Sotheby's INTERNATIONAL REALTY Lakes

DISCLOSURE STATEMENT: WELL

This form approved by the Minnesota Association of REALTORS®, which disclaims any liability arising out of use or misuse of this form.

© 2017 Minnesota Association of REALTORS®, Edina, MN

|                                 | 1. Date_   |  |  |
|---------------------------------|--|--|--|
|                                 | 3. IS ATT  | 1 of pages: T<br>ACHED HERE AND M<br>OSURE                                     |  |
| 5.<br>6.<br>7.<br>8.<br>9.      | Minnesota Statute 103I.235 requires that, before signing an agreemed disclose information in writing to Buyer about the status and location of a is satisfied by delivering to Buyer either a statement by Seller that Sellor a disclosure statement indicating the legal description and county, at the disclosure statement Seller must indicate, for each well, whether the | all known wells on the pro<br>ler does not know of an<br>and a map showing the | operty. This requirement<br>y wells on the property,<br>ocation of each well. In |
| 10.<br>11.<br>12.<br>13.<br>14. | Unless Buyer and Seller agree to the contrary in writing, before the cl<br>the existence or known status of a well at the time of sale, and knew or<br>status of the well, is liable to Buyer for costs relating to sealing of the w<br>of costs from Seller, if the action is commenced within six years after<br>property where the well is located.                         | had reason to know of ell and reasonable attor                                 | the existence or known neys' fees for collection                                 |
| 15.<br>16.<br>17.<br>18.        | Legal requirements exist relating to various aspects of location contact the local unit(s) of government, state agency, or qualified proformation about these issues. For additional information on wells, ple website at www.health.state.mn.us.  | professional which regi  | lates wells for further  |
| 19.                             | Instructions for completion of this form are on page three (3).  |  |  |
| 20.                             | PROPERTY DESCRIPTION: Street Address:19150   | r Blvd   |  |
| 21.                             | Deephaven<br>(City)  | 55331<br>(Zip)   | Hennepin<br>(County)   |
| 23.<br>24.                      | WITH N LINE OF LOT 12 TH SELY AT AN ANGLE OF 97 DEG TO ROAD TH NELY ALONG SAID ROAD LINE TO E LINE OF LOT 13   | THE LEFT TO THE N  | LY LINE OF COUNTY  |
| 25.<br>26.                      | WELL DISCLOSURE STATEMENT: (Check appropriate boxes.)  | h  |  |
| 27.<br>28.                      | Well No. Depth Const. Type   | USE NOT IN USE   | SHARED SEALED  |
| 29.                             | Well 1 621556 139 Ft /29/00 Water Well   | X  |  |
| 30.                             | Well 2 H 0160633 134 ft 1/31/00 Water Well   |  |  |
| 31.                             | Well 3   |  |  |
| 32.                             | Is this property served by a well not located on the property?   |  | Yes No   |
| 33.                             | If "Yes," please explain:  |  |  |
| 34.                             |  |  |  |
| 35.<br>36.<br>37.<br>38.        | NOTE: See definition of terms "IN USE," "NOT IN USE," and "SEAL must be sealed by a licensed well contractor or a well ow the Minnesota Department of Health and pay an annual matransferable. If a well is operable and properly maintained   | ner must obtain a mai<br>aintenance fee. Mainte                                | ntenance permit from<br>nance permits are not                                    |
| 39.<br>40.                      | If the well is, "Shared":  (1) How many properties or residences does the shared well serve  | /e?  |  |
| 41                              | (2) Who manages the shared well?   |  |  |
| 42.                             | (3) Is there a maintenance agreement for the shared well?  |  | Yes No   |
| 43.                             | If "Yes," what is the annual maintenance fee? \$   |  |  |
| MALD                            | S:\W-1 (8/17)  |  |  |

MN-DS:W-1 (8/17)

