitions

MDL	Method Detection Limit.
RDL	Reported Detection Limit.
Rec.	Recovery.
RPD	Relative Percent Difference.
SDG	Sample Delivery Group.
Analyte	The name of the particular compound or analysis performed. Some Analyses and Methods will have multiple analytes reported.
Dilution	If the sample matrix contains an interfering material, the sample preparation volume or weight values differ from the standard, or if concentrations of analytes in the sample are higher than the highest limit of concentration that the laboratory can accurately report, the sample may be diluted for analysis. If a value different than 1 is used in this field, the result reported has already been corrected for this factor.
Limits	These are the target % recovery ranges or % difference value that the laboratory has historically determined as normal for the method and analyte being reported. Successful QC Sample analysis will target all analytes recovered or duplicated within these ranges.
Original Sample	The non-spiked sample in the prep batch used to determine the Relative Percent Difference (RPD) from a quality control sample. The Original Sample may not be included within the reported SDG.
Qualifier	This column provides a letter and/or number designation that corresponds to additional information concerning the result reported. If a Qualifier is present, a definition per Qualifier is provided within the Glossary and Definitions page and potentially a discussion of possible implications of the Qualifier in the Case Narrative if applicable.
Result	The actual analytical final result (corrected for any sample specific characteristics) reported for your sample. If there was no measurable result returned for a specific analyte, the result in this column may state "ND" (Not Detected) or "BDL" (Below Detectable Levels). The information in the results column should always be accompanied by either an MDL (Method Detection Limit) or RDL (Reporting Detection Limit) that defines the lowest value that the laboratory could detect or report for this analyte.
Uncertainty (Radiochemistry)	Confidence level of 2 sigma.
Case Narrative (Cn)	A brief discussion about the included sample results, including a discussion of any non-conformances to protocol observed either at sample receipt by the laboratory from the field or during the analytical process. If present, there will be a section in the Case Narrative to discuss the meaning of any data qualifiers used in the report.
Quality Control Summary (Qc)	This section of the report includes the results of the laboratory quality control analyses required by procedure or analytical methods to assist in evaluating the validity of the results reported for your samples. These analyses are not being performed on your samples typically, but on laboratory generated material.
Sample Chain of Custody (Sc)	This is the document created in the field when your samples were initially collected. This is used to verify the time and date of collection, the person collecting the samples, and the analyses that the laboratory is requested to perform. This chain of custody also documents all persons (excluding commercial shippers) that have had control or possession of the samples from the time of collection until delivery to the laboratory for analysis.
Sample Results (Sr)	This section of your report will provide the results of all testing performed on your samples. These results are provided by sample ID and are separated by the analyses performed on each sample. The header line of each analysis section for each sample will provide the name and method number for the analysis reported.
Sample Summary (Ss)	This section of the Analytical Report defines the specific analyses performed for each sample ID, including the dates and times of preparation and/or analysis.

Qualifier Description

E	The analyte concentration exceeds the upper limit of the calibration range of the instrument established by the initial calibration (ICAL).
J	The identification of the analyte is acceptable; the reported value is an estimate.
J3	The associated batch QC was outside the established quality control range for precision.
J5	The sample matrix interfered with the ability to make any accurate determination; spike value is high.
J6	The sample matrix interfered with the ability to make any accurate determination; spike value is low.
P1	RPD value not applicable for sample concentrations less than 5 times the reporting limit.
V	The sample concentration is too high to evaluate accurate spike recoveries.

¹ Cp

² Tc

³ Ss

⁴ Cn

⁵ Sr

⁶ Qc

⁷ Gl

⁸ Al

⁹ Sc

ACCREDITATIONS & LOCATIONS

Pace Analytical National 12065 Lebanon Rd Mount Juliet, TN 37122

Alabama	40660	Nebraska	NE-OS-15-05
Alaska	17-026	Nevada	TN000032021-1
Arizona	AZ0612	New Hampshire	2975
Arkansas	88-0469	New Jersey—NELAP	TN002
California	2932	New Mexico ¹	TN00003
Colorado	TN00003	New York	11742
Connecticut	PH-0197	North Carolina	Env375
Florida	E87487	North Carolina ¹	DW21704
Georgia	NELAP	North Carolina ³	41
Georgia ¹	923	North Dakota	R-140
Idaho	TN00003	Ohio—VAP	CL0069
Illinois	200008	Oklahoma	9915
Indiana	C-TN-01	Oregon	TN200002
Iowa	364	Pennsylvania	68-02979
Kansas	E-10277	Rhode Island	LA000356
Kentucky ^{1,6}	KY90010	South Carolina	84004002
Kentucky ²	16	South Dakota	n/a
Louisiana	AI30792	Tennessee ^{1,4}	2006
Louisiana	LA018	Texas	T104704245-20-18
Maine	TN00003	Texas ⁵	LAB0152
Maryland	324	Utah	TN000032021-11
Massachusetts	M-TN003	Vermont	VT2006
Michigan	9958	Virginia	110033
Minnesota	047-999-395	Washington	C847
Mississippi	TN00003	West Virginia	233
Missouri	340	Wisconsin	998093910
Montana	CERT0086	Wyoming	A2LA
A2LA – ISO 17025	1461.01	AIHA-LAP,LLC EMLAP	100789
A2LA – ISO 17025 ⁵	1461.02	DOD	1461.01
Canada	1461.01	USDA	P330-15-00234
EPA-Crypto	TN00003		

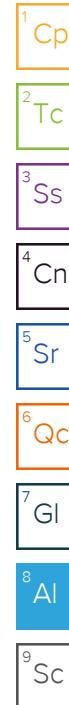
Pace Analytical Services, LLC -Dallas 400 W. Bethany Drive Suite 190 Allen, TX 75013

Arkansas	88-0647	Kansas	E10388
Florida	E871118	Texas	T104704232-23-39
Iowa	408	Oklahoma	8727
Louisiana	30686		

¹ Drinking Water ² Underground Storage Tanks ³ Aquatic Toxicity ⁴ Chemical/Microbiological ⁵ Mold ⁶ Wastewater n/a Accreditation not applicable

* Not all certifications held by the laboratory are applicable to the results reported in the attached report.

* Accreditation is only applicable to the test methods specified on each scope of accreditation held by Pace Analytical.



CSWR - Texas Utility Operating Company

211 Douglas St.

Report to:
~~Justin Gonzalez~~ Callie D

Project Description:
Aransas Bay Utilities

Phone: ~~361-472-8924~~

1-903-816-9056

Collected by (print):

Collected by (signature):

Immediately
Packed on Ice N Y

Sample ID

RO Brine

* Matrix:
SS - Soil AIR - Air F - Filter
GW - Groundwater B - Bioassay
WW - WasteWater
DW - Drinking Water
OT - Other _____

Krista Oberneufemann
1650 Des Peres Rd, Ste 303
Des Peres, MO 63131

Pres
Chk

Email To: Callie@pug.services
cswr@njsoft.com, andrea.cloy@clearwatersolc

City/State
Collected:

Please Circle:
PT MT CT ET

Client Project #

Lab Project #
MIDWATWMO-ARABAYRTX

Site/Facility ID #

P.O. #

Rush? (Lab MUST Be Notified)

Same Day Five Day
Next Day 5 Day (Rad Only)
Two Day 10 Day (Rad Only)
Three Day

Date Results Needed

No.
of
Cntrs

ALLCR6 50mlTube/plungerPres

ALLOGHEX 1L-Amb-Add HCl

ALLPHOS 500mlHDPE-Add H2SO4

ALLSUBLLHG 250mlClr

ALLTOC 250mlAmb-H2SO4

ALLTSS 1L-HDPE-NoPres

BOD, cBOD, TDS 1L-HDPE NoPres

CNAM and CN 250mlHDPE-NaOH

COD; NH3; TKN 250mlHDPEH2SO4

Metals 250mlHDPE HNO3

X

X

X

X

X

X

X

X

X

-01

Remarks:

Total residual - 0.0

pH 7.45 Temp 80.1

TDS - 629.8

Flow _____ Other _____

Samples returned via:

UPS FedEx Courier _____

Tracking #

Sample Receipt Checklist

COC Seal Present/Intact: NP Y N

COC Signed/Accurate: Y N

Bottles arrive intact: Y N

Correct bottles used: Y N

Sufficient volume sent: Y N

If Applicable

VOA Zero Headspace: Y N

Preservation Correct/Checked: Y N

RAD Screen <0.5 mR/hr: Y N

Relinquished by : (Signature)

Date:

10/15/24

Time:

1530

Received by: (Signature)

Trip Blank Received: Yes / No

HCl / MeOH
TBR

Relinquished by : (Signature)

Date:

10/15/24

Time:

1700

Received by: (Signature)

Temp: °C Bottles Received:

If preservation required by Login: Date/Time

Relinquished by : (Signature)

Date:

10/10/24

Time:

0915

Received for lab by: (Signature)

Date:

10/10/24 0915

Time:

Hold: Condition:
NCF / OK

Company Name/Address: CSWR - Texas Utility Operating Company 211 Douglas St.			Billing Information: Krista Oberneufemann 1650 Des Peres Rd, Ste 303 Des Peres, MO 63131			Analysis / Container / Preservative						Chain of Custody	Page 2 of 2						
						Pres Chk													
Report to: Justin Gonzales <i>Callie D</i>			Email To: <i>callie@pwg.services</i> cswr@njbsoft.com;andrea.cloy@clearwatersolc									Pace PEOPLE ADVANCING SCIENCE							
Project Description: Aransas Bay Utilities			City/State Collected:			Please Circle: PT MT CT ET						ALLEN, TX 400 W. Bethany Drive Suite 190 Allen, TX 75013 Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at: https://info.pacelabs.com/hubs/pas-standard-terms.pdf							
Phone: 361-412-8924 <i>403-816-9056</i>		Client Project #			Lab Project # MIDWATWMO-ARABAYRTX									SDG #					
Collected by (print):			Site/Facility ID #			P.O. #									Table #				
Collected by (signature):			Rush? (Lab MUST Be Notified)			Quote #									Acctnum: MIDWATWMO				
Immediately Packed on Ice N <u> </u> Y <u> </u>			<input type="checkbox"/> Same Day <input type="checkbox"/> Next Day <input type="checkbox"/> Two Day <input type="checkbox"/> Three Day			<input type="checkbox"/> Five Day <input type="checkbox"/> 5 Day (Rad Only) <input type="checkbox"/> 10 Day (Rad Only)			Date Results Needed		No. of Cntrs							Template: T261605	
																		Prelogin: P1106689	
Sample ID			Comp/Grab	Matrix *	Depth	Date	Time							PM: 3587 - Lori A Vahrenkamp					
RD Brine			Grab	WW	10/15/24	1100	12	X						PB: 					
														Shipped Via: FedEX Ground					
														Remarks Sample # (lab only)					
* Matrix: SS - Soil AIR - Air F - Filter GW - Groundwater B - Bioassay WW - WasteWater DW - Drinking Water OT - Other _____			Remarks:												Sample Receipt Checklist				
															pH _____ Temp _____	COC Seal Present/Intact: <input type="checkbox"/> NP <input checked="" type="checkbox"/> Y <input type="checkbox"/> N			
															Flow _____ Other _____	COC Signed/Accurate: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N			
			Samples returned via: <input type="checkbox"/> UPS <input type="checkbox"/> FedEx <input type="checkbox"/> Courier _____				Tracking #								Bottles arrive intact: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N				
															Correct bottles used: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N				
															Sufficient volume sent: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <i>If Applicable</i>				
															VOA Zero Headspace: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N				
															Preservation Correct/Checked: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N				
															RAD Screen <0.5 mR/hr: <input type="checkbox"/> Y <input checked="" type="checkbox"/> N				
Relinquished by : (Signature) <i>Lori M</i>			Date: 10/15/24	Time: 1530	Received by: (Signature) <i>Guy</i>			Trip Blank Received: Yes / No HCL / MeOH TBR			If preservation required by Login: Date/Time								
Relinquished by : (Signature) <i>Guy</i>			Date: 10/15/24	Time: 1700	Received by: (Signature) <i>Guy</i>			Temp: °C Bottles Received:											
Relinquished by : (Signature) <i>FedEx</i>			Date: 10/16/24	Time: 0915	Received for lab by: (Signature) <i>alpha Hydrogen Farms</i>			Date: 10/16/24 Time: 0915			Hold:			Condition: NCF / OK					



