



EDMUND G. BROWN JR.  
GOVERNOR



MATTHEW RODRIGUEZ  
SECRETARY FOR  
ENVIRONMENTAL PROTECTION

**State Water Resources Control Board**  
Division of Drinking Water

November 4, 2014  
System No.: 1500561

Mr. Greg Watson, President  
Round Mountain Water Company  
5544 Adolphus Avenue  
Bakersfield, CA 93308

RE: **Citation No. 03-12-14C-038**  
**Violation of Title 22, California Code of Regulations, Section 64426.1,**  
**For September 2014**

Dear Mr. Watson:

Enclosed is a Citation issued to the Round Mountain Water Company (Water Company) public water system.

The Water Company will be billed at the Division's hourly rate (currently estimated at \$126.00) for the time spent on issuing this Citation. The California Health and Safety Code Section 116577 provides that a public water system must reimburse the Division for actual costs incurred by the Division for specified enforcement actions, including but not limited to, preparing, issuing and monitoring compliance with a citation. At this time, the Division has spent approximately one and one half hours on enforcement activities associated with this violation.

The Water Company will receive a bill sent from the Division of Drinking Water Fee Billing Unit in August of the next fiscal year. This bill will contain fees for any enforcement time spent on Round Mountain Water Company for the current fiscal year.

If you have any questions regarding this letter and the enclosed citation, please contact the Visalia District office at (559) 447-3300.

Sincerely,

A handwritten signature in cursive script that reads "Tricia A. Wathen".

Tricia A. Wathen, P.E.  
Senior Sanitary Engineer, Visalia District  
SOUTHERN CALIFORNIA BRANCH  
DRINKING WATER FIELD OPERATIONS

TAW/SF

Enclosures

cc: Michael Martin, Operator, 5342 Adolphus Avenue, Bakersfield, CA 93308  
Kern County Environmental Health Department

STATE OF CALIFORNIA  
WATER RESOURCES CONTROL BOARD  
DIVISION OF DRINKING WATER

IN RE: **ROUND MOUNTAIN WATER COMPANY**  
Water System No. 1500561

TO: Mr. Greg Watson, President  
Round Mountain Water Company  
5544 Adolphus Avenue  
Bakersfield, CA 93308

CC: Michael Martin, Operator, 5342 Adolphus Avenue, Bakersfield, CA 93308  
Kern County Environmental Health Services Department

**CITATION FOR VIOLATION OF  
CALIFORNIA CODE OF REGULATIONS, TITLE 22, SECTION 64426.1  
September 2014**

**Issued on November 4, 2014**

Section 116650 of the California Health and Safety Code authorizes the issuance of a citation to a public water system for violation of the California Safe Drinking Water Act (Health and Safety Code, Division 104, Part 12, Chapter 4, commencing with Section 116270) (hereinafter "California SDWA"), or any regulation, standard, permit or order issued or adopted thereunder.

The State Water Resources Control Board (hereinafter "Board"), acting by and through its Division of Drinking Water (hereinafter "Division") and the Deputy Director for the Division (hereinafter "Deputy Director"), hereby issues a citation to the Round Mountain Water Company (hereinafter "Water Company") (5544 Adolphus Avenue, Bakersfield, CA 93308) for violation of California Code of Regulations (CCR), Title 22, Section 64426.1.

1 **APPLICABLE AUTHORITIES**

2 The applicable statutes and regulations are provided in Appendix A, attached hereto and  
3 incorporated by reference.  
4

5 **STATEMENT OF FACTS**

6 The Water Company is a community water system serving a residential population of  
7 approximately fifty (50) persons through seventeen (17) service connections.  
8

9 The Water Company is required to collect a minimum of one (1) distribution system  
10 bacteriological sample per month. The bacteriological water analysis results submitted by the  
11 Water Company reported the presence of total coliform bacteria in five (5) of five (5) samples  
12 collected by the Water Company in September 2014. None of the positive samples showed the  
13 presence of fecal coliform or *E. coli* bacteria.  
14

