

Laboratory Results
July 27, 2016
Original Report
Page 1 of 4

Report To: LMKP LID
 Box 133
 Perham, MN 56573

Bill To: LMKP LID
 Box 133
 Perham, MN 56573

Project: AIS monitoring
Lab Code: 322596
Matrix: Surface Water
Collection: Comp Other
Samplers: Emelia Hauck
Date/Time Sampled: 07/15/16 0800
Date/Time Received: 07/15/16 1600
Sample Description: Little McDonald

Laboratory: RMB Environmental Laboratories, Inc.
Contact/Phone: Robert Borash, 218-846-1465
Sample Receipt: Samples meet proper sampling and transportation guidelines

Compound	Analysis Method	Analysis Date	Analysis Time	DF	MDL	RL	Sample Result
Miscellaneous Analyses							
Spiny water fleas	Microscopy	7/27/2016		1		1	Absent /100mL
Zebra Mussel Veligers	Microscopy	7/27/2016		1		1	Absent /sample

Comments: Sample preserved with 91% Isopropyl Alcohol.

DF = Dilution Factor
 RL = Reporting limit of the analysis method.
 MDL = Minimum detection limit of the analysis method.

Report approved by:



The results in this report apply only to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.

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Report To: LMKP LID
 Box 133
 Perham, MN 56573

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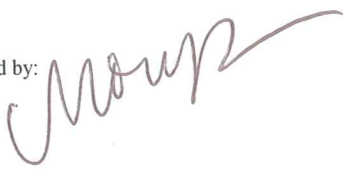
Project: AIS monitoring
 Lab Code: 322597
 Matrix: Surface Water
 Collection: Comp Other
 Samplers: Emelia Hauck
 Date/Time Sampled: 07/15/16 0820
 Date/Time Received: 07/15/16 1600
 Sample Description: Kerbs

Laboratory: RMB Environmental Laboratories, Inc.
 Contact/Phone: Robert Borash, 218-846-1465
 Sample Receipt: Samples meet proper sampling and transportation guidelines

Compound	Analysis Method	Analysis Date	Analysis Time	DF	MDL	RL	Sample Result
Miscellaneous Analyses							
Spiny water fleas	Microscopy	7/27/2016		1		1	Absent /100mL
Zebra Mussel Veligers	Microscopy	7/27/2016		1		1	Absent /sample

Comments: Sample preserved with 91% Isopropyl Alcohol.

DF = Dilution Factor
 RL = Reporting limit of the analysis method.
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Report To: LMKP LID
 Box 133
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Bill To: LMKP LID
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 Perham, MN 56573

Project: AIS monitoring
 Lab Code: 322598
 Matrix: Surface Water
 Collection: Comp Other
 Samplers: Emelia Hauck
 Date/Time Sampled: 07/15/16 0950
 Date/Time Received: 07/15/16 1600
 Sample Description: Rusche

Laboratory: RMB Environmental Laboratories, Inc.
 Contact/Phone: Robert Borash, 218-846-1465
 Sample Receipt: Samples meet proper sampling and transportation guidelines

Compound	Analysis Method	Analysis Date	Analysis Time	DF	MDL	RL	Sample Result
<u>Miscellaneous Analyses</u>							
Spiny water fleas	Microscopy	7/27/2016		1		1	Absent /100mL
Zebra Mussel Veligers	Microscopy	7/27/2016		1		1	Absent /sample

Comments: Sample preserved with 91% Isopropyl Alcohol.

DF = Dilution Factor
 RL = Reporting limit of the analysis method.
 MDL = Minimum detection limit of the analysis method.

Report approved by:



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Detroit Lakes Laboratory

22796 County Highway 6
Detroit Lakes, MN 56501
218-846-1465
www.rmbel.info



Grand Rapids Laboratory

1851 East Highway 169
ICC - Wilson Hall, Room 105
Grand Rapids, MN 55744
218-322-2304

Laboratory Results

July 27, 2016

Original Report

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Report To: LMKP LID

Box 133

Perham, MN 56573

Bill To: LMKP LID

Box 133

Perham, MN 56573

Project: AIS monitoring

Lab Code: 322599

Matrix: Surface Water

Collection: Comp Other

Samplers: Emelia Hauck

Date/Time Sampled: 07/15/16 1015

Date/Time Received: 07/15/16 1600

Sample Description: Paul

Laboratory: RMB Environmental Laboratories, Inc.

Contact/Phone: Robert Borash, 218-846-1465

Sample Receipt: Samples meet proper sampling and transportation guidelines

Compound	Analysis Method	Analysis Date	Analysis Time	DF	MDL	RL	Sample Result
Miscellaneous Analyses							
Spiny water fleas	Microscopy	7/27/2016		1		1	Absent /100mL
Zebra Mussel Veligers	Microscopy	7/27/2016		1		1	Absent /sample

Comments: Sample preserved with 91% Isopropyl Alcohol.