3923367 150ct2024 VCTA 5B1G4/DE3/5FE5

AD DNEA

75013
TX-US
DFW

FedEx.
TRK# 7387 0566 3792
[0221]

WED - 16 OCT AA
PRIORITY OVERNIGHT



ORIGIN ID: VCTA (361) 446-0565	SHIP DATE: 18SEP24 ACTWT: 50.00 LB MAN CAD: 0917226/CAFE3654
PF 14 SV U To PACE 1606 E. BRAZOS ST. SUITE D VICTORIA, TX 77901 UNITED STATES US	ORIGIN ID: VCTA (361) 446-0565 SHIP DATE: 18SEP24 ACTWT: 50.00 LB MAN CAD: 0917226/CAFE3654
RI INV: 801	REF: DEPT:
To SAMPLE RECEIVING	
PACE 400 W. BETHANY DR. SUITE 190 ALLEN TX 75013 (972) 727-1123	



DCC#_Title: ENV-FRM-ALLE-0017 v15_Sample Condition Upon Receipt

ANALYTICAL SERVICES

Effective Date: 12/18/2023

Sample Condition Upon Receipt

Dallas

Ft Worth

Corpus Christi

Austin

Client Name: CSWR Texas Utility Project Work order (place label):
Courier: FedEx UPS USPS Client LSO PACE Other: _____

Tracking #: 738705663792

Custody Seal on Cooler/Box: Yes No

Received on ice: Wet Blue No Ice

Receiving Lab 1 Thermometer Used: 1P19 Cooler Temp °C: 13 (Recorded) -0.2 (Correction Factor) 1.1 (Actual)

Receiving Lab 2 Thermometer Used: _____ Cooler Temp °C: _____ (Recorded) _____ (Correction Factor) _____ (Actual)

Temperature should be above freezing to 6 °C unless collected same day as receipt in which evidence of cooling is acceptable.

Chain of Custody relinquished	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Sampler name & signature on COC	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Short HT analyses (<72 hrs)	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>

Triage Person: MM Date: 10/10

Sufficient Volume received Yes No

Correct Container used Yes No

Container Intact Yes No

Sample pH Acceptable Yes No NA

pH Strips: 646000A Yes No NA

Residual Chlorine Present Yes No NA

Cl Strips: 14800 Yes No NA

Sulfide Present Yes No NA

Lead Acetate Strips: 14802 Yes No NA

Are soil samples (volatiles, TPH) received in 5035A kits (not applicable to TCLP VOA or PST Program TPH)
Unpreserved 5035A soil frozen within 48 hrs Yes No NA

Headspace in VOA (>6mm) Yes No NA

Project sampled in USDA Regulated Area outside of Texas Yes No NA

State Sampled: Yes No

Non-Conformance(s): Yes No

Login Person: MM Date: 10/10

Labeling Person (if different than log-in): _____ Date: _____

Qualtrax ID: 48806



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

October 24, 2024

Tim Gramling
Pace Analytical Allen
400 West Bethany Drive
Suite 190
Allen, TX 75013

RE: Project: L1789286 WG2383530
Pace Project No.: 40285977

Dear Tim Gramling:

Enclosed are the analytical results for sample(s) received by the laboratory on October 17, 2024. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Green Bay

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Cindy Varga
cindy.varga@pacelabs.com
(920)469-2436
Project Manager

Enclosures

cc: Client Services, Pace Analytical Allen



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

CERTIFICATIONS

Project: L1789286 WG2383530
Pace Project No.: 40285977

Pace Analytical Services Green Bay

1241 Bellevue Street, Green Bay, WI 54302
Florida/NELAP Certification #: E87948
Illinois Certification #: 200050
Kentucky UST Certification #: 82
Louisiana Certification #: 04168
Minnesota Certification #: 055-999-334
New York Certification #: 12064
North Dakota Certification #: R-150

South Carolina Certification #: 83006001
Texas Certification #: T104704529-21-8
Virginia VELAP Certification ID: 11873
Wisconsin Certification #: 405132750
Wisconsin DATCP Certification #: 105-444
USDA Soil Permit #: P330-21-00008
Federal Fish & Wildlife Permit #: 51774A

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE SUMMARY

Project: L1789286 WG2383530

Pace Project No.: 40285977

Lab ID	Sample ID	Matrix	Date Collected	Date Received
40285977001	L1789286 RO BRINE	Water	10/15/24 11:00	10/17/24 09:25

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE ANALYTE COUNT

Project: L1789286 WG2383530

Pace Project No.: 40285977

Lab ID	Sample ID	Method	Analysts	Analytics Reported
40285977001	L1789286 RO BRINE	EPA 1631E	MRP	1

PASI-G = Pace Analytical Services - Green Bay

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

ANALYTICAL RESULTS

Project: L1789286 WG2383530

Pace Project No.: 40285977

Sample: L1789286 RO BRINE	Lab ID: 40285977001	Collected: 10/15/24 11:00	Received: 10/17/24 09:25	Matrix: Water				
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level	Analytical Method: EPA 1631E Preparation Method: EPA 1631E Pace Analytical Services - Green Bay							
Mercury	1.10	ng/L	0.51	1	10/21/24 12:25	10/23/24 12:59	7439-97-6	1q

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALITY CONTROL DATA

Project: L1789286 WG2383530

Pace Project No.: 40285977

QC Batch: 487808 Analysis Method: EPA 1631E

QC Batch Method: EPA 1631E Analysis Description: 1631E Mercury

Laboratory: Pace Analytical Services - Green Bay

Associated Lab Samples: 40285977001

METHOD BLANK: 2793892 Matrix: Water

Associated Lab Samples: 40285977001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/23/24 11:34	

METHOD BLANK: 2793893 Matrix: Water

Associated Lab Samples: 40285977001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/23/24 12:39	

METHOD BLANK: 2793894 Matrix: Water

Associated Lab Samples: 40285977001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/23/24 14:16	

METHOD BLANK: 2793895 Matrix: Water

Associated Lab Samples: 40285977001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.53	10/23/24 11:39	

LABORATORY CONTROL SAMPLE: 2793896

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	5.22	104	79-121	

LABORATORY CONTROL SAMPLE: 2793897

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	4.72	94	79-121	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALITY CONTROL DATA

Project: L1789286 WG2383530

Pace Project No.: 40285977

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:			2795578		2795579							
Parameter	Units	Result	MS	MSD	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
			Spike Conc.	Spike Conc.								
Mercury	ng/L	92.5	211	211	307	319	102	108	75-125	4	24	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:			2795580		2795581							
Parameter	Units	Result	MS	MSD	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
			Spike Conc.	Spike Conc.								
Mercury	ng/L	0.970	2	2	2.83	2.86	93	95	75-125	1	24	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

QUALIFIERS

Project: L1789286 WG2383530

Pace Project No.: 40285977

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Reported results are not rounded until the final step prior to reporting. Therefore, calculated parameters that are typically reported as "Total" may vary slightly from the sum of the reported component parameters.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

ANALYTE QUALIFIERS

1q Sample received With Headspace

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: L1789286 WG2383530

Pace Project No.: 40285977

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
40285977001	L1789286 RO BRINE	EPA 1631E	487808	EPA 1631E	488140

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

40285977

CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Section A**Required Client Information:**

Company: Pace Analytical	Report To: Pace Analytical Subout Team	Attention: Callie Derzapf	Page : 1 Of 1
Address: 400 W. Bethany Drive Suite 190	Copy To:	Company Name:	
Allen, TX 75013		Address:	Regulatory Agency
Email: Dallas_Sub@pacelabs.com	Purchase Order #: L1789286	Pace Quote:	
Phone: (972) 727-1123	Fax	Pace Project Manager: Cindy Varga	State / Location: MO
Requested Due Date: 23-Oct	Project #: Project #:	Pace Profile #: 38076	

Section B**Required Project Information:****Section C****Invoice Information:**

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 /, -) Sample Ids must be unique	MATRIX Drinking Water Water Waste Water Product Soil/Solid Oil Wipe Air Other Tissue	CODE DW WT WW P SL OL WP AR OT TS	MATRIX CODE (see valid codes to left) S=GRAB C=COMP	COLLECTED				SAMPLE TEMP AT COLLECTION	Preservatives							Requested Analysis Filtered (Y/N)											
					START		END			Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Analyses Test	Y/N	Low Level Hg								
					DATE	TIME	DATE	TIME		H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	X/N	Low Level Hg										
1	RO BRINE		WT		15-Oct	11:00			1							1	X											OC
2																												
3																												
4																												
5																												
6																												
7																												
8																												
9																												
10																												
11																												
12																												

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS
Pace Analytical Batch: WG2383530	<i>alpha Hydrogen Peroxide</i> FedEx	10/16/24	1700	<i>FedEx</i>	10/16/24	1700	
Pace Analytical SDGs: L1789286		10/17/24	0925	<i>E. J. Pace</i>	10/17/24	0925	N/A N Y
Location: Green Bay, WI 54302							

SAMPLER NAME AND SIGNATURE	
PRINT Name of SAMPLER:	
SIGNATURE of SAMPLER:	DATE Signed:
TEMP in C	Received on Ice (Y/N)
Custody Sealed	Cooler (Y/N)
Samples Intact (Y/N)	

Effective Date: 8/16/2022

Client Name: Pace TXAll containers needing preservation have been checked and noted below:
Lab Lot# of pH paper:

Sample Preservation Receipt Form

Project #

 Yes No

N/A

Lab Std #ID of preservation (if pH adjusted):

Initial when completed:

Date/
Time:

Pace Lab #	AG1U	BG1U	Glass	AG1H	AG4S	AG5U	AG2S	BG3U	BP1U	BP3U	Plastic	BP3B	BP3N	BP3S	BP2Z	VG9C	DG9T	Vials	VG9U	VG9H	VG9M	VG9D	JGFU	JG9U	Jars	WGFU	WPFU	SP5T	ZPLC	General	GN 1	GN 2	VOA Vials (>6mm)*	H2SO4 pH ≤2	NaOH+Zn Act pH ≥9	NaOH pH ≥12	HNO3 pH ≤2	pH after adjusted	Volume (mL)
001																																2.5 / 5							
002																															2.5 / 5								
003																															2.5 / 5								
004																															2.5 / 5								
005																															2.5 / 5								
006																															2.5 / 5								
007																															2.5 / 5								
008																															2.5 / 5								
009																															2.5 / 5								
010																															2.5 / 5								
011																															2.5 / 5								
012																															2.5 / 5								
013																															2.5 / 5								
014																															2.5 / 5								
015																															2.5 / 5								
016																															2.5 / 5								
017																															2.5 / 5								
018																															2.5 / 5								
019																															2.5 / 5								
020																															2.5 / 5								