15 Upon being informed of the presence of total coliform bacteria in the routine sample collected on  
16 September 23, 2014, the Water Company collected a total of four (4) repeat distribution system  
17 samples on September 24, 2014. All four (4) of the repeat samples showed the presence of  
18 total coliform bacteria. All water samples for coliform bacteria collected over the past year are  
19 summarized in Attachment A.  
20

21 The well has been identified as a probable source of contamination. Triggered source  
22 monitoring was conducted from both active wells, and analytical results were positive for total  
23 coliform and negative for *E. coli* bacteria. The Water Company does not provide continuous  
24 disinfection of the distribution system. In response to the total coliform positive samples, the  
25 Water Company contracted with McMor Chlorination to disinfect the wells and install and  
26 maintain continuous chlorination of the distribution system for a period of two weeks.  
27

1 The five routine samples required the month following a month with one or more total coliform  
2 positive samples were collected on October 24, 2014, and were negative for total coliform  
3 bacteria. Both wells were also sampled on October 24, 2014, and results were negative for total  
4 coliform and *E. coli* bacteria.

5  
6 Public notification to the Division and consumers of a water system is required whenever a  
7 violation of the Total Coliform MCL occurs. Notification to the Division is required by the end of  
8 the business day on which the violation has been determined. If the Division is closed,  
9 notification shall be within 24 hours of the determination. The Division was notified on  
10 September 25, 2014, in accordance with the above referenced section.

11  
12 Public notification to the customers of the Water Company was conducted on October 7, 2014,  
13 advising each customer of the failure of the Total Coliform MCL during the month of September  
14 2014. A copy of the notice that was mailed to each customer is provided as Attachment B.  
15 Proof of Notification is provided as Attachment C.

#### 16 17 DETERMINATION

18 Title 22, CCR, Section 64426.1, Total Coliform Maximum Contaminant Level (MCL) provides  
19 that a public water system that collects fewer than 40 bacteriological samples per month has  
20 violated the regulation if more than one (1) sample collected during any month is total coliform  
21 positive.

22  
23 The Division has determined that the Water Company failed to comply with Title 22, CCR,  
24 Section 64426.1, Total Coliform MCL for the month of September 2014 due to the presence of  
25 total coliform bacteria in five (5) of five (5) samples collected in September 2014.

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**DIRECTIVES**

The Water Company has completed the necessary public notification and investigation and no other directives are necessary at this time.

**PARTIES BOUND**

This Citation shall apply to and be binding upon the Round Mountain Water Company, its officers, directors, agents, employees, contractors, successors, and assignees.

**SEVERABILITY**

The Directives of this Citation are severable, and the Water Company shall comply with each and every provision thereof notwithstanding the effectiveness of any provision.

1 **FURTHER ENFORCEMENT ACTION**

2 The California SDWA authorizes the Board to: issue citation with assessment of administrative  
3 penalties to a public water system for violation or continued violation of the requirements of the  
4 California SDWA or any permit, regulation or order issued or adopted thereunder including, but  
5 not limited to, failure to correct a violation identified in a citation or compliance order. The  
6 California SDWA also authorizes the Board to take action to suspend or revoke a permit that  
7 has been issued to a public water system if the system has violated applicable law or  
8 regulations or has failed to comply with an order of the Board; and to petition the superior court  
9 to take various enforcement measures against a public water system that has failed to comply  
10 with an order of the Board. The Board does not waive any further enforcement action by  
11 issuance of this citation.