Lakes Sotheby's

## **DISCLOSURE STATEMENT: WELL**

44. Page 2

| 45.                | Property located at 19150 Excelsion Blvd   | Deephaven                                    | MN                | 55331         |
|--------------------|--|--|-------------------|---------------|
| 46.                | OTHER WELL INFORMATION:  |  |                   |               |
| 47.                | Date well water last tested for contaminants: 5/27/17 Test   | results attached?                            | Yes               | ☐ No          |
| 48.                | Contaminated Well: Is there a well on the property containing contaminate  | ted water?                                   | Yes               | <b>∭</b> No   |
| 49.                | Comments:  |  |                   |               |
| 50.                |  |  |                   |               |
| 51.                |  |  |                   |               |
| 52.                | Section 1997   |  |                   |               |
| 53.                |  |  |                   |               |
| 54.                |  |  |                   |               |
| 55.                |  |  |                   |               |
| 56.                | SEALED WELL INFORMATION: For each well designated as sealed ab   | ove complete this ser                        | ction             |               |
| 57.                | 2/1/2000   |  |                   |               |
| 58.                | When was the well sealed? $\frac{2000}{RES}$ WELL DRILLING   | COMPANY                                      |                   |               |
| 59.                | Was a Sealed Well Report filed with the Minnesota Department of Health   |  | Yes               | □No           |
| 00                 |  |  |                   |               |
| 60 <i>.</i><br>61. | MAP: Complete the attached Location Map showing the location of This disclosure is not a warranty of any kind by Seller(s) or any licensee(              | each well on the real                        | property.         | nart(/iee) in |
| 62.                | this transaction and is not a substitute for any inspections or warranties the   | ne party(ies) may wish                       | to obtain.        | Jant(nes) III |
| 63.                | SELLER'S STATEMENT: (To be signed at time of listing.)   |  |                   |               |
| 64.<br>65.         | Seller(s) hereby states that the facts as stated above are true and accurate or assisting any party(ies) in this transaction to provide a copy of this D | and authorizes any lic                       | ensee(s) re       | presenting    |
| 66.                | in connection with any actual or anticipated sale of the property. A selle   | er may provide this Dis                      | sclosure St       | tatement to   |
| 67.<br>68.         | a real estate licensee representing or assisting a prospective buyer. The estate licensee representing or assisting a prospective buyer is considered    | Disclosure Statemer ed to have been provided | nt provided       | to the real   |
| 69.                | buyer. If this Disclosure Statement is provided to the real estate license   | e representing or ass                        | isting the        | prospective   |
| 70.                | buyer, the real estate licensee must provide a copy to the prospective bu  | •  |                   |               |
| 71.<br>72.         | Seller is obligated to continue to notify Buyer in writing of any facts (new or changed) of which Seller is aware that could adversely an                | that differ from the                         | facts disc        | losed here    |
| 73.                | enjoyment of the property or any intended use of the property that o   | ccur up to the time o                        | f closing.        | To disclose   |
| 74.                | new or changed facts, please use the Amendment to Disclosure Stateme   | ent form.                                    |                   |               |
| [                  | Docusigned by:  Andrew & Miller 8/3/2017 Mill Miller   |  | 8/3               | /2017         |
| 75.                | Jid voluer   | L <sub>FA</sub> L. MILLER                    |                   | (Date)        |
| 76.                |  |  |                   | , ,           |
| 77.                | BUYER'S ACKNOWLEDGEMENT: (To be signed at time of purchase as I/We, the Buyer(s) of the property, acknowledge receipt of this Disclosi                   | γreemenτ.)<br>ure Statement: Well a          | nd <i>Locatio</i> | n Map and     |
| 78.                | agree that no representations regarding facts have been made other than  | ղ those made above.                          |                   |               |
|                    |  |  |                   |               |
| 79.                | (Buyer) (Date) (Buyer)   |  |                   | (Date)        |
| 00                 | (,,  |  |                   | (500)         |
| 80.<br>81.         | LISTING BROKER AND LICENSEES MAKE NO REPRES NOT RESPONSIBLE FOR ANY CONDITIONS EXIST   |  |                   |               |
|                    |  |  |                   |               |