Exceptions to preservation check: VOA, Coliform, TOC, TOX, TOH, O&G, W/ DRO, Phenolics, Other:

Headspace in VOA Vials (>6mm) : Yes No N/A

*If yes look in headspace column

AG1U	1 liter amber glass	BP1U	1 liter plastic unpres	VG9C	40 mL clear ascorbic w/ HCl	JGFU	4 oz amber jar unpres
BG1U	1 liter clear glass	BP3U	250 mL plastic unpres	DG9T	40 mL amber Na Thio	JG9U	9 oz amber jar unpres
AG1H	1 liter amber glass HCL	BP3B	250 mL plastic NaOH	VG9U	40 mL clear vial unpres	WGFU	4 oz clear jar unpres
AG4S	125 mL amber glass H2SO4	BP3N	250 mL plastic HNO3	VG9H	40 mL clear vial HCl	WPFU	4 oz plastic jar unpres
AG5U	100 mL amber glass unpres	BP3S	250 mL plastic H2SO4	VG9M	40 mL clear vial MeOH	SP5T	120 mL plastic Na Thiosulfate
AG2S	500 mL amber glass H2SO4	BP2Z	500 mL plastic NaOH + Zn	VG9D	40 mL clear vial DI	ZPLC	ziploc bag
BG3U	250 mL clear glass unpres					GN 1	250 mL clear glass HCl
						GN 2	

Page 1 of 2

Sample Condition Upon Receipt Form (SCUR)

Project #:

Client Name: Pace TX

WO# : 40285977

Courier: CS Logistics Fed Ex Speedee UPS Waltco Client Pace Other: _____Tracking #: 417112623982

40285977

Custody Seal on Cooler/Box Present: yes no Seals intact: yes noCustody Seal on Samples Present: yes no Seals intact: yes noPacking Material: Bubble Wrap Bubble Bags None OtherThermometer Used SR - 10 Type of Ice: Wet Blue Dry None Meltwater OnlyCooler Temperature Uncorr: N/A /Corr: N/ATemp Blank Present: yes noBiological Tissue is Frozen: yes no

Temp should be above freezing to 6°C.

Biota Samples may be received at ≤ 0°C if shipped on Dry Ice.

Person examining contents:

Date: 10/17/24 /Initials: ERLabeled By Initials: ER

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name & Signature on COC:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	4. <u>IRW0 ER 10/17/24</u>
Samples Arrived within Hold Time: - DI VOA Samples frozen upon receipt	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	5. Date/Time:
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7.
Sufficient Volume: For Analysis: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No MS/MSD: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	8.	
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	9.
Correct Type: Pace Green Bay, <u>Pace IR</u> , Non-Pace		
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC: -Includes date/time/ID/Analysis	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	12. <u>No ID/Date/Time on client label ER 10/17/24</u>
Trip Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

Client Notification/ Resolution:

If checked, see attached form for additional comments

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

PM Review is documented electronically in LIMs. By releasing the project, the PM acknowledges they have reviewed the sample logit

Page 2 of 2



ANALYTICAL REPORT

November 02, 2024

¹Cp

²Tc

³Ss

⁴Cn

⁵Sr

⁶Qc

⁷GI

⁸AI

⁹Sc

CSWR - Texas Utility Operating Company

Sample Delivery Group: L1791208
Samples Received: 10/22/2024
Project Number:
Description: Aransas Bay Utilities

Report To: Callie Derzapf
211 Douglas St.
Richmond, TX 77469

Entire Report Reviewed By:

Lori A Vahrenkamp
Project Manager

Results relate only to the items tested or calibrated and are reported as rounded values. This test report shall not be reproduced, except in full, without written approval of the laboratory. Where applicable, sampling conducted by Pace Analytical National is performed per guidance provided in laboratory standard operating procedures ENV-SOP-MTJL-0067 and ENV-SOP-MTJL-0068. Where sampling conducted by the customer, results relate to the accuracy of the information provided, and as the samples are received.

Pace Analytical National

12065 Lebanon Rd Mount Juliet, TN 37122 615-758-5858 800-767-5859 mydata.pacelabs.com

TABLE OF CONTENTS

Cp: Cover Page	1	
Tc: Table of Contents	2	
Ss: Sample Summary	3	
Cn: Case Narrative	4	
Sr: Sample Results	5	
RO BRINE L1791208-01	5	
Qc: Quality Control Summary	7	
Gravimetric Analysis by Method 2540C	7	
Gravimetric Analysis by Method 2540D	8	
Wet Chemistry by Method 1664B	9	
Wet Chemistry by Method 2320B	10	
Wet Chemistry by Method 300.0	11	
Wet Chemistry by Method 3500Cr-B	12	
Wet Chemistry by Method 351.2	13	
Wet Chemistry by Method 4500CN-E	14	
Wet Chemistry by Method 4500P-E	15	
Wet Chemistry by Method 5210 B-2016	16	
Wet Chemistry by Method 5220D	18	
Wet Chemistry by Method 5310C	19	
Wet Chemistry by Method SM4500NH3H	20	
Metals (ICP) by Method 200.7	21	
Gl: Glossary of Terms	23	
Al: Accreditations & Locations	24	
Sc: Sample Chain of Custody	25	

SAMPLE SUMMARY

RO BRINE L1791208-01 WW Collected by Jonathan Helm Collected date/time 10/21/24 08:30 Received date/time 10/22/24 09:00

Method	Batch	Dilution	Preparation date/time	Analysis date/time	Analyst	Location
Calculated Results	WG2389608	1	11/02/24 14:59	11/02/24 14:59	JTM	Mt. Juliet, TN
Gravimetric Analysis by Method 2540C	WG2389552	1	10/25/24 13:06	10/25/24 14:00	QQT	Allen, TX
Gravimetric Analysis by Method 2540D	WG2387742	1	10/23/24 10:50	10/23/24 12:56	QQT	Allen, TX
Wet Chemistry by Method 1664B	WG2389879	1	10/28/24 07:39	10/28/24 13:41	TJL	Mt. Juliet, TN
Wet Chemistry by Method 2320B	WG2390789	1	10/28/24 09:38	10/28/24 09:38	SKW	Allen, TX
Wet Chemistry by Method 300.0	WG2386886	1	10/22/24 14:10	10/22/24 14:10	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2386886	1	10/22/24 14:47	10/22/24 14:47	SMC	Allen, TX
Wet Chemistry by Method 300.0	WG2386886	1	10/22/24 15:32	10/22/24 15:32	SMC	Allen, TX
Wet Chemistry by Method 3500Cr-B	WG2390754	1	10/28/24 13:40	10/28/24 13:40	SMC	Allen, TX
Wet Chemistry by Method 351.2	WG2386892	1	10/22/24 10:54	10/22/24 21:14	EIG	Allen, TX
Wet Chemistry by Method 4500CN-E	WG2388486	1	10/24/24 14:00	10/24/24 17:25	KCM	Allen, TX
Wet Chemistry by Method 4500CN-G	WG2388486	1	10/24/24 17:25	10/24/24 17:25	KCM	Allen, TX
Wet Chemistry by Method 4500P-E	WG2390753	5	10/28/24 17:39	10/28/24 17:39	SMC	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2386970	1	10/22/24 13:39	10/27/24 12:27	JBS	Allen, TX
Wet Chemistry by Method 5210 B-2016	WG2386972	1	10/22/24 15:12	10/27/24 13:30	QQT	Allen, TX
Wet Chemistry by Method 5220D	WG2389326	1	10/25/24 10:39	10/25/24 12:43	JBS	Allen, TX
Wet Chemistry by Method 5310C	WG2386939	1	10/23/24 01:54	10/23/24 01:54	EIG	Allen, TX
Wet Chemistry by Method SM4500NH3H	WG2389444	1	10/25/24 13:44	10/25/24 13:44	EIG	Allen, TX
Metals (ICP) by Method 200.7	WG2389608	1	11/01/24 10:35	11/02/24 14:59	JTM	Mt. Juliet, TN
Subcontracted Analyses	WG2387192	1	10/30/24 00:00	10/30/24 00:00	JWW	Green Bay, WI 54302

¹ Cp

² Tc

³ Ss

⁴ Cn

⁵ Sr

⁶ Qc

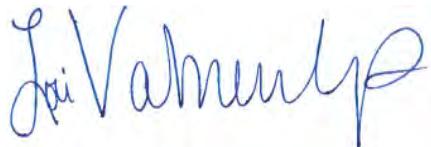
⁷ Gl

⁸ Al

⁹ Sc

CASE NARRATIVE

All sample aliquots were received at the correct temperature, in the proper containers, with the appropriate preservatives, and within method specified holding times, unless qualified or notated within the report. Where applicable, all MDL (LOD) and RDL (LOQ) values reported for environmental samples have been corrected for the dilution factor used in the analysis. All Method and Batch Quality Control are within established criteria except where addressed in this case narrative, a non-conformance form or properly qualified within the sample results. By my digital signature below, I affirm to the best of my knowledge, all problems/anomalies observed by the laboratory as having the potential to affect the quality of the data have been identified by the laboratory, and no information or data have been knowingly withheld that would affect the quality of the data.



Lori A Vahrenkamp
Project Manager

Project Narrative

L1791208 -01 contains subout data that is included after the chain of custody.

