



February 24, 2012

Mr. Brian Salem
NMED Hazardous Waste Bureau
5500 San Antonio Dr. NE
Albuquerque, NM 87109

Re: ALS Workorder: 12-02-056
Project Name: KAFB - BFF 1Q12
Project Number: None Submitted

Dear Mr. Salem:

Ten water samples were received by NMED Hazardous Waste Bureau on February 7, 2012. The samples were scheduled for the following analyses:

Metals	pages 1-14
Inorganics	pages 1-26
GC/MS Volatiles	pages 1-16
GC/MS Semivolatiles SIMPAH	pages 1-12
Total Volatile Petroleum Hydrocarbons (Gasoline)	pages 1-11
Total Extractable Petroleum Hydrocarbons (Diesel)	pages 1-12

Analysis Subcontracted to ALS Environmental – Houston, TX:
EDB

The results for these analyses are contained in the enclosed reports.

Thank you for your confidence in ALS Environmental. Should you have any questions, please call.

Sincerely,

ALS Environmental
Lance Steere
Senior Project Manager

LRS/djf
Enclosure (s): Report and CD

ALS is accredited by the following accreditation bodies for various testing scopes in accordance with requirements of each accreditation body. All testing is performed under the laboratory management system, which is maintained to meet these requirement and regulations. Please contact the laboratory or accreditation body for the current scope testing parameters.

Accreditation Body	License or Certification Number
Washington	C1280
Utah	CO00078
Arizona	AZ0742
Alaska	UST-086
Alaska	CO00078
Florida	E87914
Missouri	175
North Dakota	R-057
New Jersey	CO003
Nevada	CO000782008A
California	06251CA
Kansas	E-10381
Maryland	285
Pennsylvania	68-03116
Texas	T104704241-09-1
Colorado	CO00078
Connecticut	PH-0232
Idaho	CO00078
Tennessee	2976
Kentucky	90137
L-A-B (DoD ELAP/ISO 17025)	L2257

ALS Environmental -- FC

Sample Number(s) Cross-Reference Table

OrderNum: 1202056

Client Name: NMED Hazardous Waste Bureau

Client Project Name: KAFB - BFF 1Q12

Client Project Number:

Client PO Number: 20-667-00-16004

Client Sample Number	Lab Sample Number	COC Number	Matrix	Date Collected	Time Collected
106070-A	1202056-1		WATER	06-Feb-12	11:01
106070-B	1202056-2		WATER	06-Feb-12	11:04
106070-C	1202056-3		WATER	06-Feb-12	11:06
106070-D	1202056-4		WATER	06-Feb-12	11:14
106070-E	1202056-5		WATER	06-Feb-12	11:17
106070-F	1202056-6		WATER	06-Feb-12	11:20
106070-G	1202056-7		WATER	06-Feb-12	11:23
106070-H	1202056-8		WATER	06-Feb-12	11:26
106070-I	1202056-9		WATER	06-Feb-12	11:29
106070-J	1202056-10		WATER	06-Feb-12	11:30



ALS Laboratory Group

225 Commerce Drive, Fort Collins, Colorado 80524
 TF: (800) 443-1511 PH: (970) 490-1511 FX: (970) 490-1522

Chain-of-Custody

Form 2028

WORKORDER # **1202056**

PROJECT NAME KAFB BFF 9/12	SAMPLER Salem	DATE 2-6-12	PAGE 1 of 1
PROJECT No.	SITE ID 106070	TURNAROUND	DISPOSAL Normal
COMPANY NAME NMED	EDD FORMAT		
SEND REPORT TO Brian Salem	PURCHASE ORDER		
ADDRESS 5500 San Antonio NE	BILL TO COMPANY NMED / HWB		
CITY/STATE/ZIP Albuquerque NM 87109	INVOICE ATTN TO Dave Cabarrin		
PHONE 505-222-9576	ADDRESS 3025 Korder Park Dr.		
FAX	CITY/STATE/ZIP Santa Fe NM 87505		
E-MAIL	PHONE 505-476-6055		
	FAX		
	E-MAIL		

Lab ID	Field ID	Matrix	Sample Date	Sample Time	# Bottles	Pres.	OC	TURNAROUND	DATE	ANALYSIS
1	106070-A	W	2-6-12	11:01	3	HCl		8260	8/15	VOC
2	106070-B			11:04	3	HCl		8015	8/15	E03
3	106070-C			11:06	3	HCl		8015	8/15	G-R0
4	106070-D			11:14	1	-		8260	8/15	PAH
5	106070-E		11:20	11:20	1	H2O4		8015	8/15	PRO
6	106070-F		11:20	11:20	1	-		8015	8/15	PAH
7	106070-G			11:23	1	H2O4		8015	8/15	E03
8	106070-H			11:26	1	Zn/acet		8015	8/15	G-R0
9	106070-I			11:29	1	HNO3		8015	8/15	PAH
10	106070-J			11:30	1	HNO3		8015	8/15	PRO

*Time Zone: (Circle) EST CST MST PST Matrix: O = oil S = soil NS = non-soil solid W = water L = liquid E = extract F = filter

For metals or anions, please detail analytes below.