MN-DS:W-2 (8/17)

Lakes | Sotheby's

## **DISCLOSURE STATEMENT: WELL**

81. Page 3

| 82.                             | INSTRUCTIONS FOR COMPLETING THE WELL DISCLOSURE STATEMENT  |
|---------------------------------|--|
| 83.<br>84.                      | <b>DEFINITION:</b> A "well" means an excavation that is drilled, cored, bored, washed, driven, dug, jetted, or otherwise constructed if the excavation is intended for the location, diversion, artificial recharge, or acquisition of groundwater.  |
| 85.<br>86.<br>87.<br>88.<br>89. | MINNESOTA UNIQUE WELL NUMBER: All new wells constructed AFTER January 1, 1975, should have beer assigned a Minnesota unique well number by the person constructing the well. If the well was constructed after this date, you should have the unique well number in your property records. If you are unable to locate your unique well number and the well was constructed AFTER January 1, 1975, contact your well contractor. If no unique well numbe is available, please indicate the depth and year of construction for each well. |
| 90.                             | WELL TYPE: Use one of the following terms to describe the well type.   |
| 91.<br>92.                      | <b>WATER WELL:</b> A water well is any type of well used to extract groundwater for private or public use. Examples of water wells are: domestic wells, drive-point wells, dug wells, remedial wells, and municipal wells.   |
| 93.<br>94.                      | IRRIGATION WELL: An irrigation well is a well used to irrigate agricultural lands. These are typically large-diameter wells connected to a large pressure distribution system.   |
| 95.<br>96.                      | <b>MONITORING WELL:</b> A monitoring well is a well used to monitor groundwater contamination. The well is typically used to access groundwater for the extraction of samples.   |
| 97.<br>98.                      | <b>DEWATERING WELL:</b> A dewatering well is a well used to lower groundwater levels to allow for construction or use of underground spaces.   |
| 99.<br>100.<br>101.             | <b>INDUSTRIAL/COMMERCIAL WELL:</b> An industrial/commercial well is a nonpotable well used to extrac groundwater for any nonpotable use, including groundwater thermal exchange wells (heat pumps and hea loops).  |
| 102.                            | WELL USE STATUS: Indicate the use status of each well. CHECK ONLY ONE (1) BOX PER WELL.  |
| 103.<br>104.                    | IN USE: A well is "in use" if the well is operated on a daily, regular, or seasonal basis. A well in use includes a well that operates for the purpose of irrigation, fire protection, or emergency pumping.   |
| 105.<br>106.                    | <b>NOT IN USE:</b> A well is "not in use" if the well does not meet the definition of "in use" above and has not beer sealed by a licensed well contractor.  |
| 107.<br>108.<br>109.<br>110.    | <b>SEALED:</b> A well is "sealed" if a licensed contractor has completely filled a well by pumping grout materia throughout the entire bore hole after removal of any obstructions from the well. A well is "capped" if it has a metal or plastic cap or cover which is threaded, bolted or welded into the top of the well to prevent entry into the well. A "capped" well is not a "sealed" well.  |
| 111.<br>112.                    | If the well has been sealed by someone other than a licensed well contractor or a licensed well sealing contractor, check the well status as "not in use."   |
| 113.<br>114.                    | If you have any questions, please contact the Minnesota Department of Health, Well Management Section at (651) 201-4587 (metropolitan Minneapolis—St. Paul) or 1-800-383-9808 (greater Minnesota).   |

MN-DS:W-3 (8/17)

