



## ANALYTICAL REPORT

**Alaska State Environmental Health Laboratory**  
5251 Dr. Martin Luther King Jr. Avenue  
Anchorage, AK 99507  
[www.dec.alaska.gov/eh/lab](http://www.dec.alaska.gov/eh/lab)

**Work Order Number: 2506052**  
**Project Name: Eagle River**

**For:**

**AKDEC Division of Water**  
555 Cordova Street  
Anchorage, AK 99501-2617

**Attn: Mary Inovejas**

*Dena L Cologgi*

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**Dena L Cologgi**  
**Program Coordinator 2**  
[dena.cologgi@alaska.gov](mailto:dena.cologgi@alaska.gov)



**Report Date: 06/18/2025**

*The results in this report apply to the samples analyzed in accordance with the sample submission form. This analytical report must be reproduced in its entirety. This report has been electronically signed and authorized by the signatory.*

# Sample Summary

Client: AKDEC Division of Water  
Project: Eagle River

Work Order: 2506052  
Report Date: 06/18/2025 14:08

Lab Sample ID	Client Sample ID	Cooler	Temp C	Collected	Received
2506052-01	ER - MC	Default Cooler	6.5	6/9/25 9:55 am	6/9/25 12:29 pm
2506052-02	ER - NF	Default Cooler	6.5	6/9/25 10:25 am	6/9/25 12:29 pm
2506052-03	ER - NF - DUP	Default Cooler	6.5	6/9/25 10:25 am	6/9/25 12:29 pm
2506052-04	ER - SF	Default Cooler	6.5	6/9/25 11:00 am	6/9/25 12:29 pm
2506052-05	ER - GB	Default Cooler	6.5	6/9/25 11:38 am	6/9/25 12:29 pm

## Methods

All samples were analyzed and conform with the following methods unless otherwise specified in the Case Narrative:

SM 9222 D  
SM 9223 B

## Case Narrative

## Notes and Definitions

Alaska State Environmental Health Laboratory



Dena L Cologgi, Program Coordinator 2

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# Analytical Data

Client: AKDEC Division of Water  
Project: Eagle River

Work Order: 2506052  
Report Date: 06/18/25 14:08

Client Sample ID: ER - MC  
Lab Sample ID: 2506052-01  
Sampled By: Mary Inovejas

Analyte	Result	Reporting Limit	Detection Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
E. coli	613.1	1		MPN/100m L	1	B25F036	09-Jun-25	10-Jun-25	SM 9223 B	
Fecal Coliforms	360	1.0	1.0	CFU/100 mL	"	B25F035	09-Jun-25	10-Jun-25	SM 9222 D	

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# Analytical Data

Client: AKDEC Division of Water  
Project: Eagle River

Work Order: 2506052  
Report Date: 06/18/25 14:08

Client Sample ID: ER - NF  
Lab Sample ID: 2506052-02  
Sampled By: Mary Inovejas

Analyte	Result	Reporting Limit	Detection Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
E. coli	10.9	1		MPN/100m L	1	B25F036	09-Jun-25	10-Jun-25	SM 9223 B	
Fecal Coliforms	17	1.0	1.0	CFU/100 mL	"	B25F035	09-Jun-25	10-Jun-25	SM 9222 D	

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# Analytical Data

Client: AKDEC Division of Water  
Project: Eagle River

Work Order: 2506052  
Report Date: 06/18/25 14:08

Client Sample ID: ER - NF - DUP  
Lab Sample ID: 2506052-03  
Sampled By: Mary Inovejas

Analyte	Result	Reporting Limit	Detection Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
E. coli	13.4	1		MPN/100m L	1	B25F036	09-Jun-25	10-Jun-25	SM 9223 B	
Fecal Coliforms	24	1.0	1.0	CFU/100 mL	"	B25F035	09-Jun-25	10-Jun-25	SM 9222 D	

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# Analytical Data

Client: AKDEC Division of Water  
Project: Eagle River

Work Order: 2506052  
Report Date: 06/18/25 14:08

Client Sample ID: ER - SF  
Lab Sample ID: 2506052-04  
Sampled By: Mary Inovejas

