



# Analytical Laboratories, Inc.

1804 N. 33rd Street  
Boise, Idaho 83703  
Phone (208) 342-5515

*Rec'd 6/22/05*  
<http://www.analyticallaboratories.com>

## Laboratory Analysis Report

Sample Number: 0516417

Attn: GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

Collected By: C ELLIS  
Submitted By: GRYHND/J WILSON

Source of Sample:  
WWTP LAGOON TREATED WASTEWATER

Time of Collection: 16:30  
Date of Collection: 6/8/2005  
Date Received: 6/9/2005  
Report Date: 6/16/2005

PWS#:  
PWS Name: CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Escherichia coli		<1	MPN/100mL		SM 9223	6/10/2005	JG

*[Signature]*

Thank you for choosing Analytical Laboratories for your testing needs.  
If you have any questions about this report, or any future analytical needs, please contact: Michael Moore

MCL = Maximum Contamination Level  
MDL = Method/Minimum Detection Limit  
UR = Unregulated



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*Rec'd 6/27/05*  
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## Laboratory Analysis Report

Sample Number: 0517339

Attn: GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

Collected By: M MOORE  
Submitted By: M MOORE

Source of Sample:  
WWTP INFLUENT

Time of Collection: 15:35  
Date of Collection: 6/15/2005  
Date Received: 6/16/2005  
Report Date: 6/21/2005

PWS#:

PWS Name: CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Biochemical Oxygen		160	mg/L		EPA 405.1	6/21/2005	DLR
Total Suspended Solids		114	mg/L	3	EPA 160.2	6/21/2005	DLR

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## Laboratory Analysis Report

Sample Number: 0517340

Attn: GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

Collected By: M MOORE

Submitted By: M MOORE

Source of Sample:

WWTP EFFLUENT

Time of Collection: 15:40  
Date of Collection: 6/15/2005  
Date Received: 6/16/2005  
Report Date: 6/21/2005

PWS#:

PWS Name: CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Escherichia coli		2	MPN/100mL		SM 9223	6/17/2005	CP
Biochemical Oxygen		17	mg/L		EPA 405.1	6/21/2005	DLR
Total Suspended Solids		14	mg/L	3	EPA 160.2	6/21/2005	DLR

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## Laboratory Analysis Report

Sample Number: 0517341

**Attn:** GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

**Collected By:** M MOORE

**Submitted By:** M MOORE

**Source of Sample:**

LITTLE SALMON RIVER UPSTREAM

**Time of Collection:** 15:45  
**Date of Collection:** 6/15/2005  
**Date Received:** 6/16/2005  
**Report Date:** 6/20/2005

**PWS#:**

**PWS Name:** CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Ammonia Direct (as N)		0.06	mg/L	0.04	EPA 350.1	6/17/2005	WW

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## Laboratory Analysis Report

Sample Number: 0517342

Attn: GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

Collected By: M MOORE

Submitted By: M MOORE

Source of Sample:

LITTLE SALMON RIVER DOWNSTREAM

Time of Collection: 15:45  
Date of Collection: 6/15/2005  
Date Received: 6/16/2005  
Report Date: 6/20/2005

PWS#:

PWS Name: CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Ammonia Direct (as N)		<0.04	mg/L	0.04	EPA 350.1	6/17/2005	WW

MCL = Maximum Contamination Level  
MDL = Method/Minimum Detection Limit  
UR = Unregulated

  
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If you have any questions about this report, or any future analytical needs, please contact: Michael Moore



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Boise, Idaho 83703  
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*Rec'd 6-30-05*  
<http://www.analyticallaboratories.com>

## Laboratory Analysis Report

Sample Number: 0518122

Attn: GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

Collected By: CLAYTON  
Submitted By: GRYHND/J WILSON

Source of Sample:  
LAGOON

Time of Collection: 16:15  
Date of Collection: 6/22/2005  
Date Received: 6/23/2005  
Report Date: 6/27/2005

PWS#: \_\_\_\_\_  
PWS Name: CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Escherichia coli		16	MPN/100mL		SM 9223	6/24/2005	JG

*Michael Moore*

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## Laboratory Analysis Report

Sample Number: 0518675

Attn: GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

Collected By: C ELLIS  
Submitted By: GRYHND/T OLTMAN

Source of Sample:  
WWTP LAGOON TREATED WASTEWATER

Time of Collection: 15:30  
Date of Collection: 6/28/2005  
Date Received: 6/29/2005  
Report Date: 6/30/2005

PWS#:

PWS Name: CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Escherichia coli		10	MPN/100mL		SM 9223	6/30/2005	RLV

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MDL = Method/Minimum Detection Limit  
UR = Unregulated

  
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<http://www.analyticallaboratories.com>

*Rec'd 7-14-05*

## Laboratory Analysis Report

Sample Number: 0518988

Attn: GAIL  
CITY OF NEW MEADOWS  
401 VIRGINIA  
P O BOX 324  
NEW MEADOWS, ID 83654

Collected By: CLAYTON  
Submitted By: GRYHND/J WILSON

Source of Sample:  
LAGOON

Time of Collection: 15:30  
Date of Collection: 6/30/2005  
Date Received: 7/1/2005  
Report Date: 7/5/2005

PWS#:  
PWS Name: CITY OF NEW MEADOWS

Test Requested	MCL	Analysis Result	Units	MDL	Method	Date Completed	Analyst
Escherichia coli		1	MPN/100mL		SM 9223	7/2/2005	RLV

Thank you for choosing Analytical Laboratories for your testing needs.

