

EXHIBIT H



*Delivering more than
just test results*

ALG ORELAP ID #OR100012
361 West 5th Ave
Eugene, OR 97401
TEL: (541) 485-8404 FAX: (541) 484-5995
Website:

May 01, 2023

Norm Wells
Ray Wells, Inc.
PO Box 3467
Florence, OR 97439
TEL: (541) 991-0938
FAX (541) 997-3499

RE: Stonefield Ct

Order No.: 2304A03

Dear Norm Wells:

Analytical Laboratory Group received 2 sample(s) on 4/28/2023 for the analyses presented in the following report.

A handwritten signature in black ink that reads 'Teresa Garcia' in a cursive script.

Teresa Garcia
Quality Manager Assistant
361 West 5th Ave
Eugene, OR 97401



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Website:

Case Narrative

WO#: 2304A03

Date: 5/1/2023

CLIENT: Ray Wells, Inc.

Project: Stonefield Ct

This report presents the results of the analyses of the sample(s) received on the date above and assigned the listed Analytical Laboratory Group Analytical Report numbers. Test results relate only to the parameters tested and to the samples as received by the laboratory.

This report shall not be reproduced, except in full, without written consent of Analytical Laboratory Group, Inc.

All analyses were performed according to the Analytical Laboratory Group, Inc. Quality Assurance Program. All QA/QC requirements were met except as noted below.

Analytical comments are noted with qualifiers (see "Qual" column) or data flags on the reports and/or below.

Original

WO#: 2304A03
CLIENT: Ray Wells, Inc.
Location:
Project: Stonefield Ct
Sample Source:

Received Date: 4/28/2023 9:48:00 AM
Sampler Name: Zevion Statler
Matrix: Drinking Water
Treatment:

Lab ID: 2304A03-001 **Client Sample ID** End of Line **Collection Date:** 4/27/2023 10:30:00 A

Analyses	Method	Result	MCL	PQL	Qual	Units	Date Analyzed	Analyst
Coliform, Total	SM 9223B	Absent		0	P/A		4/28/2023 11:47:00 AM	JL
E. coli	SM 9223B	Absent		0	P/A		4/28/2023 11:47:00 AM	JL

Lab ID: 2304A03-002 **Client Sample ID** End of Line **Collection Date:** 4/28/2023 8:15:00 AM

Analyses	Method	Result	MCL	PQL	Qual	Units	Date Analyzed	Analyst
Coliform, Total	SM 9223B	Absent		0	P/A		4/28/2023 11:47:00 AM	JL
E. coli	SM 9223B	Absent		0	P/A		4/28/2023 11:47:00 AM	JL

Qualifiers:	* Value exceeds Maximum Contaminant Level (MCL)	A Accredited by ORELAP
	C Value is below Minimum Compound Limit.	E Value above quantitation range
	H Holding times for preparation or analysis exceeded	LOD Limit of Detection
	MCL Maximum Contaminant Level	NAR See note in Case Narrative
	ND Not Detected at the Reporting Limit	PL Permit Limit
	PQL Practical Quantitation Level or Reporting Limit	R RPD outside accepted recovery limits



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Eugene, OR 97401

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Website:

Definition Base

WO#: 2304A03

Date: 5/1/2023

Definitions:

Qualifiers:

- * Value exceeds Maximum Contaminant Level (MCL)
- A Accredited by ORELAP
- C Value is below Minimum Compound Limit.
- E Value above quantitation range
- H Holding times for preparation or analysis exceeded
- LOD Limit of Detection
- MCL Maximum Contaminant Level
- NAR See note in Case Narrative
- ND Not Detected at the Reporting Limit
- PL Permit Limit
- PQL Practical Quantitation Level or Reporting Limit
- R RPD outside accepted recovery limits
- U Samples with CalcVal < MDL
- W Sample container temperature was outside of the limits as specified by the method.

Original



ALG ORELAP ID #OR100012
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 Eugene, OR 97401
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 Website:

Accreditation Program Analytes Report

WO#: 2304A03
 01-May-23

Client: Ray Wells, Inc.
Project: Stonefield Ct

Program Name	Sample ID	ClientSampleID	Matrix	Test Name	Analyte	Status
ORELAP	2304A03-001A	End of Line	Drinking Water	Coliform Presence/Absence by SM 9223B	Escherichia Coli	A
					Coliform, Total	A
	2304A03-002A				Escherichia Coli	A
					Coliform, Total	A

ORELAP A Accredited

ACCREDITED

Original #2304A03# v1



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361 WEST FIFTH AVENUE
 EUGENE, OREGON 97401
 Phone: 541-485-8404 Fax: 541-484-5995
 Email: alglabs@alglabsinc.com

LIMS: CB
 Checked: RP

DW GENERAL CHAIN OF CUSTODY

Report to: Norm Wells	Company: Ray Wells, Inc.
Phone: 541-991-0938	Address: PO Box 3467
Email: norm@raywellsinc.com	City, State, Zip: Florence, OR 97439
Client Project: <u>STONEFIELD CT.</u>	Sampler Name: <u>ZEVION STATLER</u>

Sample Point	Sample Matrix & Grab/Comp	Collection		Analysis Requested	Bottles -Lab Use Only				
		Date	Time		Type	#	Pres	T °C	Lab ID
<u>END OF LINE</u>	<u>DW/Grab</u>	<u>4-27</u>	<u>10:30</u>	<u>CF-PA</u>	<u>M</u>	<u>1</u>	<u>Na2S2O3</u>	<u>5.2</u>	<u>001A</u>
<u>END OF LINE</u>	<u>DW/Grab</u>	<u>4-28</u>	<u>8:15</u>	<u>CF-PA</u>	<u>M</u>	<u>1</u>	<u>Na2S2O3</u>	<u>7.2</u>	<u>002A</u>

Notes:	PAID	Preservation Check				
	Receipt #	Lab ID	Date/Time	Pre-Preserved	pH	Tech
	CC					
	CK					
	Cash					
	REPORT					
	Mail					
Email						
Fax						
Pickup						

Turn Around Time Requested (Rush incurs a Surcharge):	Shipped Via:	Refrigerated	
<input checked="" type="checkbox"/> NORMAL <input type="checkbox"/> RUSH	<u>John Kaufman</u>	<input checked="" type="radio"/> Ice	<input type="radio"/> None

Relinquished by:	Date	Time	Received by:	Date	Time
<u>[Signature]</u>	<u>4/28</u>	<u>9:47</u>			
Relinquished by:	Date	Time	Received by:	Date	Time
Relinquished by:	Date	Time	Received by Laboratory:	Date	Time
			<u>Chris Becker</u>	<u>4/28/23</u>	<u>9:48</u>