12  
13  
14 November 4, 2014

15 Date

14 Tricia A. Wathen

15 Tricia A. Wathen, P.E.  
16 Senior Sanitary Engineer, Visalia District  
17 DRINKING WATER FIELD OPERATIONS BRANCH



24 TW/SF

25 **Attachments:**

- 25 Attachment A: Summary of historical bacteriological samples  
26 Attachment B: Public Notice  
26 Attachment C: Proof of Notification Form  
27 Attachment D: Positive Total Coliform Investigation Report

## APPENDIX A

### Applicable Statutes and Regulations for Citation No. 03-12-14C-038

#### Section 116650 of the CHSC states in relevant part:

##### §116650. Citations

- (a) If the Division determines that a public water system is in violation of this chapter or any regulation, permit, standard, citation, or order issued or adopted thereunder, the Division may issue a citation to the public water system. The citation shall be served upon the public water system personally or by certified mail. Service shall be deemed effective as of the date of personal service or the date of receipt of the certified mail. If a person to whom a citation is directed refuses to accept delivery of the certified mail, the date of service shall be deemed to be the date of mailing.
- (b) Each citation shall be in writing and shall describe the nature of the violation or violations, including a reference to the statutory provision, standard, order, citation, permit, or regulation alleged to have been violated.
- (c) A citation may specify a date for elimination or correction of the condition constituting the violation.
- (d) A citation may include the assessment of a penalty as specified in subdivision (e).
- (e) The Division may assess a penalty in an amount not to exceed one thousand dollars (\$1,000) per day for each day that a violation occurred, and for each day that a violation continues to occur. A separate penalty may be assessed for each violation.

#### Section 64424 of Title 22, California Code of Regulations (CCR) states in relevant part:

##### §64424. Repeat Sampling.

- (a) If a routine sample is total coliform-positive, the water supplier shall collect a repeat sample set as described in paragraph (a)(1) within 24 hours of being notified of the positive result. The repeat samples shall all be collected within the same 24 hour time period. A single service connection system may request that the Division allow the collection of the repeat sample set over a four-day period.
  - (1) For a water supplier that normally collects more than one routine sample a month, a repeat sample set shall be at least three samples for each total coliform-positive sample. For a water supplier that normally collects one or fewer samples per month, a repeat sample set shall be at least four samples for each total coliform-positive sample.
  - (2) If the water supplier is unable to collect the samples within the 24-hour time period specified in subsection (a) or deliver the samples to the laboratory within 24 hours after collection because of circumstances beyond its control, the water supplier shall notify the Department within 24 hours. The Department will then determine how much time the supplier will have to collect the repeat samples.
- (b) When collecting the repeat sample set, the water supplier shall collect at least one repeat sample from the sampling tap where the original total coliform-positive sample was taken. Other repeat samples shall be collected within five service connections upstream or downstream of the original site. At least one sample shall be from upstream and one from downstream unless there is no upstream and/or downstream service connection.
- (c) If one or more samples in the repeat sample set is total coliform-positive, the water supplier shall collect and have analyzed an additional set of repeat samples as

specified in subsections (a) and (b). The supplier shall repeat this process until either no coliforms are detected in one complete repeat sample set or the supplier determines that the MCL for total coliforms specified in §64426.1 has been exceeded and notifies the Department.

- (d) If a public water system for which fewer than five routine samples/month are collected has one or more total coliform-positive samples, the water supplier shall collect at least five routine samples the following month. If the supplier stops supplying water during the month after the total coliform-positive(s), at least five samples shall be collected during the first month the system resumes operation. A water supplier may request the Department waive the requirement to collect at least five routine samples the following month, but a waiver will not be granted solely on the basis that all repeat samples are total coliform-negative. To request a waiver, one of the following conditions shall be met:
- (1) The Department conducts a site visit before the end of the next month the system provides water to the public to determine whether additional monitoring and/or corrective action is necessary to protect public health.
  - (2) The Department determines why the sample was total coliform-positive and establishes that the system has corrected the problem or will correct the problem before the end of the next month the system serves water to the public. If a waiver is granted, a system shall collect at least one routine sample before the end of the next month it serves water to the public and use it to determine compliance with §64426.1.

**Section 64426.1 of Title 22, California Code of Regulations (CCR) states in relevant part:**  
§64426.1. Total Coliform Maximum Contaminant Level (MCL).