Lakes | Sotheby's

**LOCATION MAP**This form approved by the Minnesota Association of REALTORS®, which disclaims any liability arising out of use or misuse of this form. © 2009 Minnesota Association of REALTORS®, Edina, MN

|                       | WAGE TREATMENT SYS         | TEM WELL METH                 | AMPHETAMINE PRODUCT      | ION A |
|-----------------------|----------------------------|-------------------------------|--------------------------|-------|
| Include approximate d | stances from fixed referen | nce points such as streets, k | ouildings and landmarks. |       |
| Property located at   | 19150 Excelsion            | Blvd, Deephaven, MN 55        | 331                      |       |
|                       | House DLD EX               | N GARAGE STOR                 | Bevo                     |       |
|                       | sATTACH AD                 | DITIONAL SHEETS AS NE         | EDED.                    |       |

| WELL LOCATION County Name Hennepin |                        |                            | LL AN          | TA DEPARTMENT OF HEALTH D BORING RECORD Sola Slatutes Chapter 1031 | M  | 621556   |                              |                     |
|------------------------------------|------------------------|----------------------------|----------------|--|--|--|------------------------------|---------------------|
|                                    |                        | ango No. Section           |                |  | WELL DEPTH (completed)   | Date Work Co                                   |                              | ****                |
|                                    | 117                    | 22 30                      | NM"V           | IW SW  | 139  | " 1/29   | /00                          |                     |
| House Number, Street Name, C       |                        |                            | or Fire M      | 5533   | DRILLING METHOD  Cable Tool  | Javen  | [] Dug                       |                     |
| Show exact location of well in se  |                        |                            | Sketch map of  | CII  | □ Auger 🕵 🕏  | Rolary   | □ Jotte                      | 0                   |
|                                    | <b>A</b> I             | T                          | Showing pr     | reparty lines.<br>nd buildings                                     | DRILLING FLUID   | Wall Incom                                     | OFRACTURED?                  |                     |
| CTTT TOTAL                         | , ,                    | •                          |                |  | bentonite  |  |                              |                     |
|                                    | 1                      |                            | 1              | X  | USE  | dunitoring                                     |                              | ng/Cooiing          |
| w                                  | E-                     |                            | $^{L}$         | )  | inguion □ N  | Community PWS<br>lancommunity PW<br>Dawatering | : Indus                      | try/Commercial      |
|                                    | V <sub>2</sub> srie    | \                          | _ ]]           |  | CASING Drva Shoo?  |  |                              | HOLE DIAM           |
| · 以5                               |                        | ld Excelsi                 | Or Blv         | d.   | CASING DIAMETER WER  | GHT  |                              |                     |
| PROPERTY OWNER'S NAI               | ME                     |                            |                |  | 4 m to 139 R   | 20   | 0bs/#                        | 8 in to 48 ft       |
| Don Anthony                        | The later of the later | The same was reasonable to |                |  | in. to It  |  |                              | 6 3n 14 41 1        |
| Property owner's mailing address   | s if different than v  | vell location address      | ndicated above |  | - in to 1  |  | Nos /ft.                     | in lo if            |
|                                    |                        |                            |                |  | Make Biy Foot  | OPENII   |                              |                     |
|                                    |                        |                            |                |  | Type Slot  | trom   | 4"                           | ю                   |
|                                    |                        |                            |                |  | Slot/Gauze 12  | Langth   | 10'                          |                     |
|                                    |                        |                            |                |  | Set between 129 th and 13  | L.S. LIG FITTI                                 | NGS:                         |                     |
| WELL OWNER'S NAME                  |                        |                            |                |  | STATIC WATER LEVEL 8.5 H.X. below [] a   | bove land surface                              | Date measur                  | red                 |
| Well owner's malting address if d  | itterent than prope    | arty owner's address       | ndicaled above |  | PUMPING LEVEL (below land surface)  85 th after 3  | hre  | numislan                     | 30                  |
|                                    |                        |                            |                |  | WELL HEAD COMPLETION   |  |                              |                     |
|                                    |                        |                            |                |  | Pilless adapter manufacturor Win i + p   | water  | Model _S.~                   | 5-4                 |