Comments:

RELINQUISHED BY	SIGNATURE	PRINTED NAME	DATE	TIME
RECEIVED BY	<i>Brian Salem</i>	Brian Salem	2-6-12	1500
RELINQUISHED BY	<i>Lauren Schmitz</i>	Lauren Schmitz	2/12	0945
RECEIVED BY				
RELINQUISHED BY				
RECEIVED BY				

Preservative Key: 1-HCl 2-HNO3 3-H2SO4 4-NaOH 5-NaHSO4 7-Other 8-4 degrees C 9-5035



CONDITION OF SAMPLE UPON RECEIPT FORM

Client: NMED

Workorder No: 1202056

Project Manager: LRS

Initials: LAS Date: 2/7/12

1. Does this project require any special handling in addition to standard Paragon procedures?		YES	<input checked="" type="radio"/> NO
2. Are custody seals on shipping containers intact?	NONE	<input checked="" type="radio"/> YES	NO
3. Are Custody seals on sample containers intact?	<input checked="" type="radio"/> NONE	YES	NO
4. Is there a COC (Chain-of-Custody) present or other representative documents?		<input checked="" type="radio"/> YES	NO
5. Are the COC and bottle labels complete and legible ?		<input checked="" type="radio"/> YES	NO
6. Is the COC in agreement with samples received? (IDs, dates, times, no. of samples, no. of containers, matrix, requested analyses, etc.)		<input checked="" type="radio"/> YES	NO
7. Were airbills / shipping documents present and/or removable?	DROP OFF	<input checked="" type="radio"/> YES	NO
8. Are all aqueous samples requiring preservation preserved correctly? (excluding volatiles)	N/A	<input checked="" type="radio"/> YES	NO
9. Are all aqueous non-preserved samples pH 4-9 ?	N/A	<input checked="" type="radio"/> YES	NO
10. Is there sufficient sample for the requested analyses?		<input checked="" type="radio"/> YES	NO
11. Were all samples placed in the proper containers for the requested analyses?		<input checked="" type="radio"/> YES	NO
12. Are all samples within holding times for the requested analyses?		<input checked="" type="radio"/> YES	NO
13. Were all sample containers received intact ? (not broken or leaking, etc.)		<input checked="" type="radio"/> YES	NO
14. Are all samples requiring no headspace (VOC, GRO, RSK/MEE, Rx CN/S, radon) headspace free? Size of bubble: ___ < green pea ___ > green pea	N/A	<input checked="" type="radio"/> YES	NO
15. Do perchlorate LCMS-MS samples have headspace ? (at least 1/3 of container required)	<input checked="" type="radio"/> N/A	YES	NO
16. Were samples checked for and free from the presence of residual chlorine ? (Applicable when PM has indicated samples are from a chlorinated water source; note if field preservation with sodium thiosulfate was not observed.)	<input checked="" type="radio"/> N/A	YES	NO
17. Were the samples shipped on ice ?		<input checked="" type="radio"/> YES	NO
18. Were cooler temperatures measured at 0.1-6.0°C? IR gun used*: <input checked="" type="radio"/> #2 #4		RAD ONLY	<input checked="" type="radio"/> YES NO
Cooler #: <u>1</u>			
Temperature (°C): <u>1.4</u>			
No. of custody seals on cooler: <u>2</u>			
External µR/hr reading: <u>15</u>			
Background µR/hr reading: <u>13</u>			
Were external µR/hr readings ≤ two times background and within DOT acceptance criteria? <input checked="" type="radio"/> YES <input type="radio"/> NO <input type="radio"/> NA (If no, see Form 008.)			

Additional Information: PROVIDE DETAILS BELOW FOR A NO RESPONSE TO ANY QUESTION ABOVE, EXCEPT #1 AND #16.

If applicable, was the client contacted? YES / NO / NA Contact: _____ Date/Time: _____

Project Manager Signature / Date: [Signature] 2/7/12

*IR Gun #2: Oakton, SN 29922500201-0066

*IR Gun #4: Oakton, SN 2372220101-0002

1 From
 Date: 2/6/12
 Sender's Name: Brian Salem
 Company: WMEW / HWB
 Address: 5500 San Antonio NE
 City: Albuquerque State: NM ZIP: 877059

2 Your Internal Billing Reference

3 To
 Recipient's Name: Lanie Steere
 Company: ALS Labs
 Address: 225 Commerce Dr.
 City: Ft. Collins State: CO ZIP: 80626-2762

4 Express Package Service *To most locations. NOTE: Service order has changed. Please select carefully.

Next Business Day
 06 FedEx First Overnight
 01 FedEx Priority Overnight
 05 FedEx Standard Overnight

2 or 3 Business Days
 49 NEW FedEx 2Day A.M.
 03 FedEx 2Day
 20 FedEx Express Saver

5 Packaging *Declared value limit \$500.

06 FedEx Envelope* 02 FedEx Pak* 03 FedEx Box 04 FedEx Tube 01 Other

6 Special Handling and Delivery Signature Options

03 SATURDAY DELIVERY

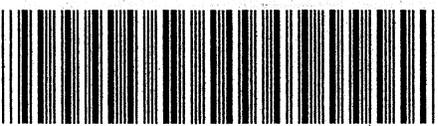
No Signature Required
 Direct Signature
 Indirect Signature

Does this shipment contain dangerous goods?
 No 04 Yes
 Dry Ice
 Cargo Aircraft Only

7 Payment Bill to:

1 Sender Acct. No. in Section 1 will be billed. 2 Recipient 3 Third Party 4 Credit Card 5 Cash/Check

Total Packages: 1 Total Weight: 19.25 lbs. Credit Card Auth. [Redacted]



8768 4050 1517

612