

Work Order No.: 1910391

September 8, 2019

Arcelor Mittal USA, Inc. 250 W US Highway 12 Burns Harbor, IN 46304-9745

Re: NPDES Excursion-CN

Dear Teri Kirk:

Microbac Laboratories, Inc. - Chicagoland Division received 3 sample(s) on 9/8/2019 9:40:00AM for the analyses presented in the following report as Work Order 19I0391.

The enclosed results were obtained from and are applicable to the sample(s) as received at the laboratory. All sample results are reported on an "as received" basis unless otherwise noted.

All data included in this report have been reviewed and meet the applicable project specific and certification specific requirements, unless otherwise noted. A qualifications page is included in this report and lists the programs under which Microbac maintains certification.

This report has been paginated in its entirety and shall not be reproduced except in full, without the written approval of Microbac Laboratories.

We appreciate the opportunity to service your analytical needs. If you have any questions, please contact your project manager. For any feedback, please contact Ron Misiunas, Division Manager, at ron.misiunas@microbac.com.

Sincerely,

Microbac Laboratories, Inc.

Carry Hadgala

Carey Gadzala Project Manager



WORK ORDER SAMPLE SUMMARY

Date: Sunday, September 8, 2019

Client: Arcelor Mittal USA, Inc.
Project: NPDES Excursion-CN

Lab Order: 1910391

Lab Sample ID	Client Sample ID	Tag Number	Collection Date	Date Received
1910391-01	Lagoon Channel Inlet		09/08/2019 00:00	9/8/2019 9:10:00AM
1910391-02	South Lagoon Inlet		09/08/2019 00:00	9/8/2019 9:10:00AM
1910391-03	011		09/08/2019 00:00	9/8/2019 9:10:00AM



Analytical Results Date: Sunday, September 8, 2019

Client: Arcelor Mittal USA, Inc.
Client Project: NPDES Excursion-CN

Client Sample ID:Lagoon Channel InletWork Order/ID:1910391-01Sample Description:Sampled:09/08/20190:00

 Sample Description:
 Sampled:
 09/08/2019
 0:00

 Matrix:
 Aqueous
 Received:
 09/08/2019
 9:10

Analyses Certs AT Result RL Qual Units DF Analyzed

Method: SM 4500-CN C/E-1999 Analyst: EF

 Total Cyanide
 Prep Method: NA
 Prep Date/Time: 09/08/2019 10:37

 Cyanide, Total
 dij
 A
 0.0066
 0.0050
 mg/L
 1
 09/08/2019 13:08



Analytical Results Date: Sunday, September 8, 2019

Client: Arcelor Mittal USA, Inc.
Client Project: NPDES Excursion-CN

Client Sample ID: South Lagoon Inlet Work Order/ID: 1910391-02

 Sample Description:
 Sampled:
 09/08/2019
 0:00

 Matrix:
 Aqueous
 Received:
 09/08/2019
 9:10

Analyses Certs AT Result RL Qual Units DF Analyzed

 Method: SM 4500-CN C/E-1999
 Analyst: EF

 Total Cyanide
 Prep Method: NA
 Prep Date/Time: 09/08/2019 10:37

 Cyanide, Total
 dij
 A 0.0058
 0.0050
 mg/L
 1
 09/08/2019 13:13



Analytical Results Date: Sunday, September 8, 2019

Client: Arcelor Mittal USA, Inc.
Client Project: NPDES Excursion-CN

 Client Sample ID:
 011
 Work Order/ID:
 1910391-03

 Sample Description:
 Sampled:
 09/08/2019
 0:00

 Matrix:
 Aqueous
 Sampled:
 09/08/2019
 0.00

 Matrix:
 Aqueous
 Received:
 09/08/2019
 9:10

Certs AT Result RL Units DF **Analyses** Qual Analyzed Method: SM 4500-CN C/E-1999 Analyst: EF **Total Cyanide** Prep Method: NA Prep Date/Time: 09/08/2019 10:37 Cyanide, Total dij Α ND 0.0050 mg/L 09/08/2019 13:18

ANALYTE TYPES: (AT)

A,B = Target Analyte

I = Internal Standard
M = Summation Analyte

S = Surrogate

T = Tentatively Identified Compound (TIC, concentration estimated)



QC SAMPLE IDENTIFICATIONS

BLK = Method Blank
DUP = Method Duplicate
BS = Method Blank Spike
MS = Matrix Spike
ICB = Initial Calibration Blank
CCB = Continuing Calibration Blank
CRL = Client Required Reporting Limit

ICSA = Interference Check Standard "A"
ICSAB = Interference Check Standard "AB"
BSD = Method Blank Spike Duplicate
MSD = Matrix Spike Duplicate
ICV = Initial Calibration Verification
CCV = Continuing Calibration Verification
OPR = Ongoing Precision and Recovery Standard
SD = Serial Dilution

PDS = Post Digestion Spike QCS = Quality Control Standard

CERTIFICATIONS (Certs)

Below is a list of certifications maintained by the Microbac Merrillville Laboratory. All data included in this report has been reviewed for and meets all project specific and quality control requirements of the applicable accreditation, unless otherwise noted. Complete lists of individual analytes pursuant to each certification below are available upon request.

- d Illinois EPA drinking water, wastewater and solid waste analysis (#200064)
- i Kansas Dept Health & Env. NELAP (#E-10397)
- J Kentucky Wastewater Laboratory Certification Program (#108202)

FLAGS, FOOTNOTES AND ABBREVIATIONS (as needed)

RL: Reporting Limit

RPD: Relative Percent Difference

Cooler Receipt Log

Cooler ID: Default Cooler

Comments

No times



Cooler Inspection Checklist

Ice Present or not required?	Yes
Shipping containers sealed or not required?	Yes
Custody seals intact or not required?	Yes
Chain of Custody (COC) Present?	Yes
COC includes customer information?	Yes
Relinquished and received signature on COC?	Yes
Sample collector identified on COC?	Yes
Sample type identified on COC?	No
Correct type of Containers Received	Yes
Correct number of containers listed on COC?	Yes
Containers Intact?	Yes
COC includes requested analyses?	Yes
Enough sample volume for indicated tests received?	Yes
Sample labels match COC (Name, Date & Time?)	No
Samples arrived within hold time?	Yes
Correct preservatives on COC or not required?	Yes
Chemical preservations checked or not required?	Yes
Preservation checks meet method requirements?	Yes
VOA vials have zero headspace, or not recd.?	Yes

CHAIN OF CUSTODY RECORD Number

152265 Instructions on back

TO BE COMPLETED BY MICROBAC

Temperature Upon Receipt (°C) 6.0-3287 Therm ID

☐ Routine (5 to 7 business days) ☐ RUSH* (notify lab)

Invoice Address

Client Name:

Client Name: Arcelo - Chal

Lab Report Address

(MICROBAC*

Holding Time

Samples Received on Ice N ☐ Yes ☐ No ☐ N/A

Custody Seals Intact? ☐ Ýes ☐ No ◘ 🗖 🗖 🗚 A

☐ Results Only ☐ Level 1 ☐ Level 2 ☐ Level 3 ☐ Level 4 ☐ EDD

Report Type

(needed by)

City, State, Zip:

Address:

Telephone No.:

☐ Mail ☐ Fax ☐ e-mail (address)

Send Report via:

Project:

Telephone No.:

Contact:

Contact: 101 KUK

City, State, Zip:

Address:

□ e-mail (address)

☐ Mail ☐ Fax Send Invoice via:

Compliance Monitoring?

%□

□ Yes

PO No.:

Sampler Phone No.:

Sampler Signature:

Sampled by (PRINT): White

_ocation:

* Matrix Types: Soil/Solid (S), Sludge, Oil, Wipe, Drinking Water (DW), Groundwater (GW), Surface Water (SW), Waste Water (WW), Other (specify)

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Relinquished By (signature)

Received By (signature)