- (a) Results of all samples collected in a calendar month pursuant to Sections 64423, 64424, and 64425 that are not invalidated by the Department or the laboratory shall be included in determining compliance with the total coliform MCL. Special purpose samples such as those listed in §64421(b) and samples collected by the water supplier during special investigations shall not be used to determine compliance with the total coliform MCL.
- (b) A public water system is in violation of the total coliform MCL when any of the following occurs:
- (1) For a public water system which collects at least 40 samples per month, more than 5.0 percent of the samples collected during any month are total coliform-positive; or
  - (2) For a public water system which collects fewer than 40 samples per month, more than one sample collected during any month is total coliform-positive; or
  - (3) Any repeat sample is fecal coliform-positive or E. coli-positive; or
  - (4) Any repeat sample following a fecal coliform-positive or E. coli-positive routine sample is total coliform-positive.
- (c) If a public water system is not in compliance with paragraphs (b)(1) through (4), during any month in which it supplies water to the public, the water supplier shall notify the Department by the end of the business day on which this is determined, unless the determination occurs after the Department office is closed, in which case the supplier shall notify the Department within 24 hours of the determination. The water supplier shall also notify the consumers served by the water system. A Tier 2 Public Notice shall be given for violations of paragraphs (b)(1) or (2), pursuant to section 64463.4. A Tier 1 Public Notice shall be given for violations of paragraphs (b)(3) or (4), pursuant to section 64463.1.

# Bacteriological Distribution Monitoring Report

1500561 Round Mountain WC

Distribution System Freq: 1/M

Sample Date	Location	T Coli	E Coli	F Coli	HPC	Type	Cl2	Cl2 Avg	Viol. Type	GWR Satisfied?	Comments
10/24/2014	2REP2-5342 Adolphus	A	A			Routine	0				
10/24/2014	1REP1-5544 Adolphus	A	A			Routine	0				
10/24/2014	2REP1-5800 Adolphus	A	A			Routine	0				
10/24/2014	1REP1-6236 River Acres	A	A			Routine	0				
10/24/2014	5ROU-5809 Round Mtn.	A	A			Routine	0				
9/24/2014	1REP1-6236 River Grove	P	A			Repeat					
9/24/2014	1REP2-5544 Adolphus	P	A			Repeat					
9/24/2014	1REP1-5800 Adolphus	P	A			Repeat					
9/24/2014	2REP2-5342 Adolphus	P	A			Repeat			MCL		Cit 03-12-14C-038
9/23/2014	4ROU-5342 Adolphus	P	A			Routine				Yes	
8/27/2014	3ROU-5544 Adolphus	A	A			Routine	0				
7/23/2014	2ROU-6236 River Grove	A	A			Routine					
6/25/2014	2ROU-6236 River Grove	A	A			Routine					
5/21/2014	5ROU-5809 Round Mtn.	A	A			Routine					
4/29/2014	5342 Adolphus	A	A			Routine					
3/26/2014	3ROU-5544 Adolphus	A	A			Routine					
2/25/2014	2ROU-6236 River Grove	A	A			Routine					
1/28/2014	1ROU-5300 Adolphus	A	A			Routine					
12/30/2013	2ROU-6236 River Grove	A	A			Routine	0				
11/26/2013	5800 Adolphus	A	A			Routine	0				
10/28/2013	5ROU-5809 Round Mtn	A	A			Routine					

## Violation Key

MCL	Exceeds the maximum contaminant level	MR5	Incorrect number of repeat samples as follow-up to a positive sample
MR1	No monthly sample for the report month	MR6	No source sample
MR2	No quarterly sample for the report month	MR7	No summary report submitted
MR3	Incorrect number of routine samples for the report month	MR8	Other comments and/or info
MR4	Did not collect 5 routine samples for previous month's positive sample	MR9	Cl2 not reported

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# Round Mountain Water Company

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1500561

Source Monitoring Freq:

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Sample Date	Time	Source	T Coli	E Coli	F Coli	Violation	Comment
3/17/2005	7:30	Well 01	A	A			
5/20/2005	12:45	Well 01	A	A			
6/27/2005	6:35	Well 02	A	A			
6/28/2005	3:35	Well 01	A	A			
6/28/2005	3:36	Well 02	A	A			
10/27/2008		Wells 01 & 02	A	A			Part of repeat sample
11/24/2008		Wells 01 & 02	A	A			
10/27/2011	6:45	Well 01	P	A			
10/27/2011	6:48	Well 02	A	A			
11/28/2011	6:40	Well 02	A	A			
11/28/2011	6:40	Well 01	A	A			
8/21/2012	15:05	Well 02	P	A			
8/21/2012	15:10	Well 01	P	A			
9/21/2012	6:43	Well 02	A	A			
9/21/2012	6:45	Well 01	A	A			
9/25/2012	6:58	Well 01	A	A			
9/25/2012	7:10	Well 02	A	A			
9/27/2012	7:15	Well 01	A	A			
9/27/2012	7:21	Well 02	A	A			

# Source Bacteriological Monitoring Report

*1500561 Round Mountain WC*

<i>Sample Date</i>	<i>Time</i>	<i>Source</i>	<i>Sample Type</i>	<i>Test Method</i>	<i>T Coli</i>	<i>E Coli</i>	<i>F Coli</i>	<i>HPC</i>	<i>Violation</i>	<i>Comments</i>
10/24/2014	7:43	Well 02	Well	P/A	A	A				
10/24/2014	7:58	Well 01	Well	P/A	A	A				
9/24/2014	1:03	Well 01	GWR Well	P/A	P	A				
9/24/2014	1:07	Well 02	GWR Well	P/A	P	A				

**IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER**

Este informe contiene información muy importante sobre su agua potable.

Tradúzcalo o hable con alguien que lo entienda bien.

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**Round Mountain Water Company's water system had Levels  
Of Coliform Bacteria above the Drinking Water Standard**

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Our water system recently failed a drinking water standard. Although this incident was not an emergency, as our customers, you have a right to know what you should do, what happened and what we did to correct this situation.

We routinely monitor for drinking water contaminants. We took one required sample to test for the presence of coliform bacteria in September 2014. The sample showed the presence of total coliform bacteria. The standard is that no more than 1 sample per month may show the presence of coliform bacteria.

**What should I do?**

- **You do not need to boil your water or take other corrective actions.**
- This is not an emergency. If it had been, you would have been notified immediately. Total coliform bacteria are generally not harmful themselves. *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially-harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.*
- Usually, coliforms are a sign that there could be a problem with the treatment or distribution system (pipes). Whenever we detect coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal coliform or *E. coli*, are present. We did not find any of these bacteria in our subsequent testing.
- People with severely compromised immune systems, infants, and some elderly may be at increased risk. These people should seek advice about drinking water from their health care providers. General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1(800) 426-4791.
- If you have other health issues concerning the consumption of this water, you may wish to consult your doctor.

**What happened? What is being done?**

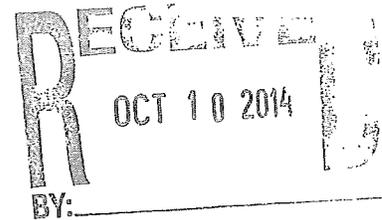
The wells have been disinfected and we are temporarily chlorinating the water. We anticipate resolving the problem within one week or by October 13, 2014.

For more information, please contact Mike Martin at (661) 432-2726 or at the following mailing address: 5342 Adolphus Avenue.

*Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this public notice in a public place or distributing copies by hand or mail.*

This notice is being sent to you by the Round Mountain Water Company.

Date distributed: October 7.



