

**Arizona Department of Environmental Quality**  
**Ground Water Rule – Triggered Source Water Monitoring**  
**Drinking Water Microbiological Analysis Report**  
(This form is only for RAW WELL WATER compliance samples)

PWS ID Number: AZ 04 -	PWS Name:
Owner / Contact Person:	Phone Number:
<b>Well Number (required): 55 -</b>	<b>Only one well per reporting form</b>
<b>Original Lab Specimen ID # (required):</b>	

**Type of Sample - Check One**

Dual Purpose Sample Taken at Well  
(Only PWS serving 1,000 people or less, and having a single groundwater source. Approval by regulatory agency is needed.)

GWR Triggered Source Sample(s)

GWR Additional Source Water Monitoring Samples (5 per well)

Replacement GWR Sample (if original was invalidated) for Lab Specimen ID at top -  
**MUST CALL REGULATORY AGENCY FOR APPROVAL**

**DUAL PURPOSE SAMPLE ONLY:**  
Sample being used as:

RTCR \_\_\_ \_\_\_ UP

RTCR \_\_\_ \_\_\_ DN

**A positive Fecal Indicator GWR result is an Acute Violation requiring Public Notice.**  
Contact ADEQ immediately.

**Microbiological Analysis for GWR Fecal Indicators (To be filled out by lab personnel)**

Sample Collection Date      Time	Lab Specimen ID	Total Cl <sub>2</sub> mg/L	3100 Total Coliform <sup>1</sup> P / A / NA	3014    3002    3028		Analysis Start		Analysis Complete	
				Fecal Indicator <sup>2</sup> Method	Result	Date	Time	Date	Time

1 - Use only when method provides TC and E. coli results.  
2 - See page 2 for Fecal Indicator Analyte Code and Method Citation. Check one box.

**Laboratory Information (To be filled out by lab personnel)**

Lab Name:	Lab Certified ID Number:
Lab Contact, printed name:	Lab Phone Number:
Signature:	
Date PWS Notified:	PWS Person Notified:
<b>Any positive routine or increased routine TCR sample triggers the GWR and requires ADEQ notification.</b>	
Date ADEQ Notified:	ADEQ Person Notified:

Comments:

**Please mail completed form to:**  
Arizona Department of Environmental Quality  
Water Quality Data Unit, 5415B-1  
1110 West Washington Street  
Phoenix, AZ 85007  
**OR** Email to: [WQD\\_Compliance\\_Data@azdeq.gov](mailto:WQD_Compliance_Data@azdeq.gov)

**Questions Regarding the GWR:**  
Call (800) 234-5677, ext. 771-9200  
within AZ (602) 771-9200  
  
**Please do not submit multiple times.**

## **Instructions for the AZ Drinking Water GWR Triggered Source Water Monitoring Analysis Reporting Form**

### **Raw Well Water**

Untreated water sample taken at the wellhead. Do not take raw well water samples at the EPDS (entry point to the distribution system).

### **Public Water System (PWS) ID Number**

A unique 9-digit code assigned to each PWS by ADEQ. The code begins with AZ04 followed by a 5-digit number beginning with the county code.

### **Public Water System Name**

The legal name the water system has registered with the Arizona Corporation Commission (ACC). If the system is a municipality or other non-ACC regulated entity, this should reflect the legal structure (e.g. XYZ Water Improvement District). Always notify ADEQ of any change in name or ownership.

### **Owner / Contact Person**

Name of the owner or owner's representative (contact person) who can be contacted.

*(Note: ADEQ should be notified of all positive results)*

### **Well Number 55-xxxxxx**

Well registration number assigned by ADWR. Begins with 55- followed by 6-digits. Must be included on form.

### **Microbiological Analysis for GWR Fecal Indicators**

**Sample Collection, Date & Time:** Date the sample was collected in mm/dd/yy format. Time the sample was collected in hh:mm format, use 24-hour time clock.

**Lab Specimen ID:** A unique 15 character (maximum) alphanumeric code that identifies a particular sample used to test one contaminant or one category of contaminants.

**Total Cl<sub>2</sub>:** A chlorine residual reading is required for all GWR results regardless of whether chlorination is routine.

**3100 Total Coliform:** Use only when method provides TC and E. coli results.

**Fecal Indicator, Method & Result:** Check which fecal indicator analyte was used (3014, 3002, or 3028), list the EPA approved method citation (see table below), and give result.

**Analysis Start, Date & Time:** Date and time the laboratory analysis starts.

**Analysis Complete, Date & Time:** Date and time the laboratory analysis ends.

### **Laboratory Information**

To be filled out by lab personnel.

### **Comments**

Any pertinent comments regarding sample(s). Examples: sample >30 hours; no date or time, etc.

### **EPA & Arizona Approved Analytical Methods for Triggered Ground Water Monitoring**

Fecal Indicator	Methodology	Method Citation
E. coli (3014)	Colilert	9223 B
	Colisure	9223 B
	Membrane Filter Method with MI Agar	EPA Method 1604
	m-ColiBlue24 Test	
	E*Colite Test	
Enterococci (3002)	EC-MUG	9221 F
	NA-MUG	9222 G
	Multiple-Tube Technique	9230 B
	Membrane Filter Technique	9230 B
Coliphage (3028)	Membrane Filter Technique	EPA Method 1600
	Enterolert	
	Two-Step Enrichment Presence-Absence Procedure	EPA Method 1601
	Single Agar Layer Procedure	EPA Method 1602

Form available: ADEQ Ground Water Rule, [http://www.azdeq.gov/environ/water/dw/gw\\_rule.html](http://www.azdeq.gov/environ/water/dw/gw_rule.html) and ADEQ Publications & Forms, <http://www.azdeq.gov/function/forms/appswater.html#sdw> (scroll down to Safe Drinking Water - Laboratory Forms, DWAR - 1G)

These definitions are general in nature.

For specific questions regarding your laboratory submittal, call (800) 234-5677, ext. 771-9200 or within AZ (602) 771-9200