





13611 B Street • Omaha, Nebraska 68144-3693 • (402) 334-7770 • FAX (402) 334-9121 • www.midwestlabs.com

Lab #	Report of Analysis		Report Number: 20-051-4112																																																																																																																																																		
<b>Account:</b> 27791	DOUG BULLOCK CITY OF RICHLAND PO BOX 190 RICHLAND WA 99352		 Robert Ferris Account Manager 402-829-9871																																																																																																																																																		
<b>Date Sampled:</b> <b>Date Received:</b> <b>Sample ID:</b>	2020-02-06 2020-02-07 FC Row ASP-8																																																																																																																																																				
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Lab #	8722496	Biological & Physical Properties			Report Number: 20-051-4112						
Account: 27791		DOUG BULLOCK CITY OF RICHLAND PO BOX 190 RICHLAND WA 99352			  Robert Ferris Client Service Representative 402-829-9871						
Date Sampled: Date Received: Sample ID:		2020-02-06 2020-02-07 FC Row ASP-8				City of Richland Compost Facility STA Compost					
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Biological Properties											
Germination		85	%	1	TMECC 05.05A						
Germination Vigor		60	%	1	TMECC 05.05A						
CO <sub>2</sub> OM Evolution		0.82	mgCO <sub>2</sub> -C/gOM/day	0.01	TMECC 05.08B						
CO <sub>2</sub> Solids Evolution		1.04	mgCO <sub>2</sub> -C/gTS/day	0.01	TMECC 05.08B						
Fecal Coliform		38	mpn/g	0.2	EPA 1681						
Stability Rating		Stable	N/A	N/A	TMECC 05.08B						
Physical Properties											
Bulk Density (Loose)		927	lbs/cu yard	1	WT/VOL						
Bulk Density (Packed)		1264	lbs/cu yard	1	WT/VOL						
Film Plastics		n.d.	%	0.25	Microscopic						
Glass Fragments		n.d.	%	0.25	Microscopic						
Hard Plastics		n.d.	%	0.25	Microscopic						
Metal Fragment		n.d.	%	0.25	Microscopic						
Sharps		Absent	---	---	Microscopic						
Max. Particle Length		4.5	inches	N/A	TMECC Sieve						
Sieve % Passing 3"		100	%	0.01	TMECC Sieve						
Sieve % Passing 2"		100	%	0.01	TMECC Sieve						
Sieve % Passing 1.5"		100	%	0.01	TMECC Sieve						
Sieve % Passing 1"		100	%	0.01	TMECC Sieve						
Sieve % Passing 3/4"		100	%	0.01	TMECC Sieve						
Sieve % Passing 5/8"		100	%	0.01	TMECC Sieve						
Sieve % Passing 3/8"		100	%	0.01	TMECC Sieve						
Sieve % Passing 1/4"		97	%	0.01	TMECC Sieve						

## Compost Results Interpretations

Page 1

Report #:

20-051-4112

DATE RECEIVED:

2020-02-07

### Organic Matter %

36.10

As Received

50.24

Dry Weight

Greater than 20% indicates a desirable range for compost on a dry weight basis.

Compost is a significant source of Organic Matter, which is an important supplier of carbon. Organic Matter improves soil and plant efficiency by improving soil physical properties, providing a source of energy to beneficial organisms, and enhancing the reservoir of soil nutrients.

### C/N Ratio

10.6:1

20-30 indicates an ideal range for the initial compost process.

10-20 indicates an ideal range for a finished compost.

All organic matter is made up of substantial amounts of carbon with lesser amounts of nitrogen. The balance of these two elements is called the Carbon/Nitrogen Ratio. For the best performance, the compost pile requires the correct proportion of carbon for energy and nitrogen for protein production. If the C:N ratio is too high (excess carbon) decomposition slows down. If the C:N ratio is too low (excess Nitrogen) the compost pile could be difficult to manage.

### Moisture %

28.14

<35% = Indicates overly dry compost

>55% = Indicates overly wet compost

Moisture Percent is the measure of water present in the compost and expressed as a percentage of total weight. Moisture present affects handling and transport. Overly dry will be light and dusty while overly wet will be heavy and clumpy. A desirable moisture content of finished compost will range between 40 to 50%.

