SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT 21865 Copley Dr., Diamond Bar, CA 91765-4182

MONITORING & ANALYSIS REPORT OF LABORATORY ANALYSIS

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TO	Rafael Reynosa	LABORATORY NO.	1822708-01
	Sr. Enforcement Manager		
	Compliance & Enforcement	FACILITY ID	NA
SAN	MPLE(S) DESCRIBED AS	DATE RECEIVED	8/15/18
	Tedlar Bag # 150527 collected at 2016		
	hours near Shoreline Dr./Shoreline	PROJECT/ ST NO/ RULE	402
	Villlage Dr. parking		
SAN	MPLING LOCATION	REQUESTED BY	Nydia Ibarra
	C#290243; C#290251;		
	Offshore Odors Event 8/14/18	DATE ANALYZED	8/15/18

ANALYTICAL WORK PERFORMED, METHOD OF ANALYSIS AND RESULTS Total Reduced Sulfur (TRS) by SCAQMD Method 307-91

	Result (ppb)
Hydrogen Sulfide	< 3
Carbonyl Sulfide	< 2
Dimethyl Sulfide	< 2
Unknown*	< 2
(*As Carbonyl Sulfide)	
Total Reduced Sulfur	< 3

Sample analyzed within 24 hours.

Date Reviewed:	08/24/18	Reviewed By:	Joh B. P.
			Brad Parrack, Principal A.Q. Chemist
			Laboratory Services
Date Approved:	8 kc 4/18	Approved By:	01

Aaron Katzenstein, Ph.D., Senior Manager

Laboratory Services (909) 396-2219

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Tedlar Bag # 150527 collected at 2016 hours near Shoreline Dr./Shoreline Villlage Dr. parking

LABORATORY NO. 1822708-01

REQUESTED BY Nydia Ibarra

Total Reduced Sulfur (TRS) by SCAQMD Method 307-91 **Quality Control Tests and Results Matrix**

	Ca	llibration Drift		Lab Air Blank (ppb)	
	Prepared	Measured	% Recovery		Measured
Hydrogen Sulfide	29.1	19.5	67.0	Hydrogen Sulfide	< 1
Carbonyl Sulfide	33.0	21.4	64.7	Carbonyl Sulfide	< 1
Dimethyl Sulfide	29.1	17.8	61.0	Dimethyl Sulfide	< 1
				Unknown	< 1 *

	Cali	ibration Contro		N2 Bag Blank (ppb)	
	Prepared	Measured	% Recovery		Measured
Hydrogen Sulfide	4.9	1.4	29.3	Hydrogen Sulfide	< [
Carbonyl Sulfide	5.5	3.3	60.5	Carbonyl Sulfide/SO2	1
Dimethyl Sulfide	4.9	3.0	61.9	Dimethyl Sulfide	< 1
				Unknown	3 *

	Jerome 6	31X Calibratio	n STD (ppb)	
	Prepared	Measured	% Recovery	*Calibrated using carbonyl sulfide
Hydrogen Sulfide	20.0	26.0	130.0	



SOUTH COAST AIR QUALITY MANAGEMENT DISTRICT SAMPLE ANALYSIS REQUEST

X	DISTRICT INFORMATION
	INVOICE SOURCE
LA	BORATORY NO. 1822 708

TO: SCAQMD LAB: X	OTHER:	: 🔲					
SOURCE NAME: C#	290243; C#290251 8/1	; Offshore Od 4/18	ors event I.I	D. No.			
Source Address:			City:	Long Beac	h		
Mailing Address: City: Zip:							
Contact Person:		Title:		Tel:			
Analysis Requested by:	Nydia I	barra	Date:	August 14, 2	2018		
Approved by:	0	ffice:	Compliance	Budget #:	60-375		
REASON REQUESTED:	Court/Hearing Board	Permit	Pending	Hazardous/Toxid	c Spill 🔲		
Suspected Violation	Rule(s)	402	Other	Cal H&S Cod	le 41700		
Sample Collected by:	Nydia Ibarra	Date:	August 14, 2018	Time: So	ee below		
Specify the description and	location where the	sample was co	llected:				
Sample #1- Tedlar Bag				•	ne		
Dr./Shoreline Village Dr. parking); approx. GPS coordinates 33°45'39"N, 118°11'33"W. Sample #2 Summa Canister: #54706- collected at 2020 hours; breathing zone (near Shoreline Dr./Shoreline Village Dr. parking); approx. GPS coordinates 33°45'39"N, 118°11'33"W.							
Analysis Requested: H2S/V	OC/ GCMS/Odors/	Please Specia	te/Quantify Un	known Gas			
Relinquished by	Received by	Fin	m/Agency	Date	Time		
Ugui Slean	april -	54	teno	8/14/18	23:0320		
J12:	Cigli	SCAOMI) lab	W 16/15/16	(D:004M		
				<u> </u>			
Remarks: Please expedite a	and send laboratory	results to Rafa	el Reynosa, Sr.	Enforcement Man	ager		