¹ Cp

² Tc

³ Ss

⁴ Cn

⁵ Sr

⁶ Qc

⁷ GI

⁸ AI

⁹ Sc

Calculated Results

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Trivalent	<0.00300		0.00300	1	11/02/2024 14:59	WG2389608

¹ Cp² Tc³ Ss⁴ Cn⁵ Sr⁶ Qc⁷ Gl⁸ Al⁹ Sc

Gravimetric Analysis by Method 2540C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Total Dissolved Solids	7220		500	1	10/25/2024 14:00	WG2389552

Gravimetric Analysis by Method 2540D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Suspended Solids	5.50		3.13	1	10/23/2024 12:56	WG2387742

Wet Chemistry by Method 1664B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Oil & Grease (Hexane Extr)	<5.15		5.15	1	10/28/2024 13:41	WG2389879

Wet Chemistry by Method 2320B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Alkalinity	1040		20.0	1	10/28/2024 09:38	WG2390789
Alkalinity,Bicarbonate	1040		20.0	1	10/28/2024 09:38	WG2390789
Alkalinity,Carbonate	<20.0		20.0	1	10/28/2024 09:38	WG2390789
Alkalinity,Hydroxide	<20.0		20.0	1	10/28/2024 09:38	WG2390789
Phenolphthalein Alkalinity	<20.0		20.0	1	10/28/2024 09:38	WG2390789

Wet Chemistry by Method 300.0

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chloride	2790		0.800	1	10/22/2024 15:32	WG2386886
Fluoride	2.54	J6	0.500	1	10/22/2024 14:10	WG2386886
Nitrate	0.626	J6	0.500	1	10/22/2024 14:10	WG2386886
Sulfate	549	J6	0.700	1	10/22/2024 14:47	WG2386886

Wet Chemistry by Method 3500Cr-B

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Chromium,Hexavalent	<0.00300		0.00300	1	10/28/2024 13:40	WG2390754

Wet Chemistry by Method 351.2

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Kjeldahl Nitrogen, TKN	<0.250		0.250	1	10/22/2024 21:14	WG2386892

Wet Chemistry by Method 4500CN-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide	<0.0100		0.0100	1	10/24/2024 17:25	WG2388486

Wet Chemistry by Method 4500CN-G

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Cyanide,amenable	<0.0100		0.0100	1	10/24/2024 17:25	WG2388486

¹ Cp

Wet Chemistry by Method 4500P-E

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Phosphorus,Total	0.844		0.250	5	10/28/2024 17:39	WG2390753

² Tc

Wet Chemistry by Method 5210 B-2016

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
BOD	1.43	J-	1.00	1	10/27/2024 12:27	WG2386970
CBOD	<1.00		1.00	1	10/27/2024 13:30	WG2386972

³ Ss⁴ Cn

Wet Chemistry by Method 5220D

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
COD	139		35.0	1	10/25/2024 12:43	WG2389326

⁵ Sr

Wet Chemistry by Method 5310C

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
TOC (Total Organic Carbon)	2.24		0.700	1	10/23/2024 01:54	WG2386939

⁶ Qc

Wet Chemistry by Method SM4500NH3H

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Ammonia Nitrogen	<0.100		0.100	1	10/25/2024 13:44	WG2389444

⁷ Gl

Metals (ICP) by Method 200.7

Analyte	Result mg/l	<u>Qualifier</u>	RDL mg/l	Dilution	Analysis date / time	<u>Batch</u>
Aluminum	<0.200		0.200	1	11/02/2024 14:59	WG2389608
Antimony	<0.0100		0.0100	1	11/02/2024 14:59	WG2389608
Arsenic	<0.0100		0.0100	1	11/02/2024 14:59	WG2389608
Barium	0.120		0.00500	1	11/02/2024 14:59	WG2389608
Beryllium	<0.00200		0.00200	1	11/02/2024 14:59	WG2389608
Cadmium	<0.00200		0.00200	1	11/02/2024 14:59	WG2389608
Chromium	<0.0100		0.0100	1	11/02/2024 14:59	WG2389608
Copper	<0.0100		0.0100	1	11/02/2024 14:59	WG2389608
Lead	<0.00500		0.00500	1	11/02/2024 14:59	WG2389608
Magnesium	80.8		1.00	1	11/02/2024 14:59	WG2389608
Nickel	<0.0100		0.0100	1	11/02/2024 14:59	WG2389608
Selenium	<0.0100		0.0100	1	11/02/2024 14:59	WG2389608
Silver	<0.00500		0.00500	1	11/02/2024 14:59	WG2389608
Thallium	<0.0100		0.0100	1	11/02/2024 14:59	WG2389608
Zinc	<0.0500		0.0500	1	11/02/2024 14:59	WG2389608

⁸ Al⁹ Sc

WG2389552

Gravimetric Analysis by Method 2540C

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4138403-1 10/25/24 14:00

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Total Dissolved Solids	<25.0		25.0	25.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1791673-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1791673-01 10/25/24 14:00 • (DUP) R4138403-3 10/25/24 14:00

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Total Dissolved Solids	2030	1990	1	2.24		10

L1791821-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1791821-01 10/25/24 14:00 • (DUP) R4138403-4 10/25/24 14:00

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits %
Total Dissolved Solids	388	392	1	1.03		10

Laboratory Control Sample (LCS)

(LCS) R4138403-2 10/25/24 14:00

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Total Dissolved Solids	2260	2490	110	85.0-115	

WG2387742

Gravimetric Analysis by Method 2540D

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4137310-1 10/23/24 12:56

Analyte	MB Result mg/l	MB Qualifier	MB MDL mg/l	MB RDL mg/l
Suspended Solids	<2.50		2.50	2.50

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4137310-2 10/23/24 12:56

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	LCS Qualifier
Suspended Solids	854	852	99.8	85.0-115	

WG2389879

Wet Chemistry by Method 1664B

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4138529-1 10/28/24 13:41

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Oil & Grease (Hexane Extr)	<1.40		1.40	5.00

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS) • Laboratory Control Sample Duplicate (LCSD)

(LCS) R4138529-2 10/28/24 13:41 • (LCSD) R4138529-3 10/28/24 13:41

Analyte	Spike Amount mg/l	LCS Result mg/l	LCSD Result mg/l	LCS Rec. %	LCSD Rec. %	Rec. Limits %	<u>LCS Qualifier</u>	<u>LCSD Qualifier</u>	RPD %	RPD Limits %
Oil & Grease (Hexane Extr)	40.0	39.3	42.8	98.3	107	78.0-114			8.53	20

WG2390789

Wet Chemistry by Method 2320B

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4138625-1 10/28/24 09:38

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Alkalinity	<20.0		20.0	20.0
Alkalinity,Bicarbonate	<20.0		20.0	20.0
Alkalinity,Carbonate	<20.0		20.0	20.0
Alkalinity,Hydroxide	<20.0		20.0	20.0
Phenolphthalein Alkalinity	<20.0		20.0	20.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1791821-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1791821-01 10/28/24 09:38 • (DUP) R4138625-3 10/28/24 09:38

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD	<u>DUP Qualifier</u>	DUP RPD Limits
Alkalinity	210	212	1	0.948		20

Laboratory Control Sample (LCS)

(LCS) R4138625-2 10/28/24 09:38

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Alkalinity	250	238	95.2	90.0-110	

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1791208

PAGE:

10 of 40

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4136215-1 10/22/24 13:26

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chloride	<0.325		0.325	0.800
Fluoride	<0.0947		0.0947	0.500
Nitrate	<0.379		0.379	0.500
Sulfate	<0.211		0.211	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4136215-2 10/22/24 13:40

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chloride	5.00	4.77	95.4	90.0-110	
Fluoride	5.00	4.82	96.4	90.0-110	
Nitrate	5.00	4.77	95.3	90.0-110	
Sulfate	5.00	4.95	99.1	90.0-110	

L1791208-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1791208-01 10/22/24 14:10 • (MS) R4136215-3 10/22/24 15:02 • (MSD) R4136215-4 10/22/24 15:17

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD	RPD Limits
Fluoride	5.00	2.54	6.21	6.86	73.4	86.4	1	90.0-110	J6	J6	9.96	20
Nitrate	5.00	0.626	4.92	4.91	85.9	85.7	1	90.0-110	J6	J6	0.132	20

L1791208-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1791208-01 10/22/24 14:47 • (MS) R4136215-5 10/22/24 15:47 • (MSD) R4136215-6 10/22/24 16:02

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD	RPD Limits
Sulfate	500	549	997	994	89.5	89.0	1	90.0-110	J6	J6	0.235	20

L1791208-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1791208-01 10/22/24 15:32 • (MS) R4136215-7 10/22/24 16:46 • (MSD) R4136215-8 10/22/24 17:01

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD	RPD Limits
Chloride	2500	2790	5280	5300	99.6	101	1	90.0-110			0.424	20

WG2390754

Wet Chemistry by Method 3500Cr-B

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4138464-1 10/28/24 13:40

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Chromium,Hexavalent	<0.00200		0.00200	0.00300

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4138464-2 10/28/24 13:40

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Chromium,Hexavalent	0.200	0.196	98.1	85.0-115	

L1789991-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789991-01 10/28/24 13:40 • (MS) R4138464-3 10/28/24 13:41 • (MSD) R4138464-4 10/28/24 13:41

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Chromium,Hexavalent	0.200	<0.00300	0.198	0.201	99.0	100	1	85.0-115		1.33	20

QUALITY CONTROL SUMMARY

[L1791208-01](#)¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Method Blank (MB)

(MB) R4136539-1 10/22/24 20:51

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Kjeldahl Nitrogen, TKN	<0.140		0.140	0.250

Laboratory Control Sample (LCS)

(LCS) R4136539-3 10/22/24 21:07

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Kjeldahl Nitrogen, TKN	4.00	3.92	98.0	90.0-110	

L1789286-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789286-01 10/22/24 20:55 • (MS) R4136539-4 10/22/24 21:19 • (MSD) R4136539-5 10/22/24 21:21

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Kjeldahl Nitrogen, TKN	4.00	<0.250	3.68	3.57	92.0	89.3	1	90.0-110	J6		3.03	20

L1789310-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789310-01 10/22/24 20:58 • (MS) R4136539-6 10/22/24 21:22 • (MSD) R4136539-7 10/22/24 21:23

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Kjeldahl Nitrogen, TKN	4.00	<0.250	3.94	4.01	98.5	100	1	90.0-110			1.76	20

WG2388486

Wet Chemistry by Method 4500CN-E

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4137293-1 10/24/24 17:25

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Cyanide	<0.00730		0.00730	0.0100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4137293-2 10/24/24 17:25

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Cyanide	0.100	0.0922	92.2	85.0-115	

L1791678-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1791678-02 10/24/24 17:25 • (MS) R4137293-3 10/24/24 17:25 • (MSD) R4137293-4 10/24/24 17:25

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Cyanide	0.100	0.0422	0.136	0.134	94.3	92.3	1	85.0-115			1.49	20

WG2390753

Wet Chemistry by Method 4500P-E

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4138655-1 10/28/24 17:39

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Phosphorus,Total	<0.0152		0.0152	0.0500

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4138655-2 10/28/24 17:39

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Phosphorus,Total	0.500	0.508	102	80.0-120	

L1792106-02 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1792106-02 10/28/24 17:40 • (MS) R4138655-3 10/28/24 17:40 • (MSD) R4138655-4 10/28/24 17:40

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
Phosphorus,Total	0.500	0.0734	0.588	0.593	103	104	1	80.0-120			0.787	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

L1791208

DATE/TIME:

11/02/24 23:06

PAGE:

15 of 40

WG2386970

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4138309-1 10/27/24 11:48

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
BOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1791136-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1791136-01 10/27/24 12:03 • (DUP) R4138309-3 10/27/24 12:33

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
BOD	198	181	1	8.95		20

Laboratory Control Sample (LCS)

(LCS) R4138309-2 10/27/24 11:51

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
BOD	198	<1.00	0	85-115	<u>J-</u>

WG2386972

Wet Chemistry by Method 5210 B-2016

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4138157-1 10/27/24 13:03

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
CBOD	<0.200		0.200	0.200

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1791362-01 Original Sample (OS) • Duplicate (DUP)

(OS) L1791362-01 10/27/24 13:31 • (DUP) R4138157-3 10/27/24 13:47

Analyte	Original Result mg/l	DUP Result mg/l	Dilution	DUP RPD %	<u>DUP Qualifier</u>	DUP RPD Limits
CBOD	1.84	1.85	1	0.542		20

Laboratory Control Sample (LCS)