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UR = Unregulated

# CITY OF NEW MEADOWS

## JUNE,2005 DAILY MONITOR REPORT

<u>DATE</u>	<u>CL/2 RES</u>	<u>INN.PH</u>	<u>INN.TEMP</u>	<u>EFF.PH</u>	<u>FLOW MGPD</u>	<u>EFF.TEMP</u>	<u>ACT.FLOW</u>
June 01, 2005	0.10	7.140	15.1	7.53	0.12	19.2	92,000
June 02, 2005	0.40	7.420	16.4	6.80	0.10	18.6	120,100
June 03, 2005	0.20	6.980	16.2	6.81	0.09	18.3	92,900
June 06, 2005	0.10	7.300	16	6.90	0.08	18.0	223,900
June 07, 2005	0.50	7.150	15.4	7.14	0.06	16.0	63,800
June 08, 2005	0.10	7.200	16	7.55	0.07	18.7	74,200
June 09, 2005	0.50	7.070	16.1	6.50	0.07	18.1	65,300
June 10, 2005	0.50	7.010	16.4	6.54	0.07	17.3	76,300
June 13, 2005	0.50	6.700	14.9	6.39	0.07	17.2	227,000
June 14, 2005	0.50	7.010	15.6	6.59	0.07	17.6	66,100
June 15, 2005	0.50	7.020	15.4	7.38	0.07	17.0	71,800
June 16, 2005	0.40	6.900	16	6.83	0.07	19.1	67,900
June 17, 2005	0.10	6.920	15.8	7.39	0.16	19.1	78,200
June 20, 2005	0.30	7.070	16	7.31	0.08	17.7	288,600
June 21, 2005	0.50	7.280	15.8	7.23	0.07	19.8	72,700
June 22, 2005	0.40	7.300	16.1	7.26	0.08	19.6	70,200
June 23, 2005	0.50	7.340	16	7.25	0.06	19.5	57,700
June 27, 2005	0.30	7.100	17.1	7.85	0.08	20.9	237,600
June 28, 2005	0.30	7.350	17.3	7.70	0.09	21.0	100,000
June 29, 2005	0.40	7.280	17.4	7.60	0.10	21.3	127,200
June 30, 2005	0.40	7.150	16.9	7.45	0.08	20.1	66,000

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AVERAGE 'CL/2 RES.':	0.357
MINIMUM 'CL/2 RES.':	0.100
MAXIMUM 'CL/2 RES.':	0.500
AVERAGE INN.PH:	7.128
MINIMUM INN.PH:	6.700
MAXIMUM INN.PH:	7.420
AVERAGE INN.TEMP:	16.090
MINIMUM INN.TEMP:	14.900
MAXIMUM INN.TEMP:	17.400
AVERAGE EFF.PH:	7.143
MINIMUM EFF.PH:	6.390
MAXIMUM EFF.PH:	7.850
AVERAGE FLOW MGPD:	0.082
MINIMUM FLOW MGPD:	0.058
MAXIMUM FLOW MGPD:	0.164
AVERAGE EFF.TEMP:	18.767
MINIMUM EFF.TEMP:	16.000
MAXIMUM EFF.TEMP:	21.300
TOTAL ACT.FLOW:	2339500.000

