



14-9410-32 (Stamp)

WATER WELL STATUS REPORT

Minnesota Department of Health
Well Management Section, P.O. Box 64975, St. Paul, Minnesota 55164-0975
651/201-4600 or 800/383-9808

Identification No. 461826-1

Status of Well: NOT IN USE
Total Number of Wells Disclosed: 1

Letter Type: A
Date: May 11, 2010
Minnesota Unique Well No.: Not Known

LEGAL DESCRIPTION OF WELL LOCATION County: Hennepin
11651 DOUGLAAS DRIVE N CHAMPLIN 55316
Lot Location : None
Plat Location: Lot 1 Block 4 Addition FAIRVIEW GARDENS
Location ID(s): None

PROPERTY OWNER MAILING ADDRESS

HENNEPIN COUNTY PUBLIC WORKS
1600 PRAIRIE DRIVE
MEDINA MN 55340

Daytime Telephone Number
612/596-0321

1. Please review the legal description of well location and property owner mailing address printed above, make any corrections or changes that are necessary, and provide a daytime telephone number. The legal description includes the section and township and is available from the county recorder or assessor.

2. Please check the present status of the well and then continue to items 3 and 4 below.

[] Well is "in use." If the well was in use when you purchased the property, check here []

The well is operated on a daily, regular, or seasonal basis which may include a well that operates for the purpose of irrigation, fire protection, or emergency pumping.

[X] Well is "not in use."

The well does not meet the definition of "in use" above and has not been sealed by a licensed well contractor or a licensed well sealing contractor.

[] Well is "sealed."

A licensed well contractor or a licensed well sealing contractor has pumped grout material throughout the entire bore hole after removal of the pump and 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 onto the top of the well to prevent entry into the well. A "capped" well is not a "sealed" well. If the well is not in use and has not been sealed by a licensed well contractor or a licensed well sealing contractor, check the well status as "not in use."

3. Please follow the instructions that apply to the status of the well.

If you checked "in use" above, and the well was placed back in use after you purchased the property, please attach a copy of the well contractor's invoice, equipment receipts, or a description of the work performed.

If you checked "not in use" above, you can either:

- A. Have the well put back into service within 60 days. After the work is completed, check the status of the well as "in use" and send in this form with a copy of the well contractor's invoice, equipment receipts, or a description of the work performed.
B. Have the well sealed by a licensed well contractor or a licensed well sealing contractor within 60 days. After the well has been sealed, check the status as "sealed" and send in this form along with the Well and Boring Sealing Record.
C. Apply for a maintenance permit by completing the MAINTENANCE PERMIT APPLICATION on the back of this form and returning it with a check or money order for \$175 made payable to the Minnesota Department of Health. If approved, the maintenance permit must be renewed annually and will require an annual fee.

If you checked "sealed" above, attach a photocopy of the Well and Boring Sealing Record or Abandoned Well Record, which you should receive directly from the licensed contractor. Please be sure to keep your copy of this record with your important papers.

4. Please sign the form and return it to the Minnesota Department of Health within 60 days.

I certify that the information provided on this form is true to the best of my knowledge.

Property Owner Signature

Date