



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

Lab #	8759203	Report of Analysis		Report Number: 20-160-4003	
<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>	2020-05-19 2020-05-20 FC ROWS 10-11-19, 10-16-19, 10-22-19, 1				
			COMPOST ANALYSIS		
			Analysis (as rec'd)	Analysis (dry weight)	Total content, lbs per ton (as rec'd)
<b>NUTRIENTS</b>					
Nitrogen					
Total Nitrogen	%	2.07	2.62	41.4	
Organic Nitrogen	%	1.85	2.34	37.0	
Ammonium Nitrogen	%	0.181	0.229	3.6	
Nitrate Nitrogen	%	0.04	0.05	0.8	
Major and Secondary Nutrients					
Phosphorus	%	0.63	0.80	12.6	
Phosphorus as P2O5	%	1.44	1.82	28.8	
Potassium	%	1.08	1.37	21.6	
Potassium as K2O	%	1.30	1.64	26.0	
Sulfur	%	0.39	0.49	7.8	
Calcium	%	2.23	2.82	44.6	
Magnesium	%	0.51	0.64	10.2	
Sodium	%	0.090	0.114	1.8	
Micronutrients					
Iron	ppm	12200	15425	24.4	
Manganese	ppm	228	288	0.5	
Boron	ppm	< 100	---	---	
<b>OTHER PROPERTIES</b>					
Moisture	%	20.91			
Total Solids	%	79.09		1581.8	
Organic Matter	%	40.10	50.70	802.0	
Ash	%	38.30	48.43	766.0	
Total Carbon	%	18.80	23.77		
Chloride	%	0.21	0.27		
pH		7.0			
Conductivity 1:5 (Soluble Salts)	mS/cm	3.91			

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Lab #	8759203	<b>Biological &amp; Physical Properties</b>	Report Number: 20-160-4003																																																																																																																																																								
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## Compost Results Interpretations

Page 1

Report #:

20-160-4003

DATE RECEIVED:

2020-05-20

### Organic Matter %

40.10 As Received

50.70 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

9.1:1

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 %

20.91

<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

Page 2

Report #:

20-160-4003

DATE RECEIVED:

2020-05-20

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
3.9

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

Report #: 20-160-4003  
DATE RECEIVED: 2020-05-20

**pH Value**  
7.0

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)**

6.08 Average Nutrient Content Dry Weight <2 = Low, >5 = High  
2-1.5-1.5 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%.

**20-160-4003**

REPORT DATE  
**Jun 08, 2020**  
 RECEIVED DATE  
**May 20, 2020**

SEND TO  
**27791**



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

ISSUE DATE  
**Jun 08, 2020**

**CITY OF RICHLAND  
 DOUG BULLOCK  
 PO BOX 190  
 RICHLAND WA 99352**

**REPORT OF ANALYSIS**  
 For: (27791) CITY OF RICHLAND  
 COMPOST ANALYSIS

**Analysis**      **Level Found**      **As Received**      **Dry Weight**      **Units**      **Reporting Limit**      **Method**      **Lab Number: 8759203**      **Date Sampled: 2020-05-19**

Analysis	Level Found	As Received	Dry Weight	Units	Reporting Limit	Method	Lab Number: 8759203	Date Sampled: 2020-05-19	Analyst-Date	Verified-Date
Cadmium (total)	0.77		0.97	mg/kg	0.50	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Chromium (total)	24.5		31.0	mg/kg	1.00	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Mercury (total)	0.14		0.18	mg/kg	0.05	EPA 7471			tfh1-2020/05/27	kkh9-2020/06/03
Lead (total)	11.1		14.0	mg/kg	5.0	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Molybdenum (total)	8.0		10.1	mg/kg	1.0	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Nickel (total)	38.1		48.2	mg/kg	1.0	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Selenium (total)	n.d.		n.d.	mg/kg	10.0	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Zinc (total)	271.1		342.8	mg/kg	2.0	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Copper (total)	152		192	mg/kg	1.0	EPA 6010			ery3-2020/05/26	kkh9-2020/06/03
Arsenic (total)	4.32		5.46	mg/kg	0.50	EPA 6020			ras7-2020/06/03	kkh9-2020/06/03

EPA 1682 holding time of < 6 hours from sampling to laboratory set up of samples for biosolids and compost has been exceeded. If a level of Salmonella was reported, the value would be considered an estimate. 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, mg/kg

For questions please contact:

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

The result(s) issued on this report only reflect the analysis of the sample(s) submitted.

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8759203



US COMPOSTING COUNCIL

OFFICIAL Seal of Testing Assurance  
Compost Sample Chain of Custody Form

STA Laboratory: Midwest Laboratories Tel: (402) 334-7770  
 Address: 13611 B St. FAX: (402) 334-9121  
 Email: \_\_\_\_\_  
 City, State Zip code: Omaha, Nebraska 68144-3693

Client/Reporting Company: City of Richland Tel: (509) 942-7481  
 Contact Name: Steve Brewer FAX: (509) 942-7346  
 Billing Address: 625 Swift Blvd. Email: SBREWER@CT.Richland.  
MS# 27 WA, U.S.  
 City, State Zip code: Richland, Wa 99352

Send Results to: Steve Brewer 625 Swift Blvd. MS# 27  
 City, State Zip code: Richland Wa 99352

Name or Source of Sample(s): City of Richland Compost Facility  
 Name of Person(s), Sample Collector(s): DOB BULLOCK

LABORATORY USE ONLY Storage Locations  
 Freezer \_\_\_\_\_ Cold Room \_\_\_\_\_ Storage Shelf \_\_\_\_\_

Sample Condition: \_\_\_\_\_  
 Temperature: \_\_\_\_\_ Malodor: \_\_\_\_\_ Moisture: \_\_\_\_\_

Sample Type:  POINT  COMPOSITE  STRATIFIED  INTERVAL  
 P.O. Number: \_\_\_\_\_

USCC Member:  YES  NO

SELECTION OF ANALYSIS. Refer to <http://www.tnccc.org/cap/methods.html> 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.). NOTE! STA analytical results via the STA Compost Technical Data Sheet and this Chain of Custody form are submitted to STA program management.

A B C

Client Sample ID and Special Instructions	1. List Feedstocks 2. Check all that apply 3. List % by volume. (Optional)	Collection Date/Time	Sample Matrix	Composting Operation Type	Shipping Temperature	Indicate Compost Analysis Requirements (*Identify state)	LAB USE ONLY Job Number & Sample Status
FC ROWS 10-14-19, 10-16-19, 10-22-19, 11-01-19, 11-20-19, 12-23-19	<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	Date: <u>5-19-20</u> Time: <u>GRAB</u> Initials: <u>DB</u>	Compost <input checked="" type="radio"/> Feedstock <input type="radio"/> Mulch <input type="radio"/>	Windrow <input checked="" type="radio"/> Static pile <input type="radio"/> In-Vessel <input type="radio"/>	Ambient <input type="radio"/> Wet Ice <input checked="" type="radio"/> Dry Ice <input type="radio"/>	STA Suite State DOT Identify State A B C	

INFORM THE STA LABORATORY AND SPECIFY THE REQUIRED LABORATORY TESTS WHEN SUBMITTING REGULATED COMPOST SAMPLES (please 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.

S.W.A. & O.R.F.  
SAMPLE  
SALMONELLA (NO FECAL COLIFORM)

Releasing Signature	Date	Time	Receiving Signature	Date	Time
<u>Doug Bulluck</u>	<u>5-19-20</u>	<u>1:30P</u>	<u>SA</u>	<u>5/20/20</u>	<u>1145</u>
Releasing Signature 2	Date	Time	Releasing Signature 2	Date	Time
Releasing Signature 3	Date	Time	Releasing Signature 3	Date	Time
Releasing Signature 4	Date	Time	Releasing Signature 4	Date	Time

8759203-203  
 Samples: 1 Page: 1/3  
 Calvin J Stetzel Columbia  
 2020 05 28 11:50

5.6°C

# 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? UP COMPOSTING COUNCIL

What type of sample? (Circle One)

**Drinking Water**

For human consumption,  
30 hr hold time

**Ground Water**

**Wastewater**

**Soild Waste**

**Hazardous Waste**

**UST**

**Storm Water**

**Process Water**

**Livestock**

COMPOST

SEE REVERSE SIDE FOR SAMPLING INSTRUCTIONS



RC FORM 14-3 Effective 01.30.19

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Lab Number:

 Thermometer Used:  Therm Fisher IR 2

 Cooler Intact:  Yes  No  
 Received on Ice:  Yes  No  
 Hand Delivered:  Yes  No

 Sample Temperature (°C): 5.6

 Date & Initials of person accepting samples: JA 5/20/20

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 type="checkbox"/> Yes	<input checked="" 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: \_\_\_\_\_