Analyte	Result	Reporting Limit	Detection Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
E. coli	1	1		MPN/100m L	1	B25F036	09-Jun-25	10-Jun-25	SM 9223 B	
Fecal Coliforms	ND	1.0	1.0	CFU/100 mL	"	B25F035	09-Jun-25	10-Jun-25	SM 9222 D	

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# Analytical Data

Client: AKDEC Division of Water  
Project: Eagle River

Work Order: 2506052  
Report Date: 06/18/25 14:08

Client Sample ID: ER - GB  
Lab Sample ID: 2506052-05  
Sampled By: Mary Inovejas

Analyte	Result	Reporting Limit	Detection Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
E. coli	3.1	1		MPN/100m L	1	B25F036	09-Jun-25	10-Jun-25	SM 9223 B	
Fecal Coliforms	4.0	1.0	1.0	CFU/100 mL	"	B25F035	09-Jun-25	10-Jun-25	SM 9222 D	

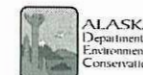
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ETA: 12:30 PM



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## Environmental Health Laboratory

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# ADEC EHL Sample Receipt Checklist

(form SC-11, rev 3/14/2025)

Environmental Health Laboratory

5251 Dr. MLK Jr. Ave., Anchorage, AK 99507

(907) 375-8200



WO #:

2506052

# of Samples:

5 (2 containers

Client:

AKDEC DOW  
(Eagle River)  
Project

Sample Matrix:

water

## COC Seals:

<input type="checkbox"/>	On Shipping Container	Intact? Y/N	<input type="checkbox"/>	USPS	<input checked="" type="checkbox"/>	Delivered by Client/Client Courier
<input type="checkbox"/>	On Sample Packaging	Intact? Y/N	<input type="checkbox"/>	UPS	<input type="checkbox"/>	Courier Shipper: _____
<input checked="" type="checkbox"/>	None		<input type="checkbox"/>	FedEx	<input type="checkbox"/>	Other _____

## Received via:

Shipment Tracking # \_\_\_\_\_

Sample Temperature @ Receipt: 6.5 °C

Thermometer ID (circle one): A25C104, calibration due 1/06/2027

Other: \_\_\_\_\_

## Shipping Container Type:

<input type="checkbox"/>	Box
<input checked="" type="checkbox"/>	Cooler
<input type="checkbox"/>	Envelope
<input type="checkbox"/>	Hand Carry
<input type="checkbox"/>	Styro-Box
<input type="checkbox"/>	Other _____

## Sample Packaging Type:

<input type="checkbox"/>	Plastic/Ziploc Bag
<input type="checkbox"/>	Plastic/Glass Vial/Jar
<input type="checkbox"/>	Whirl Pak Bag
<input type="checkbox"/>	Vacuum Packaging
<input type="checkbox"/>	Commercial Packaging
<input type="checkbox"/>	Blood Tubes
<input checked="" type="checkbox"/>	Other FedEx

## Refrigerant:

<input type="checkbox"/>	Dry Ice
<input checked="" type="checkbox"/>	Gel/Ice Pack
<input type="checkbox"/>	Water Ice
<input type="checkbox"/>	Other _____
<input type="checkbox"/>	None
Notes: _____	

## Sample(s) and Sample Containers:

Intact?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>	Properly Preserved?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>
Correct Type?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>	Meets Temp Requirements?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>
IDs/Times/Dates Match Form?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>	Adequate Amount for Tests?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>

## Sample Submission/Tracking Forms:

Sample Submission Form Complete?	Y	<input checked="" type="checkbox"/>	N	<input type="checkbox"/>	If yes, completed? (circle) Yes Provide details below in "Comments" section.
Sample Tracking Form Required?	N	<input checked="" type="checkbox"/>	Y	<input type="checkbox"/>	
Client Contacted Regarding Incomplete Data?	N	<input checked="" type="checkbox"/>	Y	<input type="checkbox"/>	

Comments: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_