(LCS) R4138157-2 10/27/24 13:08

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
CBOD	198	204	103	85-115	

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4137626-1 10/25/24 12:43

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
COD	<16.1		16.1	35.0

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4137626-2 10/25/24 12:43

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
COD	500	516	103	80.0-120	

L1791066-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1791066-01 10/25/24 12:43 • (MS) R4137626-3 10/25/24 12:43 • (MSD) R4137626-4 10/25/24 12:43

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
COD	500	82.9	569	575	97.1	98.4	1	80.0-120			1.10	20

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4136547-1 10/22/24 18:12

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
TOC (Total Organic Carbon)	<0.270		0.270	0.700

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4136547-2 10/22/24 18:32

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
TOC (Total Organic Carbon)	10.0	10.3	103	90.0-110	

L1789289-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789289-01 10/22/24 18:55 • (MS) R4136547-3 10/22/24 19:42 • (MSD) R4136547-4 10/22/24 20:05

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
TOC (Total Organic Carbon)	10.0	5.89	15.9	15.7	100	97.9	1	80.0-120			1.46	20

L1789324-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789324-01 10/22/24 23:33 • (MS) R4136547-5 10/22/24 20:28 • (MSD) R4136547-6 10/22/24 20:52

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits %
TOC (Total Organic Carbon)	10.0	4.65	14.6	14.7	99.8	100	1	80.0-120			0.273	20

WG238944

Wet Chemistry by Method SM4500NH3H

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4137795-1 10/25/24 12:58

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l
Ammonia Nitrogen	<0.0280		0.0280	0.100

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4137795-2 10/25/24 13:00

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Ammonia Nitrogen	5.00	5.20	104	80.0-120	

L1790361-03 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1790361-03 10/25/24 13:09 • (MS) R4137795-3 10/25/24 13:02 • (MSD) R4137795-4 10/25/24 13:03

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits
Ammonia Nitrogen	5.00	<0.100	5.10	5.10	101	101	1	80.0-120			0.000	20

L1790361-04 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1790361-04 10/25/24 13:10 • (MS) R4137795-5 10/25/24 13:05 • (MSD) R4137795-6 10/25/24 13:07

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits %	<u>MS Qualifier</u>	<u>MSD Qualifier</u>	RPD %	RPD Limits
Ammonia Nitrogen	5.00	<0.100	5.09	5.09	100	100	1	80.0-120			0.000	20

ACCOUNT:

CSWR - Texas Utility Operating Company

PROJECT:

SDG:

DATE/TIME:

L1791208

PAGE:

20 of 40

QUALITY CONTROL SUMMARY

[L1791208-01](#)

Method Blank (MB)

(MB) R4141212-1 11/02/24 14:32

Analyte	MB Result mg/l	<u>MB Qualifier</u>	MB MDL mg/l	MB RDL mg/l	¹ Cp
Aluminum	<0.0592		0.0592	0.200	
Antimony	<0.00398		0.00398	0.0100	
Arsenic	<0.00645		0.00645	0.0100	
Barium	<0.000795		0.000795	0.00500	
Beryllium	<0.000401		0.000401	0.00200	
Cadmium	<0.000552		0.000552	0.00200	
Chromium	<0.00163		0.00163	0.0100	
Copper	<0.00226		0.00226	0.0100	
Lead	<0.00227		0.00227	0.00500	
Magnesium	0.120	<u>J</u>	0.115	1.00	
Nickel	0.00230	<u>J</u>	0.00182	0.0100	
Selenium	<0.00616		0.00616	0.0100	
Silver	<0.00131		0.00131	0.00500	
Thallium	<0.00460		0.00460	0.0100	
Zinc	<0.00578		0.00578	0.0500	

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

Laboratory Control Sample (LCS)

(LCS) R4141212-2 11/02/24 14:34

Analyte	Spike Amount mg/l	LCS Result mg/l	LCS Rec. %	Rec. Limits %	<u>LCS Qualifier</u>
Aluminum	10.0	10.2	102	85.0-115	
Antimony	1.00	0.977	97.7	85.0-115	
Arsenic	1.00	1.00	100	85.0-115	
Barium	1.00	1.00	100	85.0-115	
Beryllium	1.00	1.00	100	85.0-115	
Cadmium	1.00	0.980	98.0	85.0-115	
Chromium	1.00	0.994	99.4	85.0-115	
Copper	1.00	0.971	97.1	85.0-115	
Lead	1.00	0.984	98.4	85.0-115	
Magnesium	10.0	10.0	100	85.0-115	
Nickel	1.00	0.966	96.6	85.0-115	
Selenium	1.00	1.02	102	85.0-115	
Silver	0.200	0.200	99.9	85.0-115	
Thallium	1.00	0.980	98.0	85.0-115	
Zinc	1.00	1.02	102	85.0-115	

QUALITY CONTROL SUMMARY

L1791208-01

L1789040-01 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1789040-01 11/02/24 14:35 • (MS) R4141212-4 11/02/24 14:39 • (MSD) R4141212-5 11/02/24 14:40

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	MS Qualifier	MSD Qualifier	RPD	RPD Limits
Aluminum	10.0	<0.200	10.1	10.0	101	100	1	70.0-130			1.12	20
Antimony	1.00	<0.0100	0.985	0.971	98.5	97.1	1	70.0-130			1.40	20
Arsenic	1.00	<0.0100	1.00	0.992	100	99.2	1	70.0-130			1.20	20
Barium	1.00	0.0125	1.00	0.997	99.1	98.5	1	70.0-130			0.641	20
Beryllium	1.00	<0.00200	0.989	0.980	98.9	98.0	1	70.0-130			0.911	20
Cadmium	1.00	<0.00200	0.971	0.963	97.1	96.3	1	70.0-130			0.826	20
Chromium	1.00	<0.0100	0.984	0.973	98.4	97.3	1	70.0-130			1.15	20
Copper	1.00	<0.0100	0.967	0.956	96.7	95.6	1	70.0-130			1.17	20
Lead	1.00	<0.00500	0.975	0.975	97.5	97.5	1	70.0-130			0.0283	20
Magnesium	10.0	1.01	10.9	10.8	98.8	97.6	1	70.0-130			1.14	20
Nickel	1.00	<0.0100	0.954	0.953	95.0	94.9	1	70.0-130			0.0399	20
Selenium	1.00	<0.0100	1.02	1.01	102	101	1	70.0-130			0.863	20
Silver	0.200	<0.00500	0.199	0.198	99.3	99.0	1	70.0-130			0.277	20
Thallium	1.00	<0.0100	0.973	0.975	97.3	97.5	1	70.0-130			0.153	20
Zinc	1.00	0.0572	1.08	1.06	102	101	1	70.0-130			1.54	20

¹Cp²Tc³Ss⁴Cn⁵Sr⁶Qc⁷Gl⁸Al⁹Sc

L1791234-04 Original Sample (OS) • Matrix Spike (MS) • Matrix Spike Duplicate (MSD)

(OS) L1791234-04 11/02/24 14:42 • (MS) R4141212-6 11/02/24 14:44 • (MSD) R4141212-7 11/02/24 14:45

Analyte	Spike Amount mg/l	Original Result mg/l	MS Result mg/l	MSD Result mg/l	MS Rec. %	MSD Rec. %	Dilution	Rec. Limits	MS Qualifier	MSD Qualifier	RPD	RPD Limits
Aluminum	10.0	<0.200	9.97	9.98	99.7	99.8	1	70.0-130			0.0746	20
Antimony	1.00	<0.0100	0.965	0.961	96.5	96.1	1	70.0-130			0.358	20
Arsenic	1.00	<0.0100	0.982	0.993	98.2	99.3	1	70.0-130			1.06	20
Barium	1.00	<0.00500	0.985	0.986	98.2	98.4	1	70.0-130			0.173	20
Beryllium	1.00	<0.00200	0.979	0.981	97.9	98.1	1	70.0-130			0.161	20
Cadmium	1.00	<0.00200	0.957	0.959	95.7	95.9	1	70.0-130			0.177	20
Chromium	1.00	<0.0100	0.968	0.977	96.8	97.7	1	70.0-130			0.908	20
Copper	1.00	<0.0100	0.950	0.950	94.7	94.7	1	70.0-130			0.0209	20
Lead	1.00	<0.00500	0.966	0.967	96.6	96.7	1	70.0-130			0.108	20
Magnesium	10.0	<1.00	9.79	9.81	96.3	96.6	1	70.0-130			0.269	20
Nickel	1.00	<0.0100	0.942	0.947	93.9	94.3	1	70.0-130			0.489	20
Selenium	1.00	<0.0100	0.996	1.00	99.6	100	1	70.0-130			0.784	20
Silver	0.200	<0.00500	0.196	0.197	97.9	98.4	1	70.0-130			0.445	20
Thallium	1.00	<0.0100	0.962	0.967	96.2	96.7	1	70.0-130			0.542	20
Zinc	1.00	0.147	1.15	1.15	100	100	1	70.0-130			0.282	20

GLOSSARY OF TERMS

Guide to Reading and Understanding Your Laboratory Report

The information below is designed to better explain the various terms used in your report of analytical results from the Laboratory. This is not intended as a comprehensive explanation, and if you have additional questions please contact your project representative.

Results Disclaimer - Information that may be provided by the customer, and contained within this report, include Permit Limits, Project Name, Sample ID, Sample Matrix, Sample Preservation, Field Blanks, Field Spikes, Field Duplicates, On-Site Data, Sampling Collection Dates/Times, and Sampling Location. Results relate to the accuracy of this information provided, and as the samples are received.

Abbreviations and Definitions

MDL	Method Detection Limit.	¹ Cp
RDL	Reported Detection Limit.	² Tc
Rec.	Recovery.	³ Ss
RPD	Relative Percent Difference.	⁴ Cn
SDG	Sample Delivery Group.	⁵ Sr
Analyte	The name of the particular compound or analysis performed. Some Analyses and Methods will have multiple analytes reported.	⁶ Qc
Dilution	If the sample matrix contains an interfering material, the sample preparation volume or weight values differ from the standard, or if concentrations of analytes in the sample are higher than the highest limit of concentration that the laboratory can accurately report, the sample may be diluted for analysis. If a value different than 1 is used in this field, the result reported has already been corrected for this factor.	⁷ GI
Limits	These are the target % recovery ranges or % difference value that the laboratory has historically determined as normal for the method and analyte being reported. Successful QC Sample analysis will target all analytes recovered or duplicated within these ranges.	⁸ AI
Original Sample	The non-spiked sample in the prep batch used to determine the Relative Percent Difference (RPD) from a quality control sample. The Original Sample may not be included within the reported SDG.	⁹ Sc
Qualifier	This column provides a letter and/or number designation that corresponds to additional information concerning the result reported. If a Qualifier is present, a definition per Qualifier is provided within the Glossary and Definitions page and potentially a discussion of possible implications of the Qualifier in the Case Narrative if applicable.	
Result	The actual analytical final result (corrected for any sample specific characteristics) reported for your sample. If there was no measurable result returned for a specific analyte, the result in this column may state "ND" (Not Detected) or "BDL" (Below Detectable Levels). The information in the results column should always be accompanied by either an MDL (Method Detection Limit) or RDL (Reporting Detection Limit) that defines the lowest value that the laboratory could detect or report for this analyte.	
Uncertainty (Radiochemistry)	Confidence level of 2 sigma.	
Case Narrative (Cn)	A brief discussion about the included sample results, including a discussion of any non-conformances to protocol observed either at sample receipt by the laboratory from the field or during the analytical process. If present, there will be a section in the Case Narrative to discuss the meaning of any data qualifiers used in the report.	
Quality Control Summary (Qc)	This section of the report includes the results of the laboratory quality control analyses required by procedure or analytical methods to assist in evaluating the validity of the results reported for your samples. These analyses are not being performed on your samples typically, but on laboratory generated material.	
Sample Chain of Custody (Sc)	This is the document created in the field when your samples were initially collected. This is used to verify the time and date of collection, the person collecting the samples, and the analyses that the laboratory is requested to perform. This chain of custody also documents all persons (excluding commercial shippers) that have had control or possession of the samples from the time of collection until delivery to the laboratory for analysis.	
Sample Results (Sr)	This section of your report will provide the results of all testing performed on your samples. These results are provided by sample ID and are separated by the analyses performed on each sample. The header line of each analysis section for each sample will provide the name and method number for the analysis reported.	
Sample Summary (Ss)	This section of the Analytical Report defines the specific analyses performed for each sample ID, including the dates and times of preparation and/or analysis.	