## Compost Results Interpretations

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2020-02-07

Conductivity or Soluble Salts measures the conductance of electrical current in a liquid compost slurry. Excessive soluble salt content in a compost can prevent or delay seed germination and proper root growth. Conductivity analysis is done on a 1:5 basis.

Conductivity 1:5	
7.0	
Conductivity Level	Interpretation
Greater than 10	Very High nutrient content. Use for Ag Applications
5 - 10	High nutrient content. Use for Ag Applications
3 - 5	Higher than desirable for salt sensitive plants, some loss of vigor
0.6 - 3	Desirable range for most plants
0.3 - 0.6	Ideal range for greenhouse growth media
0.0 - 0.3	Very Low: Indicates very low nutrient status: plants may show deficiencies.

## Compost Results Interpretations

Page 3

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20-051-4112

DATE RECEIVED:

2020-02-07

### pH Value

6.9

0 to 14 scale with 6 to 8 as normal pH levels for compost

A pH in the 6 to 8 pH range indicates a more mature compost

pH measures the acidity or alkalinity of the compost, and is a measurement of the hydrogen ion activity of a soil or compost on a logarithmic scale. The pH scale ranges from 0 to 14 and 7 indicates a neutral pH. Growing media with a higher pH or pH greater than 7 can benefit from a compost that has a more acidic pH or pH below 7. This type of application will possibly lower the soil pH making the soil more conducive to plants that thrive in a more acidic soil condition.

### Nutrient Index (Ag Index)

>10

The Nutrient Index normally runs between 1 and 10.

The Nutrient Index is obtained by dividing the total nutrients (N,P,K) by the amount of salt (Sodium and Chloride). The higher the Nutrient Index the less chance of having a toxic buildup of Sodium (salt) in the soil.

AG INDEX CHART										
<i>salt injury possible</i>	<i>use on soils with excellent drainage characteristics, good water quality and low salts</i>				<i>you may use on soils with poor drainage, poor water quality, or high salts</i>				<i>for all soils</i>	
1	2	3	4	5	6	7	8	9	10	> 10

### Nutrients (N+P205+K20)

5.48

Average Nutrient Content Dry Weight

<2 = Low, >5 = High

2-1-1

Rating As Received

The most commonly used compost data is the amount of Nitrogen, Phosphate, and Potash (abbreviated as N,P,K) present and the information is similar to that found in common fertilizers. If a compost result has the rating 1-2-2 it means that the compost has 1% Nitrogen, 2% Phosphate and 2% Potash. Most compost tests will have a average nutrient level (N+P+K) of < 5%.

20-051-4112

REPORT DATE  
Feb 20, 2020  
RECEIVED DATE  
Feb 07, 2020

SEND TO  
27791



13611 B Street • Omaha, Nebraska 68144-3693 • (402) 334-7770  
www.midwestlabs.com

ISSUE DATE  
Feb 20, 2020

CITY OF RICHLAND  
DOUG BULLOCK  
PO BOX 190  
RICHLAND WA 99352

REPORT OF ANALYSIS  
For: (27791) CITY OF RICHLAND  
City of Richland Compost Facility  
STA Compost

Analysis	Level Found			Reporting			Analyst- Date	Verified- Date
	As Received	Dry Weight	Units	Limit	Method			

Sample ID: FC Row ASP-8	Lab Number: 8722496			Date Sampled: 2020-02-06 0930				
Cadmium (total)	n.d.	0.64	mg/kg	0.50	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Chromium (total)	12.9	17.9	mg/kg	1.00	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Mercury (total)	0.06	0.09	mg/kg	0.05	EPA 7471		pld8-2020/02/11	th1-2020/02/12
Lead (total)	14.2	19.7	mg/kg	5.0	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Molybdenum (total)	4.8	6.7	mg/kg	1.0	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Nickel (total)	25.9	36.1	mg/kg	1.0	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Selenium (total)	n.d.	n.d.	mg/kg	10.0	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Zinc (total)	194.3	270.4	mg/kg	2.0	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Copper (total)	101	140	mg/kg	1	EPA 6010		ery3-2020/02/11	th1-2020/02/12
Arsenic (total)	3.48	4.84	mg/kg	0.5	EPA 6020		ras7-2020/02/12	th1-2020/02/12