DF = Dilution Factor
RL = Reporting limit of the analysis method.
MDL = Minimum detection limit of the analysis method.

Report approved by:

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RMB Environmental Laboratories, Inc.

CHAIN OF CUSTODY RECORD

22796 County Highway 6, Detroit Lakes, MN 56501
 Phone & fax: 218-846-1465 · mbel@rmbel.info · www.rmbel.info

Electronic version available at http://www.rmbel.info/lab/chains-of-custody/

Lab Code	Station ID/sample Description	Date	Time	# of Bottles	Sample Method	Start Depth (m)	End Depth (m)	Sample Type	Matrix	Analysis Requested	Sample Comments: (Equipment Type, Filtration, AIS, Preservation)
322596	Litt McDonald	07/15/16	08:00	1	CO	0	25	Sample	Wtr-Surf	X	
322597	verbs	07/15/16	08:20	1	CO	0	25	Sample	Wtr-Surf	X	
322598	Rusche	07/15/16	09:50	1	CO	0	15	Sample	Wtr-Surf	X	
322599	PAUD	07/15/16	10:15	1	CO	0	25	Sample	Wtr-Surf	X	

(Initials) In the event that samples are received by the lab at a temperature greater than 6 ° C, I hereby authorize RMB Environmental Laboratories to process the samples as received.

(Initials) In the event that samples are received by the lab at a temperature greater than 6 ° C, please contact client at phone # _____ before processing samples.

Relinquished by: (signature) [Signature] Date 07/15/16 Time 11:10

Electronic Data Deliverable (EDD): Lab_MN format

Shipping Method
 Shipping Method
 Speedee
 UPS
 USPS
 Fedex
 Hand Delivery
 Other: _____

Report to:

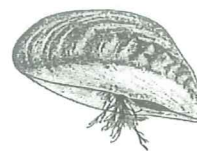
Received by Lab: (signature) [Signature] Date 07/15/16 Time 1606

DOES meet proper sample storage and transportation guidelines
 Does NOT meet proper sample storage and transportation guidelines

Explain:
 Rcvd on ice Rcvd at room temp Rcvd Temp: 20.6-21.3° C
 Samples received same day as collection

Comments: _____

BILLING
 Shipping: _____
 Mileage: _____
 Field Staff: 4 MRS = \$400
 Equipment: _____
 Other: _____



Zebra Mussel Veliger Monitoring Program Data Sheet INFESTED LAKES

Please label each bottle with the appropriate information including Organization, Lake Name, Date and Time of sample.

Please fill out a lab Chain of Custody form to accompany this data sheet.

General Information

Lake Name: Little McDonald Lake ID (DOW): 56-0328-00 County: Otter Tail

Sampling Details

Date: 7/15/16 @ 0800
 Number of sites sampled: 3
 Did you composite the sites (circle one)? Y N
 Depth of Column Sampled: 25 ft

Field Sampling Comments, Suggestions, Observations:

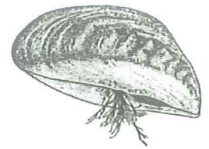
Weather Conditions – Please check the applicable boxes

Wind Speed	Wind Direction	Weather
<input checked="" type="checkbox"/> Mild 0-10mph <input type="checkbox"/> Moderate 11-20mph <input type="checkbox"/> High 21-30mph <input type="checkbox"/> Strong 30pmh+	<input type="checkbox"/> North <input type="checkbox"/> Northeast <input type="checkbox"/> East <input type="checkbox"/> Southeast <input type="checkbox"/> South <input type="checkbox"/> Southwest <input type="checkbox"/> West <input checked="" type="checkbox"/> Northwest	<div style="text-align: center;"> </div> <input type="checkbox"/> Sunny <input type="checkbox"/> Partly Cloudy <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Snow
		Surface water Temp: _____ Air Temp: <u>70°F</u> Recent rain date: <u>7/14/16</u> Precipitation (inches): _____

FOR LABORATORY PROCESSING

Lab Code: 322596 Name of the plankton analyst: Mariya Ruffin
 Volume of sample that was analyzed (mL): all Date analyzed: 7/27/16
 Zebra Mussel Veliger Density: 0 / mL _____ /L

Comments/Observations:



Zebra Mussel Veliger Monitoring Program Data Sheet INFESTED LAKES

Please label each bottle with the appropriate information including Organization, Lake Name, Date and Time of sample.

Please fill out a lab Chain of Custody form to accompany this data sheet.

