



MINNESOTA DEPARTMENT OF HEALTH
SECTION OF DRINKING WATER PROTECTION
Report of Analytical Results



625 Robert St. N. St. Paul MN 55155
P.O. Box 64975 St. Paul MN 55164 - 0975

Final Report - Client Copy

The following are the results of your quarterly fluoride sample analysis required for compliance with Minnesota Rules, Chapter 4720, part 4720.0030. If you have any questions concerning these results, please contact David Vaaler at 651-201-4674 or email david.vaaler@state.mn.us.

System Name: Henderson

PWSID: 1720006

Date Collected: 03/28/2024

Lab Sample #: 24C1205-01

Date Received: 03/28/2024

Field #:

Date Analyzed: 03/29/2024

Collector Name: James Kroehler

Sampling Point: 600 Main Street Henderson

Reporting Limit: 0.2

Lab Result: 0.59

Units: mg/L

Field Result: 0.65

PO4 Residual: 1.2

(Field)

Lab Comments:

Recommended Actions

Comments

WATER SUPERINTENDENT
HENDERSON CITY HALL
600 MAIN STREET, P.O. BOX 433
HENDERSON MN 56044

Date Report Generated: 4/9/2024