EPA 1681 holding time of < 24 hours from sampling to laboratory set up of samples for biosolids and compost has been exceeded. Individual states enforce different holding times for compost or biosolids so please contact the regulatory body in your state for their requirements.  
n.d. = not detected , ppm = parts per million, ppm = mg/kg

For questions please contact:

Rob Ferris  
Account Manager  
rferris@midwestlabs.com (402)829-9871



**US COMPOSTING  
COUNCIL**



8722496-496  
Samples: 1  
Page: 1/3  
Ashlyn Himen  
2020 02 07 11:27

**OFFICIAL Seal of Testing Assurance  
Compost Sample Chain of Custody Form**

STA Laboratory: <u>Midwest Laboratories</u> Tel: <u>(402) 334-1770</u> Address: <u>13611 "B" St.</u> FAX: <u>(402) 334-9121</u> Email: _____				<b>LABORATORY USE ONLY</b> <b>Storage Locations</b> Freezer _____ Cold Room _____ Storage Shelf _____ Sample Condition: _____ Temperature: _____ Malodor: _____ Moisture: _____						
City, State Zip code: <u>Omaha, Nebraska 68144-3693</u>				<b>Sample Type:</b> <input type="radio"/> POINT <input type="radio"/> COMPOSITE <input type="radio"/> STRATIFIED <input type="radio"/> INTERVAL P.O. Number: _____ USCC Member: <input type="radio"/> YES <input type="radio"/> NO						
Client/Reporting Company: <u>City of Richland</u> Tel: <u>(509) 942-7481</u> Contact Name: <u>Steve Brewer</u> FAX: <u>(509) 942-7346</u> Billing Address: <u>P.O. Box 190</u> Email: <u>SBREWER@CT</u> <u>MS # 27</u> <u>Richland, WA, US</u>				<b>SELECTION OF ANALYSIS.</b> Refer to <a href="http://www.lmcc.org/cap/methods.html">http://www.lmcc.org/cap/methods.html</a> for details. STA Suite; State DOT Tests (indicate State): A, B, C -- Specify other tests in fields A through C. (e.g., tests required for regulated samples, etc.). <b>NOTE!</b> STA analytical results via the STA Compost Technical Data Sheet and this Chain of Custody form are submitted to STA program management.						
City, State Zip code: <u>Richland, WA 99352</u>				<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <td style="width:33%; height: 40px; vertical-align: top;">A</td> <td style="width:33%; height: 40px; vertical-align: top;">B</td> <td style="width:33%; height: 40px; vertical-align: top;">C</td> </tr> </table>				A	B	C
A	B	C								
Send Results to: <u>Steve Brewer</u> City, State Zip code: <u>P.O. Box 190 MS#27 Richland, WA 99352</u>				Name or Source of Sample(s): <u>City of Richland Compost Facility</u> Name of Person(s), Sample Collector(s): <u>Kasey Braton DOUG BULLOCK</u>						
Client Sample ID and Special Instructions  <u>FC</u> <u>ROW</u> <u>ASP-8</u>	1. List Feedstocks 2. Check all that apply 3. List % by volume. (Optional) <input checked="" type="checkbox"/> Green waste <input type="checkbox"/> Manure <input type="checkbox"/> Food <input checked="" type="checkbox"/> Biosolids <input type="checkbox"/> MSW <input type="checkbox"/> Wood <input type="checkbox"/> Carcass <input type="checkbox"/> Fish Waste <input type="checkbox"/> Grease, Fats	Collection Date/Time Date: <u>2-6-20</u> Time: <u>0930</u> Initials: <u>DB</u>	Sample Matrix Compost <input checked="" type="radio"/> Feedstock <input type="radio"/> Mulch <input type="radio"/> <input type="radio"/> <input type="radio"/>	Composting Operation Type Windrow <input checked="" type="radio"/> Static pile <input type="radio"/> In-Vessel <input type="radio"/> <input type="radio"/> <input type="radio"/>	Shipping Temperature Ambient <input type="radio"/> Wet Ice <input checked="" type="radio"/> Dry Ice <input type="radio"/>	Indicate Compost Analysis Requirements (*Identify state) <div style="display: flex; align-items: center;"> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">STA Suite</div> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">State DOT</div> <div style="border: 1px solid black; padding: 2px; margin-right: 5px;">Identify State</div> <div style="font-size: 2em; margin-right: 10px;">A B</div> <div style="font-size: 1.5em;">8722496</div> </div>				
INFORM THE STA LABORATORY AND SPECIFY THE REQUIRED LABORATORY TESTS WHEN SUBMITTING REGULATED COMPOST SAMPLES (pk use spaces A, B and C provided above). PLEASE PROVIDE SPECIFIC FEEDSTOCK AND OPERATIONAL DETAIL IN THE SPACE PROVIDED. YOUR VOLUNTEERED INFORMATION PROVIDES USCC STANDARDS AND PRACTICES COMMITTEE WITH CRUTIAL DATA NEEDED TO BETTER UNDERSTAND THE COMPOSTING PROCESS AND COMPOST END USES.										
<u>PLEASE NO SALMONELLA</u>										
Releasing Signature 1 <u>Doug Bullock</u>	Date <u>2-6-20</u>	Time <u>1300</u>	Receiving Signature 1 _____	Date _____	Time _____					
Releasing Signature 2 _____	Date _____	Time _____	Receiving Signature 2 _____	Date _____	Time _____					
Releasing Signature 3 _____	Date _____	Time _____	Receiving Signature 3 _____	Date _____	Time _____					
Releasing Signature 4 _____	Date _____	Time _____	Receiving Signature 4 _____	Date _____	Time _____					