CITY OF NEW MEADOWS WWTP MONTHLY REPORT

MONTH June YEAR 2005

DATE	DAY	TEMP	WEATHER	CL/2 RES	INN.PH	INN.FLOW	INN.TEMP	EFF.PH	EFF.FLOW	EFF.TEMP.	IN COLOR	FLOW METER	ACT.FLOW
6-1	Wed	45	Rain Shower	1	7.14		15.1	7.53	42.1	19.2	Light Green	225036	92,000
6-2	Thur	35	Fog	14	7.42		15.4	6.80	37.1	18.6	Light Green	225956	120,000
6-3	Fri	44	Cloudy	12	6.98		16.2	5.81	50.6	18.3	Light Green	228086	92,000
6-4	Sat	34	Cloudy	11	7.30		16.0	6.90	56.5	18.0	Light Green	230325	2,239,000
6-5	Sun	34	Cloudy	15	7.15		15.4	7.14	40.1	16.0	Light Green	232968	63,800
6-6	Mon	37	Fog	10	7.00		16.0	7.55	50.8	18.7	Light Green	231578	742,800
6-7	Tue	33	Fog	15	7.07		16.1	6.50	46.2	18.1	Light Green	230321	65,300
6-8	Wed	35	Cloudy	15	7.01		16.14	6.54	45.7	17.3	Light Green	232994	76,300
6-9	Thur	31	Clear	15	6.70		14.9	6.34	48.1	17.2	Light Green	235264	227,000
6-10	Fri	34	Clear	10	7.01		15.6	6.59	47.3	17.6	Light Green	235925	621,000
6-11	Sat	47	Clear	7	7.02		15.4	7.58	47.6	17.0	Light Green	232548	71,800
6-12	Sun	49	Rain	4	6.90		16.0	6.83	48.6	19.1	Light Green	237322	67,000
6-13	Mon	49	Rain	11	6.97		15.8	7.23	113.5	19.1	Light Green	238104	78,000
6-14	Tue	39	Clear	13	6.70		16.0	7.31	57.1	17.1	Light Green	240340	958,000
6-15	Wed	47	Clear	18	7.28		15.8	7.23	49.2	19.8	Light Green	241919	99,000
6-16	Thur	57	Clear	14	7.30		16.1	7.26	52.9	17.6	Light Green	248419	70,000
6-17	Fri	50	Clear	5	7.44		16.0	7.85	43.2	19.5	Light Green	248992	57,700
6-18	Sat	53	Rain	13	7.10		17.1	7.85	53.4	20.9	Light Green	245872	337,000
6-19	Sun	52	Rain	13	7.35		19.9	7.70	65.2	21.0	Light Green	246372	100,000
6-20	Mon	56	Cloudy	14	7.35		17.4	7.60	71.0	21.3	Light Green	247644	102,000
6-21	Tue	44	Fog	14	7.15		16.4	7.45	54.6	20.1	Light Green	243904	140,000

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
 NAME NEW MEADOWS; CITY OF (WVTP)  
 ADDRESS P.O. BOX 324 ID 89034  
 NEW MEADOWS ID 89034

FACILITY NEW MEADOWS; CITY OF (WVTP)  
 LOCATION NEW MEADOWS ID 89034

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 ID 0023105 PERMIT NUMBER  
 0014 DISCHARGE NUMBER

MONITORING PERIOD  
 FROM YEAR MO. DAY TO YEAR MO. DAY

MINOR PL 92-500  
 (OUR 02)  
 F - FINAL

NOTE: Read instructions before completing this form.

Form Approved  
 OMB No. 2040-0004

PARAMETER	X	QUANTITY OR LOADING			QUALITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
00010 (20 DEG. C) BOD5	SAMPLE MEASUREMENT					160		0	1/30	GRAB
00010 (20 DEG. C) BOD5	PERMIT REQUIREMENT			***		160		0	1/30	GRAB
00010 (20 DEG. C) BOD5	SAMPLE MEASUREMENT	12		(20)		17		0	1/30	GRAB
00010 (20 DEG. C) BOD5	PERMIT REQUIREMENT			(20)		17		0	1/30	GRAB
00010 (20 DEG. C) BOD5	SAMPLE MEASUREMENT	12		(20)		17		0	1/30	GRAB
00010 (20 DEG. C) BOD5	PERMIT REQUIREMENT			(20)		17		0	1/30	GRAB
00010 (20 DEG. C) BOD5	SAMPLE MEASUREMENT	12		(20)		17		0	1/30	GRAB
00010 (20 DEG. C) BOD5	PERMIT REQUIREMENT			(20)		17		0	1/30	GRAB
00010 (20 DEG. C) BOD5	SAMPLE MEASUREMENT	12		(20)		17		0	1/30	GRAB
00010 (20 DEG. C) BOD5	PERMIT REQUIREMENT			(20)		17		0	1/30	GRAB
00400 (100 DEG. C) EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT				6.4		7.9	0	21/30	GRAB
00400 (100 DEG. C) EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			***			1851 MAX SU	0	1/30	GRAB
00530 (60 DEG. C) SUSPENDED SOLIDS	SAMPLE MEASUREMENT					114		0	1/30	GRAB
00530 (60 DEG. C) SUSPENDED SOLIDS	PERMIT REQUIREMENT			***		114		0	1/30	GRAB
00530 (60 DEG. C) SUSPENDED SOLIDS	SAMPLE MEASUREMENT	10		(20)		14		0	1/30	GRAB
00530 (60 DEG. C) SUSPENDED SOLIDS	PERMIT REQUIREMENT			(20)		14		0	1/30	GRAB
00530 (60 DEG. C) SUSPENDED SOLIDS	SAMPLE MEASUREMENT	10		(20)		14		0	1/30	GRAB
00530 (60 DEG. C) SUSPENDED SOLIDS	PERMIT REQUIREMENT			(20)		14		0	1/30	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
 Robert R. Smith

I 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 that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
 Robert R. Smith

TELEPHONE  
 AREA NUMBER 208 347 2171  
 NUMBER  
 YEAR 05  
 MO 07  
 DAY 29