|                                    |                        |                            |                |  | CT Casing Protection  C At grade (Environmental Wells and Boungs                                   | ONLY   | () 12 Jn abov                | e grade             |
|                                    |                        |                            |                |  | GROUTING INFORMATION   |  |                              |                     |
| GEOLOGICAL MATERIAL                | s con                  | OR HARONE                  | SS OF FROM     | и то   | Well glouled? May Yes ☐ No<br>Grout Material ☐ Neal cement ☐ Be                                    | antonite     Cor                               | ncrele 😥 Híah                | Solids Bentonite    |
|                                    |                        | MATE                       | SIAL           | -  | - born_48 to   | n  | WL. 5.                       | () yds 🚛 bags       |
| sand & gravel                      | brow                   | n soft                     |                | 0 9  | from to<br>from to   |  |                              | _ Cl yds Cl bags    |
| sandy clay                         | brow                   | n med.                     |                | 9 14   | NEAREST KNOWN SOURCE OF CONTAMIN   | NATION   |                              |                     |
|                                    | DION                   | ii licu.                   |                | 7  | Well disinfected upon completion? Jil Yea  | T No   | uirection se                 | wer pipe            |
| sand & clay                        | blue                   | med.                       | 1              | 4 21   | 1  | 13 700   |                              |                     |
|                                    |                        |                            |                | 1  | L Not installed Date installed   | 1/29   | /00                          |                     |
| sand                               | mix                    | med.                       | 2              | 1 37   | Manulacturar's nameSta-Ri  |  |                              |                     |
| sandy clay &                       |                        |                            |                | 1  | Model number   | HP   | 3/4 Volta                    | 230                 |
| sand                               | olue                   | med.                       | _ 3            | 7 75   | Length of drop pipe1 2.0   | Л. Сира  |                              | 10 .gpm             |
| sandy clay                         | prow                   | m mod                      | 7              | 5 117  | Type: Submereible [1 LS. Turbino 8   | . Heciprocating                                | Li Jet L)                    |                     |
| Burry CLUY                         | DIOW                   | n med                      |                | 7 11.  | ABANDONED WELLS  |  |                              | 4                   |
| sand                               | mix                    | med.                       | 11             | 7 141  | Opes proporty have any not in use and not sea<br>VARIANCE  | led wall(s)?                                   | Yes 🔏 No                     |                     |
|                                    |                        |                            |                |  | Was a variance granted from the MDH for this   | woll? [7] Yas                                  | Ç∈ No                        |                     |
|                                    |                        |                            |                | -  | WELL CONTRACTOR CERTIFICATION  |  | X                            |                     |
| Use a se                           | econd sheet, if nee    | aded 301                   | 51612          |  |  |  | NAME OF THE OWNER.           |                     |
| REMARKS, ELEVATION, SC             | URCE OF DAT            | FA, otc. TASA              | A 101/18/93    | <u>}</u>   | This well was drilled under my supervision and<br>The information contained in this region is true | to the best of my                              | th Minnesota Hu<br>knowledge | iles, Chapler 4725, |
|                                    |                        | (8) MA                     | U5000          | <u>[3]</u>   | RES Well Drilling  |  | 27.2                         | 76                  |
|                                    |                        | S DE                       | CEIVED         | 23   | Consee Business Rame   |  | Lic or Reg A                 | ./                  |
|                                    |                        | WE WE                      | LL MGT.        | 2  | 1600 X60   | the  | 1/3                          | 1100                |
|                                    |                        | /c. "                      | راي            | 7  | Authorized Representative Sign   | state  | 1 0                          | at b                |
|                                    |                        | 100                        | 5.255 Jan      |  | Robert E. stodola  | Jr.  | 1/31/                        | 00                  |
| MINN. DEPT. O                      | EUENT                  |                            | 621            | 556  | Name of Oritor   | g - W, & A                                     | 0                            | ale                 |
| WINTER DEFT. U                     | T NEAL)                | n COPY                     | 021            |  |  |  | HE-0                         | 1205-08 (Rev. 9/97) |

