TCEQ Microbial Reporting Form (TCEQ-10525)

Form instructions: www.tceq.texas.gov/drinkingwater/microbial/revised-total-coliform-rule

Water System Identification & Sample Collection Information (Please print or type the information)

Public Water System ID: (Must be 7 digits; include all zeros)	TX 1630014
Public Water System Name:	Hwy 90 WSC

Report Results To:

Name:	Hwy 90 WSC
Address:	P.O. Box 1419 C
City:	Devine State: TX Zip Code: 78059
Phone #:	210 559-7329 PWS Email: Dtowgill2413@yahoo.com

* SAMPLES MARKED AS SPECIAL OR CONSTRUCTION CANNOT BE USED AS ROUTINE OR REPEAT SAMPLES

Sample Identification/Location (Use sample site location/address identified in the system's RTCR Sample Siting Plan. Raw Wells: Use Well Source ID (Ex: G1234567A))	Sample Type (√ one): Routine (Distribution)	Repeat	Raw Well	Special *	Construction *	Collected: Date (MM/DD/YY)	Collected: Time Military Time (HHMM)	Chlorine Residual: Free mg/L	Chlorine Residual: Total mg/L	Replacement	Original Sample Info: Sample ID and Date of Collection (Repeat, TSM Raw Well, Replacement)
#110 102 CR 4612	✓					4/27/26	1015		1.21		

Pollution Control Services
1532 Universal City Blvd.
Universal City, TX 78148
Phone: (210) 340-0343
Email: Chuck@pcslab.net

PCS LABORATORIES
TCEQ Laboratory ID: T104704361

Laboratory Analysis

Sample Iced?	Temperature (°C)		Lab Comments
Yes [X] No [ ]	Actual Temp: 22.6	Corrected Temp: 23.0	

Incubation Date and Time		Lab Rejected Code (LR) - Document Reason:
Start Date and Time: 4/27/26@1505	Analyst: BMW	
End Date and Time: 4/28/26@0905	Analyst: BMW	

Result Reporting and Approval

Laboratory Approval:	Date: 4/28/26	Time: 1400	
Reported to PWS By:	Date:	Time:	

Laboratory Analysis Results

Rejection Code (if applicable) - Please Recollect	Test Method: SM 9223 B						Analysis Results meet all accreditation requirements unless stated otherwise.
	Chlorine Check		Total Coliform		E. coli		
	Absent	Present	Absent	Present	Absent	Present	Laboratory Sample ID Number
	✓		✓		✓		842032
	✓						
	✓						
	✓						
	✓						
	✓						
	✓						
	✓						
	✓						
	✓						

I acknowledge that samples were handled appropriately and all information is accurate. Falsification of this form or tampering with water samples is a crime punishable under state and/or federal law. (Texas Penal Code, Title 8, Chapter 37.10)

Sampler Name (Print): Steve Gilliam	Sampler Signature:	Sampler Phone #:	210 559-7329
Sampler Email: Dtowgill2413@yahoo.com		Operator License # (if applicable):	

Relinquished By Sampler:	Date and Time: 4/27/26 13:20	Received By Courier (if applicable):		Date and Time:	
Relinquished By Courier:	Date and Time:	Received By Lab:		Date and Time:	4.27.26 1320

Pollution Control Services
Sample Log-In Checklist

842032

PCS Sample No(s) 842032 **COC No.** _____

Client/Company Name: Hwy 90 WSC **Checklist Completed by:** SA

Sample Delivery to Lab Via:
Client Drop Off ✓ Commercial Carrier: Bus ____ UPS ____ Lone Star ____ FedEx ____ USPS ____
PCS Field Services: Collection/Pick Up____ Other: _____

Sample Kit/Coolers
Sample Kit/Cooler? Yes ✓ No____ Sample Kit/Cooler: Intact? Yes ✓ No___
Custody Seals on Sample Kit/Cooler: Not Present ✓ If Present, Intact ___ Broken ___
Sample Containers Intact; Unbroken and Not Leaking? Yes ✓ No ___
Custody Seals on Sample Bottles: Not Present ✓ If Present, Intact ___ Broken ___
COC Present with Shipment or Delivery or Completed at Drop Off? Yes ✓ No ___
Has COC sample date/time and other pertinent information been provided by client/sampler? Yes: ✓ No: ___
Has COC been properly Signed when Received/Relinquished? Yes ✓ No ___
Does COC agree with Sample Bottle Information, Bottle Types, Preservation, etc.? Yes ✓ No ___
All Samples Received before Hold Time Expiration? Yes ✓ No ___
Sufficient Sample Volumes for Analysis Requested? Yes ✓ No ___
Zero Headspace in VOA Vial? Yes ___ No ___

Sample Preservation:
* ***Cooling:*** **Not Required** ✓ or **Required** _____
If cooling required, record temperature of submitted samples Observed/Corrected 22.6 / 23.0 °C
Is Ice Present in Sample Kit/Cooler? ✓ Yes ____ No Samples received same day as collected? ✓ Yes ____ No
Lab Thermometer Make and Serial Number: ennoLogic HDHC000015629 Other: _____

Acid Preserved Sample - If present, is pH <2? **Yes ___ No ___**** ____H_2SO_4 ____HNO_3 ____H_3PO_4
Base Preserved Sample - If present, is pH >12? Yes ___ No ___ ____NaOH
Other Preservation:_____ If Present, Meets Requirements? Yes____ No____
Sample Preservations Checked by:_____ Date _____ Time _____
pH paper used to check sample preservation (PCS log #): _____ (HEM pH checked at analysis).
Samples Preserved/Adjusted by Lab:

Lab #	Parameters Preserved	Preservative Used	Log #

Adjusted by Tech/Analyst:_____ Date :_____Time:_____

Client Notification/ Documentation for "No" Responses Above/ Discrepancies/ RevisionComments
Person Notified: _____ Contacted by:_____
Notified Date: _____Time: _____
Method of Contact: At Drop Off:____ Phone ___ Left Voice Mail ____ E-Mail ____ Fax ____
Unable to Contact____ Authorized Laboratory to Proceed :_____(Lab Director)
Regarding / Comments:_____
_____
_____
Actions taken to correct problems/discrepancies:_____
_____
_____
Receiving qualifier needed (*requires client notification above*) Temp. ___ Holding Time ___ Initails: _____
Receiving qualifier entered into LIMS at login Initial/Date: _____
Revision Comments: _____
_____