**PROOF OF NOTIFICATION**  
(Return with copy of the Notice)

As required by Section 116450 of the California Health and Safety Code, I notified all users of water supplied by the **Round Mountain Water Company (1500561)** of the failure to meet the **total coliform bacteria MCL** for the month of **September 2014** as directed by the Division. At least one primary distribution method is required: mail, hand-delivery or newspaper publication. A second method is also required in order to reach persons not likely to be reached by a mailing, direct delivery or newspaper publication (renters, nursing home patients, prison inmates, etc.):

Notification was made on October 7, 2014.  
(date)

To summarize report delivery used and good-faith efforts used, please check all items below that apply and fill-in where appropriate:

- The notice was distributed by mail delivery to each customer served by the water system.
- The notice was distributed by direct delivery to each customer served by the water system. Specify direct delivery method(s) used: \_\_\_\_\_
- Publication of the notice in a local newspaper or newsletter of general circulation (attach a copy of the published notice, including name of newspaper and date published).
- Posted the notice at the following conspicuous locations served by the water system (if needed, please attach a list of locations). \_\_\_\_\_
- Posted the notice on the Internet at www. \_\_\_\_\_
- Other method used to notify customers. \_\_\_\_\_

**DISCLOSURE:** Be advised that Section 116725 and 116730 of the California Health and Safety Code state that any person who knowingly makes any false statement on any report or document submitted for the purpose of compliance with the attached order may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of violation, or be imprisoned in the county jail not to exceed one year, or by both the fine and imprisonment.

Certified by Name and Title: Michael Martin, President/Operator

Date: 10/2/14 Signature: [Handwritten Signature]

Due to the Division of Drinking Water within 10 days of notification to the public  
Total Coliform MCL Failure / Enforcement Action No.: In progress

## POSITIVE TOTAL COLIFORM INVESTIGATION Simple Well with Pressure Tank Systems

This form is intended to assist public water systems in completing the investigation required by the Division of Drinking Water (Section 64426(b) of Title 22, California Code of Regulations) and may be modified to take into account conditions unique to the system.

### ADMINISTRATIVE INFORMATION

<b>PWS Name:</b>	Round Mountain Water Company		<b>PWSID NUMBER:</b>	1500561
<b>Name</b>	Michael P. Martin		<b>Address</b>	5342 Adolphus Ave, Bakersfield
<b>Operator in Responsible Charge (ORC)</b>	same			661-398-5964
<b>Person that collected TC samples if different than ORC</b>	Mutual			661-398-5964
<b>Owner</b>	BC Labs			661-327-4911
<b>Certified Laboratory for Microbiological Analyses</b>				
<b>Date Investigation Completed:</b>				
<b>Month(s) of Total Coliform MCL Failure:</b>	1			

### INVESTIGATION DETAILS

SOURCE	WELL (name)	WELL (name)	WELL (name)	WELL (name)	COMMENTS
1. Inspect each well head for physical defects and report	001	002			
a. Is raw water sample tap upstream from point of disinfection?	Yes	Yes			
b. Is wellhead vent pipe screened?	Yes	Yes			
c. Is wellhead seal watertight?	Yes	Yes			
d. Is well head located in pit or is any piping from the wellhead submerged?	No	No			
e. Does the ground surface slope towards well head?	No	No			
f. Is there evidence of standing water near the wellhead?	No	No			
g. Are there any connections to the raw water piping that could be cross connections? (describe all connections in comments)	No	No			
h. Is the wellhead secured to prevent unauthorized access?	No	No			
i. To what treatment plant (name) does this well pump?	None	None			
j. How often do you take a raw water total coliform (TC) test?	None	None			
k. Provide the date and result of the last TC test at this location	10/24/14	10/24/14	10/24/14	10/24/14	

### DISTRIBUTION SYSTEM

DISTRIBUTION SYSTEM	SYSTEM RESPONSES
1. What is the minimum pressure you are maintaining in the distribution system?	40 psi
2. Did pressure in the distribution system drop to less than 5 psi prior to experiencing the TCR positive finding.	No

# POSITIVE TOTAL COLIFORM INVESTIGATION

DISTRIBUTION SYSTEM	SYSTEM RESPONSES
3. Has the distribution system been worked on within the last week? (service taps, hydrant flushing, main breaks, main extensions, etc.) If yes, provide details.	No
4. Are there any signs of excavations near your distribution system not under the direct control of your maintenance staff?	No
5. Did you inspect your distribution system to check for mainline leaks? Do you or did you have a mainline leak?	No Leaks
6. If there was a mainline leak, when was it repaired?	n/a
7. On what date was the distribution system last flushed?	1/18/14
8. Is there a written flushing procedure you can provide for our review?	No
9. Do you have an active cross connection control program?	No - no cross connections
10. What is name and phone number of your Cross-Connection Control Program Coordinator?	Michael P. Martin 661-398-5964
11. Is the review and testing of backflow prevention devices current?	No backflow devices in the system
12. On what date was the last physical survey of the system done to identify cross-connections?	March 30, 2013