Qualifier Description

J	The identification of the analyte is acceptable; the reported value is an estimate.
J6	The sample matrix interfered with the ability to make any accurate determination; spike value is low.
J-	The associated batch QC was outside the lower control limits; associated data has a potential negative bias.

ACCREDITATIONS & LOCATIONS

Pace Analytical National 12065 Lebanon Rd Mount Juliet, TN 37122

Alabama	40660	Nebraska	NE-OS-15-05
Alaska	17-026	Nevada	TN000032021-1
Arizona	AZ0612	New Hampshire	2975
Arkansas	88-0469	New Jersey—NELAP	TN002
California	2932	New Mexico ¹	TN00003
Colorado	TN00003	New York	11742
Connecticut	PH-0197	North Carolina	Env375
Florida	E87487	North Carolina ¹	DW21704
Georgia	NELAP	North Carolina ³	41
Georgia ¹	923	North Dakota	R-140
Idaho	TN00003	Ohio—VAP	CL0069
Illinois	200008	Oklahoma	9915
Indiana	C-TN-01	Oregon	TN200002
Iowa	364	Pennsylvania	68-02979
Kansas	E-10277	Rhode Island	LA000356
Kentucky ^{1,6}	KY90010	South Carolina	84004002
Kentucky ²	16	South Dakota	n/a
Louisiana	AI30792	Tennessee ^{1,4}	2006
Louisiana	LA018	Texas	T104704245-20-18
Maine	TN00003	Texas ⁵	LAB0152
Maryland	324	Utah	TN000032021-11
Massachusetts	M-TN003	Vermont	VT2006
Michigan	9958	Virginia	110033
Minnesota	047-999-395	Washington	C847
Mississippi	TN00003	West Virginia	233
Missouri	340	Wisconsin	998093910
Montana	CERT0086	Wyoming	A2LA
A2LA – ISO 17025	1461.01	AIHA-LAP,LLC EMLAP	100789
A2LA – ISO 17025 ⁵	1461.02	DOD	1461.01
Canada	1461.01	USDA	P330-15-00234
EPA-Crypto	TN00003		

Pace Analytical Services, LLC -Dallas 400 W. Bethany Drive Suite 190 Allen, TX 75013

Arkansas	88-0647	Kansas	E10388
Florida	E871118	Texas	T104704232-23-39
Iowa	408	Oklahoma	8727
Louisiana	30686		

¹ Drinking Water ² Underground Storage Tanks ³ Aquatic Toxicity ⁴ Chemical/Microbiological ⁵ Mold ⁶ Wastewater n/a Accreditation not applicable

* Not all certifications held by the laboratory are applicable to the results reported in the attached report.

* Accreditation is only applicable to the test methods specified on each scope of accreditation held by Pace Analytical.

¹ Cp

² Tc

³ Ss

⁴ Cn

⁵ Sr

⁶ Qc

⁷ Gl

⁸ Al

⁹ Sc

Company Name/Address: CSWR - Texas Utility Operating Company 211 Douglas St.			Billing Information: Krista Oberneufemann 1650 Des Peres Rd, Ste 303 Des Peres, MO 63131			Pres Chk	Analysis / Container / Preservative						Chain of Custody	Page <u>1</u> of <u>2</u>			
Report to: Callie Derzapf			Email To: cswr@njbsoft.com;callie@pwg.services;jmh039										Pace PEOPLE ADVANCING SCIENCE				
Project Description: Aransas Bay Utilities		City/State Collected:				Please Circle: PT MT CT ET							ALLEN, TX 400 W. Bethany Drive Suite 190 Allen, TX 75013 Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace Terms and Conditions found at: https://info.pacelabs.com/hubfs/pas-standard-terms.pdf				
Phone: 361-412-8924 1-903-816-9056	Client Project #		Lab Project # MIDWATWMO-ARABAYRTX													SDG # U791208	
Collected by (print): Jonathan Helm	Site/Facility ID #		P.O. #													Table #	
Collected by (signature): JH	Rush? (Lab MUST Be Notified) <input type="checkbox"/> Same Day <input type="checkbox"/> Five Day <input checked="" type="checkbox"/> Next Day <input type="checkbox"/> 5 Day (Rad Only) <input type="checkbox"/> Two Day <input type="checkbox"/> 10 Day (Rad Only) <input type="checkbox"/> Three Day		Quote #			Date Results Needed [10/23/24]	No. of Cntrs										Acctnum: MIDWATWMO
Immediately Packed on Ice N <input type="checkbox"/> Y <input checked="" type="checkbox"/>	Sample ID	Comp/Grab	Matrix *	Depth	Date	Time											Template: T261605
RD Brine	Grab	WW		10/21/24	0830	12	X	X	X	X	X	X	X	X	COD; NH3; TKN 250mlHDPE-H2SO4		
															Metals 250mlHDPE HNO3		
															Remarks Sample # (lab only)		
* Matrix: SS - Soil AIR - Air F - Filter GW - Groundwater B - Bioassay WW - WasteWater DW - Drinking Water OT - Other _____	TDS - 969.4 pH 7.06 Temp 78.4 Total Residual - 0.0 Flow Other													Sample Receipt Checklist COC Seal Present/Intact: <input type="checkbox"/> Y <input type="checkbox"/> N COC Signed/Accurate: <input type="checkbox"/> Y <input type="checkbox"/> N Bottles arrive intact: <input type="checkbox"/> Y <input type="checkbox"/> N Correct bottles used: <input type="checkbox"/> Y <input type="checkbox"/> N Sufficient volume sent: <input type="checkbox"/> Y <input type="checkbox"/> N VOA Zero Headspace: <input type="checkbox"/> Y <input type="checkbox"/> N Preservation Correct/Checked: <input type="checkbox"/> Y <input type="checkbox"/> N RAD Screen <0.5 mR/hr: <input type="checkbox"/> Y <input type="checkbox"/> N			
Relinquished by : (Signature) JH	Date: 10/21/24	Time: 1002	Received by: (Signature) JH			Trip Blank Received: Yes / No HCL / MeOH TBR											
Relinquished by : (Signature) JH	Date: 10/21/24	Time: 1700	Received by: (Signature) JH			Temp: °C	Bottles Received:	If preservation required by Login: Date/Time									
Relinquished by : (Signature) Fedex	Date: 10/22/24	Time: 0900	Received for lab by: (Signature) Alysa Fernandez/PPE			Date: 10/22/24	Time: 0900	Hold: _____ Condition: NCF / OK									

Company Name/Address: CSWR - Texas Utility Operating Company 211 Douglas St. Allen, TX 75013			Billing Information: Krista Oberneufemann 1650 Des Peres Rd, Ste 303 Des Peres, MO 63131			Pres Chk	Analysis / Container / Preservative						Chain of Custody	Page <u>2</u> of <u>2</u>		
Report to: Callie Derzapf			Email To: cswr@njbsoft.com;callie@pwg.services;jmh039													
Project Description: Aransas Bay Utilities		City/State Collected:				Please Circle: PT MT CT ET										
Phone: <u>361-412-8924</u> <u>1-903-816-9056</u>	Client Project #			Lab Project # MIDWATWMO-ARABAYRTX												
Collected by (print): <u>Jonathan Helm</u>	Site/Facility ID #			P.O. #												
Collected by (signature): <u>Jonathan Helm</u>	Rush? (Lab MUST Be Notified)			Quote #												
Immediately Packed on Ice N <u>Y</u>	<input checked="" type="checkbox"/> Same Day <input type="checkbox"/> Five Day <input checked="" type="checkbox"/> Next Day <input type="checkbox"/> 5 Day (Rad Only) <input type="checkbox"/> Two Day <input type="checkbox"/> 10 Day (Rad Only) <input type="checkbox"/> Three Day			Date Results Needed <u>10/23/24</u>			No. of Cntrs									
Sample ID	Comp/Grab	Matrix *	Depth	Date	Time											
80 Brine	Grab	WW		10/21/24	0830	12	X								01	
Remarks:																
* Matrix: SS - Soil AIR - Air F - Filter GW - Groundwater B - Bioassay WW - WasteWater DW - Drinking Water OT - Other _____						TDS - 969.4 pH 7.06 Temp 78.4 Total Residual - 0.0 Flow _____ Other _____									Sample Receipt Checklist	
Samples returned via: <u>UPS</u> <u>FedEx</u> <u>Courier</u>			Tracking #												COC Seal Present/Intact: <u>NP</u> Y <u>N</u> COC Signed/Accurate: <u>Y</u> <u>N</u> Bottles arrive intact: <u>Y</u> <u>N</u> Correct bottles used: <u>Y</u> <u>N</u> Sufficient volume sent: <u>Y</u> <u>N</u> <u>If Applicable</u> VOA Zero Headspace: <u>Y</u> <u>N</u> Preservation Correct/Checked: <u>Y</u> <u>N</u> RAD Screen <0.5 mR/hr: <u>Y</u> <u>N</u>	
Relinquished by : (Signature) <u>dtm</u>	Date: <u>10/21/24</u>	Time: <u>1002</u>	Received by: (Signature) <u>dtm</u>			Trip Blank Received: Yes / No HCL / MeOH TBR									If preservation required by Login: Date/Time	
Relinquished by : (Signature) <u>dtm</u>	Date: <u>10/21/24</u>	Time: <u>1700</u>	Received by: (Signature) <u>dtm</u>			Temp: °C Bottles Received:										
Relinquished by : (Signature) <u>FedEx</u>	Date: <u>10/22/24</u>	Time: <u>0900</u>	Received for lab by: (Signature) <u>andrea (Athena) Ramos</u>			Date: <u>10/22/24</u>	Time: <u>0900</u>							Hold:	Condition: NCF / OK	



ORIGIN ID: TCLA (205) 614-6630
SAMPLE RECEIVING
PACE ANALYTICAL LLC
1168 WHIGHAM PLACE
O TUSCALOOSA, AL 35401
UNITED STATES US

ORIGIN ID: VCTA (361) 446-0565

PACE
1606 E BRAZOS ST.
SUITE D
VICTORIA, TX 77901
UNITED STATES US

To SAMPLE RECEIVING

PACE
400 W. BETHANY DR.
SUITE 190
ALLEN TX 75013
(972) 727-1123

REF: PO:

RMA:

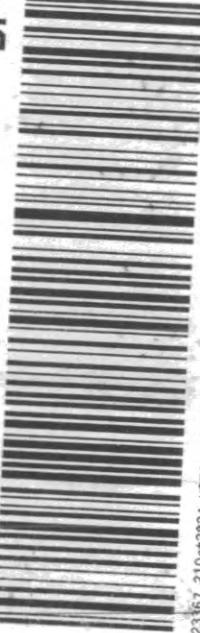
DEPT:

SHIP DATE ACWGT: 4 CAD: 08/10/08	SHIP DATE ACWGT: 18SEP24 CAD: 09/17/26/CAFE3554
BILL SENDER	
FedEx Express 	

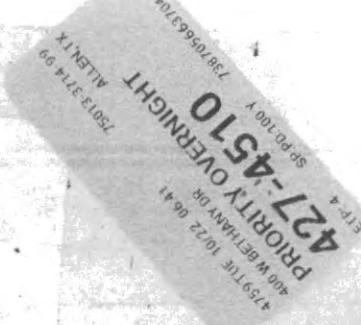
RETURNS MAN-ERT
TUE - 22 OCT AA
PRIORITY OVERNIGHT

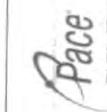
AD DNEA

75013
TX-US
DFW



392367 21Oct2024 VCTA 58165/4FB6/SFES





DC#_Title: ENV-FRM-ALLE-0017 v15_Sample Condition Upon Receipt
Effective Date: 12/18/2023

Sample Condition Upon Receipt

Client Name:	<u>CSWU - Texas Utility</u>	<input type="checkbox"/> Ft Worth <input type="checkbox"/> Corpus Christi <input type="checkbox"/> Austin
Courier:	FedEx <input checked="" type="checkbox"/> UPS <input type="checkbox"/> USPS <input type="checkbox"/> Client LSO <input type="checkbox"/> PACE <input type="checkbox"/> Other: <u>3704</u>	Project Work order (place label):
Tracking #:		
Custody Seal on Cooler/Box:	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Received on ice:	Wet <input checked="" type="checkbox"/> Blue <input type="checkbox"/> No <input type="checkbox"/>	Ice <input type="checkbox"/>
Receiving Lab 1 Thermometer Used:	<u>18</u>	Cooler Temp °C: <u>09</u> (Recorded) <u>00</u> (Correction Factor) <u>0.9</u> (Actual)
Receiving Lab 2 Thermometer Used:	<u>00</u>	Cooler Temp °C: <u>00</u> (Recorded) <u>00</u> (Correction Factor) <u>0.9</u> (Actual)

Chain of Custody relinquished

Sampler name & signature on COC	Yes <input type="checkbox"/> No <input type="checkbox"/>
Short HT analyses (<72 hrs)	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>

Temperature should be above freezing to 6°C unless collected same day as receipt in which evidence of cooling is acceptable.

Triage Person: <u>All</u>	Date: <u>10/22</u>	Sufficient Volume received <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>
Correct Container used <input checked="" type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Container Intact <input checked="" type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/>	
Sample pH Acceptable <input checked="" type="checkbox"/>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> NA <input type="checkbox"/>	
pH Strips: <u>0402007</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA <input type="checkbox"/>	
Residual Chlorine Present <input checked="" type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA <input type="checkbox"/>	
Cl Strips: <u>4840</u>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> NA <input type="checkbox"/>	
Sulfide Present <input checked="" type="checkbox"/>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA <input type="checkbox"/>	
Lead Acetate Strips: <u>4802</u>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>	
Are soil samples (volatiles, TPH) received in 5035A Kits (not applicable to TCLP VOA or PST Program TPH)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>	
Unpreserved 5035A soil frozen within 48 hrs	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>	
Headspace in VOA (>6mm)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>	
Project sampled in USDA Regulated Area outside of Texas	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> NA <input checked="" type="checkbox"/>	
State Sampled:		
Non-Conformance(s):	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	

Login Person: <u>je</u>	Date: <u>10/22</u>
-------------------------	--------------------

Labeling Person (if different than log-in): _____ Date: _____



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

October 29, 2024

Tim Gramling
Pace Analytical Allen
400 West Bethany Drive
Suite 190
Allen, TX 75013

RE: Project: L1791208 WG2387192 ARANSAS BAY
Pace Project No.: 40286273

Dear Tim Gramling:

Enclosed are the analytical results for sample(s) received by the laboratory on October 23, 2024. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Green Bay

If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Cindy Varga
cindy.varga@pacelabs.com
(920)469-2436
Project Manager

Enclosures

cc: Client Services, Pace Analytical Allen



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

CERTIFICATIONS

Project: L1791208 WG2387192 ARANSAS BAY
Pace Project No.: 40286273

Pace Analytical Services Green Bay

1241 Bellevue Street, Green Bay, WI 54302
Florida/NELAP Certification #: E87948
Illinois Certification #: 200050
Kentucky UST Certification #: 82
Louisiana Certification #: 04168
Minnesota Certification #: 055-999-334
New York Certification #: 12064
North Dakota Certification #: R-150

South Carolina Certification #: 83006001
Texas Certification #: T104704529-21-8
Virginia VELAP Certification ID: 11873
Wisconsin Certification #: 405132750
Wisconsin DATCP Certification #: 105-444
USDA Soil Permit #: P330-21-00008
Federal Fish & Wildlife Permit #: 51774A

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE SUMMARY

Project: L1791208 WG2387192 ARANSAS BAY

Pace Project No.: 40286273

Lab ID	Sample ID	Matrix	Date Collected	Date Received
40286273001	RO BRINE	Water	10/21/24 08:30	10/23/24 09:15

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

SAMPLE ANALYTE COUNT

Project: L1791208 WG2387192 ARANSAS BAY
Pace Project No.: 40286273

Lab ID	Sample ID	Method	Analysts	Analytics Reported
40286273001	RO BRINE	EPA 1631E	MRP	1

PASI-G = Pace Analytical Services - Green Bay

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

ANALYTICAL RESULTS

Project: L1791208 WG2387192 ARANSAS BAY

Pace Project No.: 40286273

Sample: RO BRINE	Lab ID: 40286273001	Collected: 10/21/24 08:30	Received: 10/23/24 09:15	Matrix: Water				
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
1631E Mercury, Low Level	Analytical Method: EPA 1631E Preparation Method: EPA 1631E Pace Analytical Services - Green Bay							
Mercury	ND	ng/L	0.50	1	10/24/24 11:45	10/25/24 18:02	7439-97-6	

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALITY CONTROL DATA

Project: L1791208 WG2387192 ARANSAS BAY

Pace Project No.: 40286273

QC Batch:	488252	Analysis Method:	EPA 1631E
QC Batch Method:	EPA 1631E	Analysis Description:	1631E Mercury
		Laboratory:	Pace Analytical Services - Green Bay
Associated Lab Samples:	40286273001		

METHOD BLANK: 2796082 Matrix: Water

Associated Lab Samples: 40286273001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/25/24 16:07	

METHOD BLANK: 2796083 Matrix: Water

Associated Lab Samples: 40286273001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/25/24 17:12	

METHOD BLANK: 2796084 Matrix: Water

Associated Lab Samples: 40286273001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.50	10/25/24 18:12	

METHOD BLANK: 2796085 Matrix: Water

Associated Lab Samples: 40286273001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Mercury	ng/L	ND	0.53	10/25/24 16:12	

LABORATORY CONTROL SAMPLE: 2796086

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	5.03	101	79-121	

LABORATORY CONTROL SAMPLE: 2796087

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Mercury	ng/L	5	4.91	98	79-121	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALITY CONTROL DATA

Project: L1791208 WG2387192 ARANSAS BAY

Pace Project No.: 40286273

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 2798017			2798018									
Parameter	Units	40285852003 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Max Qual
			2	2	3.50	3.50	124	124	75-125	0	24	
Mercury	ng/L	1.03										

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 2798019			2798020									
Parameter	Units	35912305002 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Max Qual
			21.1	21.1	50.2	48.1	119	109	75-125	4	24	
Mercury	ng/L	25.2										

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



QUALIFIERS

Project: L1791208 WG2387192 ARANSAS BAY

Pace Project No.: 40286273

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Reported results are not rounded until the final step prior to reporting. Therefore, calculated parameters that are typically reported as "Total" may vary slightly from the sum of the reported component parameters.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.



Pace Analytical Services, LLC
1241 Bellevue Street - Suite 9
Green Bay, WI 54302
(920)469-2436

QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: L1791208 WG2387192 ARANSAS BAY
Pace Project No.: 40286273

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
40286273001	RO BRINE	EPA 1631E	488252	EPA 1631E	488641

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

40286273

CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Section A**Required Client Information:**

Company: Pace Analytical

Address: 400 W. Bethany Drive Suite 190

Allen, TX 75013

Email: Dallas_Sub@pacelabs.com

Phone: (972) 727-1123 Fax

Requested Due Date: 29-Oct

Section B**Required Project Information:**

Report To: Pace Analytical Subout Team

Copy To:

Purchase Order #: L1791208

Project Name: Aransas Bay Utilities

Project #: 38076

Section C**Invoice Information:**

Attention: Callie Derzapf

Company Name:

Address:

Pace Quote:

Pace Project Manager: Cindy Varga

Pace Profile #: 38076

Page : 1 Of 1

Regulatory Agency

State / Location

MO

ITEM #	SAMPLE ID One Character per box. (A-Z, 0-9 /, -) Sample Ids must be unique	MATRIX Drinking Water Water Waste Water Product Soil/Solid Oil Wipe Air Other Tissue	CODE DW WT WW P SL OL WP AR OT TS	MATRIX CODE (see valid codes to left) SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives							Analyses Test Y/N	Requested Analysis Filtered (Y/N)							Residual Chlorine (Y/N)
					START		END				H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Other	Low Level Hg	PCP	PCB	PCN	PCB	PCP	PCN		
					DATE	TIME	DATE	TIME																		
1	RO BRINE	WT			21-Oct	8:30			1	1							X								OOI	
2																										
3																										
4																										
5																										
6																										
7																										
8																										
9																										
10																										
11																										
12																										

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS
Pace Analytical Batch: WG2387192	John Hansen Ramos/Pace	10/27/04	1700	FedEx	10/28/04	09:15	fedEx
Pace Analytical SDGs: L1791208				Kris Stubbs-Pace	10/28/04	09:15	24.0 N N Y
Location: Green Bay, WI 54302							

SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER:

SIGNATURE of SAMPLER:

DATE Signed:

TEMP in C	
Received on Ice (Y/N)	
Custody Sealed (Y/N)	
Cooler (Y/N)	
Samples Intact (Y/N)	

Page 10 of 12

Effective Date: 8/16/2022

Client Name: Pace TX

All containers needing preservation have been checked and noted below:

Lab Lot# of pH paper:

Sample Preservation Receipt Form

Project #

40280273 Yes NoN/A

Lab Std #ID of preservation (if pH adjusted):

Initial when completed:

Date/
Time:

Pace Lab #	AG1U	BG1U	AG1H	AG4S	AG5U	AG2S	BG3U	BP1U	BP3U	BP3B	BP3N	BP3S	BP2Z	VG9C	DG9T	VG9U	VG9H	VG9M	VG9D	JGFU	JG9U	WG FU	WPFU	SP5T	ZPLC	GN 1	GN 2	VOA Vials (>6mm)*	H2SO4 pH ≤2	NaOH+Zn Act pH ≥9	NaOH pH ≥12	HNO3 pH ≤2	pH after adjusted	Volume (mL)
001																												2.5 / 5						
002																												2.5 / 5						
003																												2.5 / 5						
004																												2.5 / 5						
005																												2.5 / 5						
006																												2.5 / 5						
007																												2.5 / 5						
008																												2.5 / 5						
009																												2.5 / 5						
010																												2.5 / 5						
011																												2.5 / 5						
012																												2.5 / 5						
013																												2.5 / 5						
014																												2.5 / 5						
015																												2.5 / 5						
016																												2.5 / 5						
017																												2.5 / 5						
018																												2.5 / 5						
019																												2.5 / 5						
020																												2.5 / 5						

Exceptions to preservation check: VOA, Coliform, TOC, TOX, TOH, O&G, WI DRO, Phenolics, Other:

Headspace in VOA Vials (>6mm) : Yes No N/A

*If yes look in headspace column

AG1U	1 liter amber glass
BG1U	1 liter clear glass
AG1H	1 liter amber glass HCl
AG4S	125 mL amber glass H2SO4
AG5U	100 mL amber glass unpres
AG2S	500 mL amber glass H2SO4
BG3U	250 mL clear glass unpres

BP1U	1 liter plastic unpres
BP3U	250 mL plastic unpres
BP3B	250 mL plastic NaOH
BP3N	250 mL plastic HNO3
BP3S	250 mL plastic H2SO4
BP2Z	500 mL plastic NaOH + Zn

VG9C	40 mL clear ascorbic w/ HCl
DG9T	40 mL amber Na Thio
VG9U	40 mL clear vial unpres
VG9H	40 mL clear vial HCl
VG9M	40 mL clear vial MeOH
VG9D	40 mL clear vial DI

JGFU	4 oz amber jar unpres
JG9U	9 oz amber jar unpres
WG FU	4 oz clear jar unpres
WPFU	4 oz plastic jar unpres
SP5T	120 mL plastic Na Thiosulfate
ZPLC	ziploc bag
GN 1	
GN 2	

Sample Condition Upon Receipt Form (SCUR)

Project #:

Client Name: Pace TXCourier: CS Logistics Fed Ex Speedee UPS Waltco
 Client Pace Other: _____Tracking #: 417112624095Custody Seal on Cooler/Box Present: yes no Seals intact: yes noCustody Seal on Samples Present: yes no Seals intact: yes noPacking Material: Bubble Wrap Bubble Bags None OtherThermometer Used SR - 123 Type of Ice: Wet Blue Dry None Meltwater OnlyCooler Temperature Uncorr: 24.0 /Corr: 24.0Temp Blank Present: yes no Biological Tissue is Frozen: yes no

Temp should be above freezing to 6°C.

Biota Samples may be received at ≤ 0°C if shipped on Dry Ice.

Person examining contents:

Date: 10/08/21 Initials: KVSLabeled By Initials: G

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name & Signature on COC:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	4. <u>IRWNO KVS 10/08/21</u>
Samples Arrived within Hold Time: - DI VOA Samples frozen upon receipt	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Yes <input type="checkbox"/> No	5. Date/Time:
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7.
Sufficient Volume: For Analysis: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No MS/MSD: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	8.	
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	9.
Correct Type: <u>Pace Green Bay, Pace IR, Non-Pace</u>		
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC: -Includes date/time/ID/Analysis	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
Matrix: <u>WT</u>		
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased):		

Client Notification/ Resolution:

If checked, see attached form for additional comments

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____

PM Review is documented electronically in LIMs. By releasing the project, the PM acknowledges they have reviewed the sample log.

Page 3 of 2

Comisión de Calidad Ambiental del Estado de Texas



AVISO DE RECIBO DE LA SOLICITUD Y EL INTENTO DE OBTENER PERMISO PARA LA CALIDAD DEL AGUA RENOVACION

PERMISO NO. WQooo4956000

SOLICITUD. CSWR-Texas Utility Operating Company, LLC, 1630 Des Peres Road, Suite 140, Des Peres, Missouri 63131ha solicitado a la Comisión de Calidad Ambiental del Estado de Texas (TCEQ) para renovar el Permiso No. WQooo4956000 (EPA I.D. No. TX0133051) del Sistema de Eliminación de Descargas de Contaminantes de Texas (TPDES) para autorizar la descarga de aguas residuales tratadas en un volumen que no sobrepasa un flujo promedio diario de 61,000 galones por día. La planta está ubicada 119 Live Oak Drive, en la ciudad de Rockport, en el Condado de Aransas, Texas. La ruta de descarga es del sitio de la planta a Emisario 001 directamente a Copano Bay/Port Bay/Mission Bay. La TCEQ recibió esta solicitud el 14 de noviembre de 2024. La solicitud para el permiso está disponible para leerla y copiarla en Aransas Biblioteca Pública del Condado, cerca de la recepción, 701 East Mimosa Street, Rockport, Texas. , La solicitud (cualquier actualización y aviso inclusive) está disponible electrónicamente en la siguiente página web: <https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications>. Este enlace a un mapa electrónico de la ubicación general del sitio o de la instalación es proporcionado como una cortesía y no es parte de la solicitud o del aviso. Para la ubicación exacta, consulte la solicitud.

<https://gisweb.tceq.texas.gov/LocationMapper/?marker=-96.991666,28.142222&level=18>

AVISO ADICIONAL. El Director Ejecutivo de la TCEQ ha determinado que la solicitud es administrativamente completa y conducirá una revisión técnica de la solicitud. Después de completar la revisión técnica, el Director Ejecutivo puede preparar un borrador del permiso y emitirá una Decisión Preliminar sobre la solicitud. **El aviso de la solicitud y la decisión preliminar serán publicados y enviado a los que están en la lista de correo de las personas a lo largo del condado que desean recibir los avisos y los que están en la lista de correo que desean recibir avisos de esta solicitud. El aviso dará la fecha límite para someter comentarios públicos.**

COMENTARIO PUBLICO / REUNION PUBLICA. Usted puede presentar

comentarios públicos o pedir una reunión pública sobre esta solicitud. El propósito de una reunión pública es dar la oportunidad de presentar comentarios o hacer preguntas acerca de la solicitud. La TCEQ realiza una reunión pública si el Director Ejecutivo determina que hay un grado de interés público suficiente en la solicitud o si un legislador local lo pide. Una reunión pública no es una audiencia administrativa de lo contencioso.

OPORTUNIDAD DE UNA AUDIENCIA ADMINISTRATIVA DE LO CONTENCIOSO. Después del plazo para presentar comentarios públicos, el Director Ejecutivo considerará todos los comentarios apropiados y preparará una respuesta a todo los comentarios públicos esenciales, pertinentes, o significativos. **A menos que la solicitud haya sido referida directamente a una audiencia administrativa de lo contencioso, la respuesta a los comentarios y la decisión del Director Ejecutivo sobre la solicitud serán enviados por correo a todos los que presentaron un comentario público y a las personas que están en la lista para recibir avisos sobre esta solicitud. Si se reciben comentarios, el aviso también proveerá instrucciones para pedir una reconsideración de la decisión del Director Ejecutivo y para pedir una audiencia administrativa de lo contencioso.** Una audiencia administrativa de lo contencioso es un procedimiento legal similar a un procedimiento legal civil en un tribunal de distrito del estado.

PARA SOLICITAR UNA AUDIENCIA DE CASO IMPUGNADO, USTED DEBE INCLUIR EN SU SOLICITUD LOS SIGUIENTES DATOS: su nombre, dirección, y número de teléfono; el nombre del solicitante y número del permiso; la ubicación y distancia de su propiedad/actividad con respecto a la instalación; una descripción específica de la forma cómo usted sería afectado adversamente por el sitio de una manera no común al público en general; una lista de todas las cuestiones de hecho en disputa que usted presente durante el período de comentarios; y la declaración "[Yo/nosotros] solicito/solicitamos una audiencia de caso impugnado". Si presenta la petición para una audiencia de caso impugnado de parte de un grupo o asociación, debe identificar una persona que representa al grupo para recibir correspondencia en el futuro; identificar el nombre y la dirección de un miembro del grupo que sería afectado adversamente por la planta o la actividad propuesta; proveer la información indicada anteriormente con respecto a la ubicación del miembro afectado y su distancia de la planta o actividad propuesta; explicar cómo y porqué el miembro sería afectado; y explicar cómo los intereses que el grupo desea proteger son pertinentes al propósito del grupo.

Después del cierre de todos los períodos de comentarios y de petición que aplican, el Director Ejecutivo enviará la solicitud y cualquier petición para reconsideración o para una audiencia de caso impugnado a los Comisionados de la TCEQ para su consideración durante una reunión programada de la Comisión. La Comisión sólo puede conceder una solicitud de una audiencia de caso impugnado sobre los temas que el solicitante haya

presentado en sus comentarios oportunos que no fueron retirados posteriormente. Si se concede una audiencia, el tema de la audiencia estará limitado a cuestiones de hecho en disputa o cuestiones mixtas de hecho y de derecho relacionadas a intereses pertinentes y materiales de calidad del agua que se hayan presentado durante el período de comentarios. Si ciertos criterios se cumplen, la TCEQ puede actuar sobre una solicitud para renovar un permiso sin proveer una oportunidad de una audiencia administrativa de lo contencioso.

LISTA DE CORREO. Si somete comentarios públicos, un pedido para una audiencia administrativa de lo contencioso o una reconsideración de la decisión del Director Ejecutivo, la Oficina del Secretario Principal enviará por correo los avisos públicos en relación con la solicitud. Ademas, puede pedir que la TCEQ ponga su nombre en una o mas de las listas correos siguientes (1) la lista de correo permanente para recibir los avisos de el solicitante indicado por nombre y número del permiso específico y/o (2) la lista de correo de todas las solicitudes en un condado específico. Si desea que se agrega su nombre en una de las listas designe cual lista(s) y envia por correo su pedido a la Oficina del Secretario Principal de la TCEQ.

CONTACTOS E INFORMACIÓN DE LA TCEQ. Todos los comentarios escritos del público y los para pedidos una reunión deben ser presentados a la Oficina del Secretario Principal, MC 105, TCEQ, P.O. Box 13087, Austin, TX 78711-3087 o por el internet at www.tceq.texas.gov/about/comments.html. Tenga en cuenta que cualquier información personal que usted proporcione, incluyendo su nombre, número de teléfono, dirección de correo electrónico y dirección física pasarán a formar parte del registro público de la Agencia. Si necesita más información en Español sobre esta solicitud para un permiso o el proceso del permiso, por favor llame a El Programa de Educación Pública de la TCEQ, sin cobro, al 1-800-687-4040. La información general sobre la TCEQ puede ser encontrada en nuestro sitio de la red: www.tceq.texas.gov.

También se puede obtener información adicional del CSWR-Texas Utility Operating Company, LLC en a la dirección indicada anteriormente o llamando al Sr. Mandy Sappington, Gerente de EHS, al 314-464-3976.

Fecha de emisión _____ *[Date notice issued]*