8.9<sup>+</sup> 2/7/20

# Regulatory



This sheet **MUST** be filled out before samples can be processed. To ensure that holding times are met, it is your responsibility that a completed form comes attached to the Chain of Custody. Samples must be received on ice.

Is this sample for regulatory/permit reporting? ☒ Yes ☐ No

What city/state was your sample collected in? RICHLAND, WASH.

What agency/state are you reporting? US COMPOSTING COUNCIL

What type of sample? (Circle One)

**Drinking Water**  
For human consumption,  
30 hr hold time

**Ground Water**

**Wastewater**

COMPOST

**Soild Waste**

**Hazardous Waste**

**UST**

**Storm Water**

**Process Water**

**Livestock**

**SEE REVERSE SIDE FOR SAMPLING INSTRUCTIONS**

RC FORM 14-3 Effective 01.30.19

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8722496-496  
Samples: 1 Page: 3/3  
Ashlyn Hiron  
2020 02 07 11:27

# Sample Acceptance Checklist

Document Number: RC CHKLIST 001

Revision No.: 4

Effective Date: 1/31/2019

Page 1 of 1

Lab Number:

Thermometer Used: ☐ Therm Fisher IR 14

Cooler Intact: ☒ Yes ☐ No

Received on Ice: ☒ Yes ☐ No

Hand Delivered: ☐ Yes ☒ No

Sample Temperature (°C): 8.9

Date & Initials of person accepting samples:

2/7/20 gs

Comments

Chain of Custody present?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Sample ID(s):	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Sample Location(s):	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Client contact:	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Analysis Requested:	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Date & Time of collection:	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Sampler name on COC?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Chain of custody relinquished with signature?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Chain of custody complete?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Sample labels match COC?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Written in indelible ink?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Labels indicate proper preservation?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Samples arrived within hold time?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Samples arrived within correct temperature?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Sufficient volume?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Appropriate containers used?	<input checked="" type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input type="checkbox"/>	N/A	
Filtered volume received for dissolved tests?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	
Headspace in VOA vials?	<input type="checkbox"/>	Yes	<input type="checkbox"/>	No	<input checked="" type="checkbox"/>	N/A	
Trip Blank present?	<input type="checkbox"/>	Yes	<input checked="" type="checkbox"/>	No	<input type="checkbox"/>	N/A	

Client Notification/Resolution:

Date/Time Contacted: \_\_\_\_\_

Person Contacted: \_\_\_\_\_ Contacted By: \_\_\_\_\_

Comments/Resolution: \_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
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