| WELL OR BORING LOCATIO County Name Hennepin              | N                      | WELL               | AND I                     | BOR      | PEPARTMENT OF HEALTH RING SEALING RECORD  a Statutes, Chapter 1031  Minnesota Well and Boring Sealing No. Minnesota Unique Well No. or W-series No. (Lever black if not known) | 0633                      |
|--|------------------------|--------------------|---------------------------|----------|--|---------------------------|
| Township Name Townshi                                    | p No Range No          | Section No. F      | raction (sm               | . → lg ) |  |                           |
| eephaven 1   | 17 22                  | 30                 | la la                     | a 16     | 1/31/00  |                           |
| Numerical Street Address or Fir                          |                        |                    |                           |          |  |                           |
|  |                        | r Blvd             | . De                      | eph      | 1 Drew More Sealing 134 th Original Depth 134 th   |                           |
| Show exact location of well or bin section grid with "X" | oring A                | location;          | p of well or<br>showing p | roperty  | g AQUIFER(S)  STATIC WATER LEVEL  STATIC WATER LEVEL   |                           |
| N  | /\                     | lines, road        | s, and build              | dings    | WELL/BORING DEStimated   |                           |
|  |                        |                    |                           |          | Water Supply Well  |                           |
|  |                        | - 6                |                           |          | ☐ Env Bore Hole ☐ Other ☐ above land su  | irface                    |
| w  | E "                    | X                  |                           | 7        | CASING TYPE(S)   |                           |
|  |                        | -                  | 1_                        | ļ        | Steel Plastic Tile Other   |                           |
|  | ½ milo                 |                    | 71                        |          | CASING(S)  |                           |
| Lilli S  | <u></u>                |                    | $\perp$                   |          |  | e initially grouted?      |
| t mile —   | 46                     |                    |                           |          |  | No Unknown                |
| PROPERTY OWNER'S NAME                                    | ,                      |                    |                           |          | in from to fl  | No Unknown                |
| Property owner's mailing address                         | different then well in | ocation address in | dicated abou              | /8       | in_fromtoft [] Yes [] No [] Yes [  | ] No □ Unknown            |
| ,                  | N. Venkethelli         |                    |                           | -        | SCREEN/OPEN HOLE   |                           |
|  |                        |                    |                           |          |  |                           |
|  |                        |                    |                           |          | Screen from 130 to 134 ft Open Hole from to  | h.                        |
| WELL OWNER'S NAME  |                        |                    |                           |          | OBSTRUCTIONS   |                           |
|  |                        |                    |                           |          | Rods/Drop Pipe Check Valve(s) Debris Fill No Obstruction   |                           |
| Well owner's mailing address if diffe                    | erent than property o  | wner's address in  | ficated abov              | ro.      | Type of Obstructions (Describe) pump, pipe   |                           |
|  |                        |                    |                           |          | Obstructions removed? 🙀 Yes 🗌 No Describe  |                           |
|  |                        |                    |                           |          | PUMP   |                           |
|  |                        |                    |                           |          | Type <u>jet</u>  |                           |
| GEOLOGICAL MATERIAL                                      | COLOR                  | HARDNESS OF        | FROM                      | TQ       | ☐ Removed ☐ Not Present ☐ Other  |                           |
| If not known, indicate estimated for                     | mation log from near   |                    |                           |          | METHOD USED TO SEAL ANNULAR SPACE BETWEEN 2 CASINGS, OR CASING AND BORE HOL  | .E:                       |
| drift  |                        |                    | 0                         | 134      | A Annular Space Exists   |                           |
|  |                        |                    |                           |          | □ Annular space grouted with tremie pipe     □ Casing Perforation/Removal  |                           |
|  |                        |                    | $\vdash$                  |          | _  | Π.                        |
|  |                        |                    |                           |          | in from to tt. Perforated  | Removed                   |
|  |                        |                    |                           |          | in from to ft Perforated   | Removed                   |
|  |                        |                    |                           |          | Type of perforator   |                           |
|  |                        |                    |                           |          |  |                           |
|  |                        |                    | $\vdash$                  |          | Other  |                           |
|  | -                      |                    | $\vdash$                  |          | GROUTING MATERIAL(S) (One bag of cement = 94 lbs., one bag of bentonite = 50 lbs.)   |                           |
|  |                        |                    |                           |          | Grouting Material Portland from 134 to 0 ft yards  | 3 baos                    |
|  |                        |                    |                           |          |  |                           |
|  |                        |                    |                           |          | from to ft yards   | bags                      |
|  |                        |                    |                           | _        | from to tt yards   | bags                      |
|  |                        |                    |                           |          | trom to till yards   | hnee                      |
|  |                        |                    |                           |          |  | Dags                      |
| REMARKS, SOURCE OF DATA                                  | i, DIFFICULTIES II     | N SEALING          |                           |          | OTHER WELLS AND BORINGS  |                           |
|  |                        |                    |                           |          | Other unsealed and unused well or boring on property? Yes K No How many?   |                           |
|  |                        |                    |                           |          | LICENSED OR REGISTERED CONTRACTOR CERTIFICATION  |                           |
|  |                        |                    |                           |          | This well or boring was sealed in accordance with Minnesota Rules, Chapter 4725. The information could true to the best of my knowledge.                                       | ntained in this report is |
|  |                        |                    |                           |          |  |                           |
|  |                        |                    |                           |          | RES Well Drilling 27276 Contractor Business Name License or Regis  | tention to                |
|  |                        |                    |                           |          | Constant Districts Halls   | 11.                       |
|  |                        |                    |                           |          | Red Stodes 214   | 100                       |
|  |                        |                    |                           |          | Authorized Representative Signature Date   |                           |
|  |                        |                    |                           |          | James Les  |                           |
| WEYLK  | hara I                 | 1000               | 2.2                       |          | James Lea Name of Person Sealing Well or Borting   |                           |
| HORZEK K.  | Н.                     | 16063              | 55                        |          |  |                           |