General Information

Lake Name: Kerbs Lake ID (DOW): 56-1636-00 County: Otter Tail

Sampling Details

Date: 7/15/16 @ 0820
 Number of sites sampled: 2
 Did you composite the sites (circle one)? Y N
 Depth of Column Sampled: 25 ft

Field Sampling Comments, Suggestions, Observations:

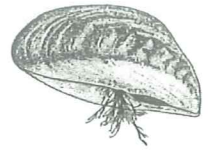
Weather Conditions – Please check the applicable boxes

Wind Speed	Wind Direction	Weather
<input checked="" type="checkbox"/> Mild 0-10mph <input type="checkbox"/> Moderate 11-20mph <input type="checkbox"/> High 21-30mph <input type="checkbox"/> Strong 30pmh+	<input type="checkbox"/> North <input type="checkbox"/> Northeast <input type="checkbox"/> East <input type="checkbox"/> Southeast <input type="checkbox"/> South <input type="checkbox"/> Southwest <input type="checkbox"/> West <input checked="" type="checkbox"/> Northwest	<div style="text-align: center;"> </div> <input type="checkbox"/> Sunny <input type="checkbox"/> Partly Cloudy <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Snow
		Surface water Temp: _____ Air Temp: <u>70°F</u> Recent rain date: <u>7/14/16</u> Precipitation (inches): _____

FOR LABORATORY PROCESSING

Lab Code: 322597 Name of the plankton analyst: Monya Ruffin
 Volume of sample that was analyzed (mL): all Date analyzed: 7/27/16
 Zebra Mussel Veliger Density: 0 / mL _____ / L

Comments/Observations:



Zebra Mussel Veliger Monitoring Program Data Sheet INFESTED LAKES

Please label each bottle with the appropriate information including Organization, Lake Name, Date and Time of sample.

Please fill out a lab Chain of Custody form to accompany this data sheet.

General Information

Lake Name: Rusch Lake ID (DOW): 56-1641-00 County: Otter Tail

Sampling Details

Date: 7/15/16 @ 0950
 Number of sites sampled: 2
 Did you composite the sites (circle one)? (Y) N
 Depth of Column Sampled: 15 ft

Field Sampling Comments, Suggestions, Observations:

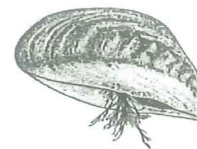
Weather Conditions – Please check the applicable boxes

Wind Speed	Wind Direction	Weather
<input checked="" type="checkbox"/> Mild 0-10mph <input type="checkbox"/> Moderate 11-20mph <input type="checkbox"/> High 21-30mph <input type="checkbox"/> Strong 30pmh+	<input type="checkbox"/> North <input type="checkbox"/> Northeast <input type="checkbox"/> East <input type="checkbox"/> Southeast <input type="checkbox"/> South <input type="checkbox"/> Southwest <input type="checkbox"/> West <input checked="" type="checkbox"/> Northwest	<div style="text-align: center;"> </div> <input type="checkbox"/> Sunny <input type="checkbox"/> Partly Cloudy <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Snow
		Surface water Temp: _____ Air Temp: <u>70° F</u> Recent rain date: <u>7/14/16</u> Precipitation (inches): _____

FOR LABORATORY PROCESSING

Lab Code: <u>322598</u>	Name of the plankton analyst: <u>Monya Pifer</u>
Volume of sample that was analyzed (mL): <u>all</u>	Date analyzed: <u>7/27/16</u>
Zebra Mussel Veliger Density: <u>0</u> / mL _____ / L	

Comments/Observations:



Zebra Mussel Veliger Monitoring Program Data Sheet INFESTED LAKES

Please label each bottle with the appropriate information including Organization, Lake Name, Date and Time of sample.

Please fill out a lab Chain of Custody form to accompany this data sheet.

General Information

Lake Name: Paul Lake ID (DOW): 56-0335-00 County: Otter Tail

Sampling Details

Date: 7/15/16 @ 1015
 Number of sites sampled: 2
 Did you composite the sites (circle one)? (Y) N
 Depth of Column Sampled: 25 ft

Field Sampling Comments, Suggestions, Observations:

Weather Conditions – Please check the applicable boxes

Wind Speed	Wind Direction	Weather
<input checked="" type="checkbox"/> Mild 0-10mph <input type="checkbox"/> Moderate 11-20mph <input type="checkbox"/> High 21-30mph <input type="checkbox"/> Strong 30pmh+	<div style="text-align: center;"> </div> <input type="checkbox"/> North <input type="checkbox"/> Northeast <input type="checkbox"/> East <input type="checkbox"/> Southeast <input type="checkbox"/> South <input type="checkbox"/> Southwest <input type="checkbox"/> West <input checked="" type="checkbox"/> Northwest	<input type="checkbox"/> Sunny <input type="checkbox"/> Partly Cloudy <input checked="" type="checkbox"/> Cloudy <input type="checkbox"/> Rain <input type="checkbox"/> Snow Surface water Temp: _____ Air Temp: <u>70°F</u> Recent rain date: <u>7/14/16</u> Precipitation (inches): _____

FOR LABORATORY PROCESSING

Lab Code: 322599 Name of the plankton analyst: Mariya Ruder
 Volume of sample that was analyzed (mL): all Date analyzed: 7/27/16
 Zebra Mussel Veliger Density: 0 / mL _____ / L

Comments/Observations: