

(509) 885-1888
Fax: (509) 885-0422
2000 2nd Center Street
Wenatchee, WA 98801

Batch: 816449
Client: Tumwater Drilling & Pump Inc
Account: 367
Sampler: TD

WSDH #10508301

800-845-4226

--- Drinking Water Report ---

Report Date: 5/23/08

Tumwater Drilling & Pump Inc
P.O. Box 777
Leavenworth, WA 98826

RECEIVED
5/23/08

Date Received: 5/22/08

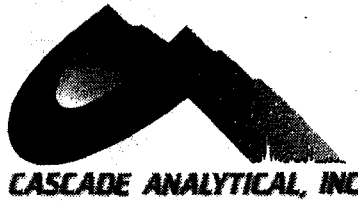
Date Sampled: 5/21/08

Lab Number	Sample Id	Test Requested	Results
08-M008301	Hwy 97A Entiat	Total Coliform Colilert	Negative

Approved By:

Cascade Analytical uses procedures established by EPA, AOAC, APHA, ASTM, and AWWA. Cascade Analytical makes no warranty of any kind the client assumes all risk and liability from the use of these results. Cascade Analytical, Inc.'s liability to the client as a result of use of Cascade's test results shall be limited to a sum equal to the fees paid by the client to Cascade Analytical, Inc. for analysis.

1008 W. Ahtanum Rd.
 Union Gap, WA 98903
 (509) 452-7707
 Fax: (509) 452-7773



3019 G.S. Center Rd.
 Wenatchee, WA 98801
 (509) 662-1888
 Fax: (509) 662-8183

Billing Code: 367
 Batch #: 822562

NITRATE & NITRITE ANALYTICAL REPORT

Send Report to: <u>Tumwater Drilling & Pump Inc</u> <u>P.O. Box 777</u> <u>Leavenworth, WA 98826</u>	Bill to: (Client Name) <u>Tumwater Drilling & Pump Inc</u> <u>PO Box 777</u> <u>Leavenworth, WA 98821</u>
Date Collected: (MM/DD/YY) <u>10</u> / <u>31</u> / <u>08</u>	System Group Type: (Circle one) A B Other: (Specify) <u>X</u>
Water System ID Number _____	System Name: <u>Joshua Corning</u>
Lab -- Sample Number <u>105</u> -- <u>021504</u>	County: <u>Chelan</u>
Sample Location: <u>BAP 492</u>	Source Numbers(s) _____
Sample Purpose: (Check Appropriate Box) <input checked="" type="checkbox"/> RC - Routine/Compliance (satisfies monitoring requirements) <input type="checkbox"/> C - Confirmation (confirmation of chemical result) <input type="checkbox"/> I - Investigative (does not satisfy monitoring requirements) <input type="checkbox"/> O - Other (specify) _____	Date Received: (MM/DD/YY) <u>10</u> / <u>31</u> / <u>08</u> Date ^{Analyzed} Reported: (MM/DD/YY) <u>11</u> / <u>3</u> / <u>08</u> Date ^{Reported} Received: (MM/DD/YY) <u>11</u> / <u>6</u> / <u>08</u> COMMENTS: _____
Sample Composition: (Check Appropriate Box) <input checked="" type="checkbox"/> S - Single Source <input type="checkbox"/> B - Blended (List Multiple Source Numbers in Source Nos. field) <input type="checkbox"/> C - Composite (Specify in Comments field) <input type="checkbox"/> D - Distribution sample	Sample Type: (Check one) <input checked="" type="checkbox"/> Pre-Treatment/Raw <input type="checkbox"/> Post-Treatment/Finished <input type="checkbox"/> Unknown Sample Collected by: <u>Client</u> Phone Number: <u>509-548-5361</u>

EPA/STATE REGULATED

DOH #	ANALYTE	RESULTS	UNITS	SRL	TRIGGER	MCL	MCL EXCEEDED	Date Analyzed	METHOD/Analyst Initials
0020	Nitrate-N	3.33	mg/L	2	5.0	10.0	No	11/03/08	4500N03-F/CTG
0114	Nitrite-N	< 0.07	mg/L	0.2	0.5	1.0	No	11/03/08	4500N02-F/CTG
0161	Total Nitrate + Nitrite	3.33	mg/L	2	--	10.0	No	11/03/08	4500N03-F/CTG

NOTES:

SRL (State Reporting Level): The minimum reporting level established by the Washington State Department of Health (DOH)
Trigger Level: DOH Drinking Water response level. Systems with compounds detected at concentrations in excess of this level may be required to take additional samples or monitor more frequently. Please contact your DOH drinking water regional office for further information.
MCL (maximum Contaminant level): If the contaminant amount exceeds the MCL, please contact your regional DOH office to determine follow-up actions.
NA: Not Analyzed: In the results column, indicates this compound was not included in the current analysis.
ND (Not Detected): In the results column, indicates this compound was analyzed and not detected at a level greater than or equal to the SRL.
<(0.00X): The compound was not detected in the sample at or above the concentration indicated (usually the lab MRL).

Comments: *Joshua Corning*



(509) 452-7707
 Fax: (509) 452-7773
 1008 W. Ahtanum Rd.
 Union Gap, WA 98903

CASCADE ANALYTICAL, INC.
1-800-545-4206

(509) 662-1888
 Fax: (509) 662-8183
 3019 G.S. Center Road
 Wenatchee, WA 98801

COLIFORM BACTERIA ANALYSIS

DATE COLLECTED MONTH DAY YEAR 10/31/08			TIME COLLECTED : : <input checked="" type="checkbox"/> AM <input type="checkbox"/> PM	COUNTY NAME CHELAN
--	--	--	---	-----------------------

TYPE OF SYSTEM (check only one box) <input type="checkbox"/> GROUP A PUBLIC <input type="checkbox"/> GROUP B PUBLIC <input checked="" type="checkbox"/> PRIVATE WELL		IF PUBLIC SYSTEM, COMPLETE: I.D. No. <table border="1" style="display: inline-table; width: 100px; height: 20px;"> <tr><td> </td><td> </td><td> </td><td> </td><td> </td><td> </td></tr> </table>						

NAME OF SYSTEM
 Joshua Corning

SPECIFIC LOCATION WHERE SAMPLE COLLECTED (ADDRESS OR FAUCET TYPE) 777 East mt. wt.	TELEPHONE NO. DAY () EVENING ()
--	---

SAMPLE COLLECTED BY: (Name) Tim Water Drilling	SYSTEM OWNER/MGR: (Name)
---	--------------------------

SOURCE TYPE SURFACE WELL or WELL FIELD SPRING

SEND REPORT TO: **Tim Water Drilling & Pump Inc**
PO Box 777
LEAVENWORTH WA 98945

BILL TO:

Type of Sample (must check only one box of #1 through #4 listed below)

1. <input type="checkbox"/> Routine Distribution Sample Provide information below: <input type="checkbox"/> Chlorinated: Residual: Total _____ Free _____ <input type="checkbox"/> Filtered	2. <input type="checkbox"/> Repeat Sample (follow-up to an unsatisfactory sample) Provide information below. Unsatisfactory routine lab number: _____ Unsatisfactory routine collect date: ____/____/____
3. <input type="checkbox"/> Raw Water Source Sample Required for Surface Water, GWI, and some Spring Sources) _____ Public Systems must provide Source Number from (WFI) _____	Chlorinated: Yes _____ No _____ Chlone Residual: Total _____ Free _____
4. <input checked="" type="checkbox"/> Sample Collected for Information Only Construction _____ Repairs _____ Survey _____ Other _____	

Special Request

(LAB USE ONLY) DRINKING WATER RESULTS

<input checked="" type="checkbox"/> UNSATISFACTORY, Total Coliforms present	<input checked="" type="checkbox"/> SATISFACTORY, Total Coliforms absent
REPEAT SAMPLES REQUIRED	
<input type="checkbox"/> E. Coli present <input type="checkbox"/> Fecal present	<input type="checkbox"/> E. Coli absent <input type="checkbox"/> Fecal absent

OTHER LABORATORY RESULTS

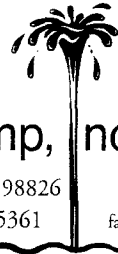
TOTAL COLIFORM <1.1 /100ml E. COLI _____ /100 ml
 FECAL COLIFORM _____ /100 ml PLATE COUNT _____ /CFU/ml

SAMPLE NOT TESTED BECAUSE:

<input type="checkbox"/> Sample too old (30 hours)	<input type="checkbox"/> TINTC
<input type="checkbox"/> Wrong container	<input type="checkbox"/> Turbid culture
<input type="checkbox"/> Incomplete form	

Method Code: MICR- 260

DATE, TIME RECEIVED 10/31/08	RECEIVED BY [Signature]
LAB NO. (8 DIGITS) 10501503	DATE ANALYZED 11/08
	DATE REPORTED 11/08



Tumwater Drilling & Pump, Inc.

mailing address: P.O. Box 777, Leavenworth, WA 98826

location: 9290 Hwy 2, Dryden, WA 98821

phone: (509) 548-5361

fax: (509) 548-1100

RE: SHARED WELL PUMP INFORMATION FOR POTENTIAL BUYER

Tumwater Drilling & Pump Inc. has made sharing a well a very easy and stress free. Each lot owner can have their own individual pump in a shared well. This keeps the pumps and power connections separate. The pumps that we use are unique in that they are smaller in diameter than a conventional well pump. This allows us to place two pumps in tandem in a 6" well.

This pump has many great features, such as soft start and soft stop technology; this eliminates torque down the well and eliminates noise in the house. Variable speed / frequency drive, which keeps the water pressure within 2psi of your desired pressure giving you "City like pressure". Compact pressure tank of only 2.1 gallons eliminates the need for a much larger and bulky conventional 85 gallon pressure tank. This allows us to keep the equipment much more compact.

Tumwater Drilling & Pump inc. is also a full service provider for all major brands of domestic pumps, irrigation pumps and water treatment systems.

We would be happy to discuss any questions you may have and encourage you to contact us. Our office is located at 9290 Hwy 2, near Dryden, WA. Office hours are M-F 7am-4pm. Or you can contact us by phone or E-mail at 509-548-5361 & h2o@tumwaterdrilling.com.