SAMPLE SITE EVALUATION (Complete for all TC+ or EC+ findings)	Routine Site TC+ or EC+	Upstream Site	Downstream Site	Sample # (specify)
1. What is the height of the sample tap above grade? (inches)	20"	20"	20"	Out on Loop
2. Is the sample tap located in an exterior location or is it protected by an enclosure?	Ext	Ext	Ext	20"
3. Is the sample tap threaded, have a swing arm (kitchen sink) or aerator (sinks)?	Threaded	Threaded	Threaded	Ext
4. Is the sample tap in good condition, free of leaks around the stem or packing?	Yes	Yes	Yes	Threaded
5. Can the sample tap be adjusted to the point where a good laminar flow can be achieved without excessive splash?	Yes	Yes	Yes	Yes
6. Is the sample tap and area around the sample tap clean and dry (free of animal droppings, other contaminants or spray irrigation systems)	Yes	Yes	Yes	Yes
7. Is the area around the sample tap free of excessive vegetation or other impediments to sample collection	Yes	Yes	Yes	Yes
8. Describe how the tap was treated in preparation for sample collection (ran water, swabbed with disinfectant, flamed, etc.)	Disinfected	Disinfected	Disinfected	Disinfected
9. Is this sample tap designated on the sampling plan submitted with this information request?	Yes	Yes	Yes	Yes
10. What were the weather conditions at the time of the positive sample (rainy, windy, sunny),	sunny	sunny	sunny	sunny

# POSITIVE TOTAL COLIFORM INVESTIGATION

Page 3 of 3

GENERAL OPERATIONS:	Response
1. Where there any power outages that affected water system facilities during the 30 days prior to the TC+ or EC + findings?	No
2. Where there any main breaks, water outages, or low pressure reported in the service area where TC+ or EC+ samples were located.	No
3. Does the system have backup power or elevated storage?	No
4. During or soon after bacteriological quality problems, did you receive any complaints of any customers' illness suspected of being waterborne? How many?	No
5. What were the symptoms of illness if you received complaints about customers being sick?	n/a

## ADDITIONAL INFORMATION TO BE SUBMITTED WITH RESPONSES TO THE ABOVE QUESTIONS

- 1. Sketch of System showing all sources, treatment locations, storage tanks, microbiological sampling sites and general layout of the distribution system including the location of all hazardous connections such as the wastewater treatment facility.
- 2. A set of photographs of the well, pressure tanks, and storage tanks in the system may be submitted if they would show that the contamination is directly related and changes have been made since the last inspection by our Department
- 3. Name, certification level and certificate number of the Operator in Responsible Charge.
- 4. Copy of the last cross connection survey performed that identifies the location of all unprotected cross connections.

## SUMMARY: BASED ON THE RESULTS OF YOUR INVESTIGATION AND ANY OTHER INFORMATION AT YOUR DISPOSAL, WHAT DO YOU BELIEVE TO BE THE CAUSE OF THE POSITIVE TOTAL COLIFORM SAMPLES FROM YOUR PUBLIC WATER SYSTEM?

The cause for the positive coliform bacteria test was likely Iron Bacteria. Wells were disinfected. No further positive bacteria tests.

**CERTIFICATION:** I CERTIFY THAT THE INFORMATION SUBMITTED IN RESPONSE TO THE QUESTIONS ABOVE IS ACCURATE TO THE BEST OF MY PROFESSIONAL KNOWLEDGE

NAME: Robert F. KA TITLE: PRESIDENT / OPERATOR DATE: 10/27/14