



PO Box 7565  
 Asheville NC 28802  
 Phone: (828) 350-9364  
 Fax: (828) 350-9368

SENT TO STATE

**NITRATE/NITRITE ANALYSIS**

Note: All appropriate information must be supplied for compliance credit.

WATER SYSTEM ID #: 1 0 2 0 0 1 6 County: Cherokee

Name of Water System: Deer Ridge At Paradise Cove Well 1

Sample Type:  Entry Point  Special/Non-compliance

Location Where Collected: Well #1

Facility ID No.: W 0 1

Sample Point: E 0 1

Collected By: Mark C. Bentley  
 (Please Print)

Collection Date	Collection Time
<u>05/11/26</u> (MM/DD/YY)	<u>08:50 AM</u> (Specify AM or PM)

Mail Results to (water system representative):

Earth Environmental Services

Mark C. Bentley

Phone #: (828) 644-4835

P.O. Box 1410

Fax #: (828) 360-3966

Andrews, NC 28901

Responsible Person's e-mail:

LABORATORY ID# 3 7 7 8 6

SAMPLE UNSATISFACTORY

RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT (R.R.L.)	NOT DETECTED (i.e. < R.R.L.) (X)	QUANTIFIED RESULTS*	ALLOWABLE LIMIT
1040	Nitrate	4500NO3D	1.00 mg/L	<input checked="" type="checkbox"/>	_____ mg/L	10.00 mg/L
1041	Nitrate	---	0.10 mg/L	<input type="checkbox"/>	_____ mg/L	1.00 mg/L

\*Note: If result exceeds allowable limit, the laboratory must fax analytical results to the State on day test completed.

	DATE:	TIME:
ANALYSIS BEGUN:	<u>05/12/26</u> (MM/DD/YY)	<u>13:49 PM</u> (Specify AM or PM)
ANALYSIS COMPLETED:	<u>05/12/26</u> (MM/DD/YY)	<u>14:02 PM</u> (Specify AM or PM)

Laboratory Log #: 309650

Certified By: Kelley E. Keenan

COMMENTS: 260512502 Temperature upon receipt at laboratory (°C): 2.2°C

Laboratory should Mail Results to:  
 Public Water Supply Section, Attn: Data Entry, 1634 Mail Service Center, Raleigh, NC 27699-1634  
 Fax: 919.715.6637



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**NITRATE/NITRITE ANALYSIS**

Note: All appropriate information must be supplied for compliance credit.

WATER SYSTEM ID #: 1 0 2 0 0 1 7 County: Cherokee

Name of Water System: Deer Ridge At Paradise Cove Well 2

Sample Type:  Entry Point  Special/Non-compliance

Location Where Collected: Well #2

Facility ID No.: W 0 2

Sample Point: E 0 2

Collected By: Mark Bentley  
 (Please Print)

Collection Date	Collection Time
<u>05/11/20</u> (MM/DD/YY)	<u>09:24.A</u> M (Specify AM or PM)

Mail Results to (water system representative):  
Earth Environmental Services  
Mark C. Bentley  
P.O. Box 1410  
Andrews, NC 28901

Phone #: (828) 644-4835  
 Fax #: (828) 360-3966  
 Responsible Person's e-mail: \_\_\_\_\_

LABORATORY ID# 3 7 7 8 6  SAMPLE UNSATISFACTORY  RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT (R.R.L.)	NOT DETECTED (i.e. < R.R.L.) (X)	QUANTIFIED RESULTS*	ALLOWABLE LIMIT
1040	Nitrate	4500NO3D	1.00 mg/L	<input checked="" type="checkbox"/>	_____ mg/L	10.00 mg/L
1041	Nitrate	---	0.10 mg/L	<input type="checkbox"/>	_____ mg/L	1.00 mg/L

\*Note: If result exceeds allowable limit, the laboratory must fax analytical results to the State on day test completed.

	DATE:	TIME:
ANALYSIS BEGUN:	<u>05/12/20</u> (MM/DD/YY)	<u>13:49.P</u> M (Specify AM or PM)
ANALYSIS COMPLETED:	<u>05/12/20</u> (MM/DD/YY)	<u>14:02.P</u> M (Specify AM or PM)

Laboratory Log #: 30969 Certified By: Kelley E. Keenan

Temperature upon receipt at laboratory (°C): 22.6

COMMENTS: 26002.003



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**NITRATE/NITRITE ANALYSIS**

Note: All appropriate information must be supplied for compliance credit.

WATER SYSTEM ID #: 1 0 2 0 0 1 8 County: Cherokee

Name of Water System: Deer Ridge At Paradise Cove Well 3

Sample Type:  Entry Point  Special/Non-compliance

Location Where Collected: Well #203 W051324

Facility ID No.: W 0 3

Sample Point: E 0 3

Collected By: Mark C. Bentley  
 (Please Print)

Collection Date	Collection Time
<u>05/11/26</u> (MM/DD/YY)	<u>09:17 AM</u> (Specify AM or PM)

Mail Results to (water system representative):

Earth Environmental Services  
 Mark C. Bentley  
 P.O. Box 1410  
 Andrews, NC 28901

Phone #: (828) 644-4835  
 Fax #: (828) 360-3966  
 Responsible Person's e-mail: \_\_\_\_\_

LABORATORY ID# 3 7 7 8 6  SAMPLE UNSATISFACTORY  RESAMPLE REQUIRED

CONTAM CODE	CONTAMINANT	METHOD CODE	REQUIRED REPORTING LIMIT (R.R.L.)	NOT DETECTED (i.e. < R.R.L.) (X)	QUANTIFIED RESULTS*	ALLOWABLE LIMIT
1040	Nitrate	4500NO3D	1.00 mg/L	<input checked="" type="checkbox"/>	_____ mg/L	10.00 mg/L
1041	Nitrate	---	0.10 mg/L	<input type="checkbox"/>	_____ mg/L	1.00 mg/L

\*Note: If result exceeds allowable limit, the laboratory must fax analytical results to the State on day test completed.

	DATE:	TIME:
ANALYSIS BEGUN:	<u>05/12/26</u> (MM/DD/YY)	<u>13:49 P M</u> (Specify AM or PM)
ANALYSIS COMPLETED:	<u>05/12/26</u> (MM/DD/YY)	<u>14:02 P M</u> (Specify AM or PM)

Laboratory Log #: 50963 Certified By: Kelley E. Keenan

COMMENTS: 260512.504 Temperature upon receipt at laboratory (°C): 22.2