DocuSign Envelope ID: 67CBDB2A-844E-4415-BBB1-64D0A192782D



9300 Poplar Bridge Road • Bloomington, MN 55437 • (952) 563-4904

| Well Water Testing                    | Sample Results Report | • |
|---------------------------------------|-----------------------|---|
| , , , , , , , , , , , , , , , , , , , | Report Date:          |   |
|                                       | 05/26/2017 14:52      |   |
|                                       |                       | _ |

Received By:

Bree Landherr

**Sample Condition Upon Receipt:** 

Received Date / Time:

25-May-2017 13:15

Y Acceptable

Sample ID:

1705178-01

19160 Excelsior Blvd., Excelsior, MN 65331

Sample Collector: Ralph Miller

Collection Date/Time: 5/25/2017 12:30:00PM

| Analyte            | Result  | Units          | MCL*   |      | Date<br>Analyzed | Analyst<br>Initials | Method             |
|--------------------|---------|----------------|--------|------|------------------|---------------------|--------------------|
| Arsenic            | 8.66    | ug/L           | 10     | PASS | 05/26/2017       | BL.                 | EPA 200.7 Rev. 4.4 |
| Nitrate as N       | <0.0200 | mg/L           | 10     | PASS | 05/25/2017       | BL                  | EPA 353.2 Rev. 2.0 |
| P/A total collform | Absent  | coliform/100mL | Absent | PASS | 05/25/2017       | BL                  | Readycult® P/A     |

<sup>\*</sup>MCL (maximum contaminant level) set by the EPA

PASS - The analyte(s) reported, for the sample(s) listed above, meet standards set by the Minnesota Department of Health and U. S. Environmental Protection Agency for safe drinking water.

Approved By:

Bree Landherr Laboratory Analyst

Laboratory Identification Number: 027-053-355

The results in this report apply to the above listed sample(s). All routine quality assurance procedures were followed, unless otherwise noted. This analytical report must be reported in its entirety. All methods are certified by the Minnesota Department of Health, unless otherwise noted. EPA 200.7 for the anlaysis of lead in drinking water is not certifiable by the MDH.