

12 Williams Street
Augusta, Maine 04330
www.augustawater.org

BRIAN TARBUCK
General Manager

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June 5, 2007

Scott Whitney
State of Maine Drinking Water Program
11 State House Station
Augusta, ME 04333-0011

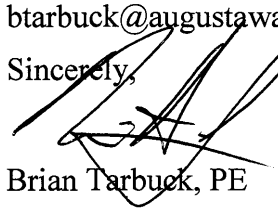
Dear Mr. Whitney:

Please find attached the monthly reports for compliance with the Safe Drinking Water Act and Maine's Rules Relating to Drinking Water for the month of May, 2007. You should find the following documents:

1. Fluoridation Report;
2. Total Coliform Monitoring Report;
3. South Well, Brookside Well and Triangle Well pumpage report; and
4. Triangle Station Monthly Operating Report.

If you have any questions, please contact me at 622-8880 x117, or via email at btarbuck@augustawater.org.

Sincerely,



Brian Tarbuck, PE

Monthly Fluoride Report
System Type - Fluoride Systems

System Name: **Augusta Water District**

PWSID#: **90080**

Reporting period: **May, 2007**

Signature:  Date: 6/6/2007

System Information

Treatment plant/pump station: **Triangle Station**
 Fluoride Chemical Used: **Sodium fluoride**

Notes:

Date	AWD	Location	HETL
5/8/2007 11:45	1.35	Triangle Well	1.37

Fluoride

Date	Total production	Gallons of makeup water	Daily Average Residual	Theoretical Calculation
units:	Mgals	gallons	mg / L	mg / L
1	1.88	116	1.23	1.11
2	1.85	118	1.00	1.15
3	1.80	121	1.09	1.21
4	2.04	122	1.13	1.08
5	1.69	112	1.14	1.19
6	2.07	133	0.95	1.16
7	1.91	121	0.98	1.14
8	2.12	129	1.03	1.10
9	2.02	122	0.94	1.09
10	2.10	134	0.87	1.15
11	1.98	119	0.96	1.08
12	1.74	117	0.85	1.21
13	1.77	116	0.95	1.18
14	1.92	124	0.94	1.16
15	1.88	127	0.95	1.21
16	1.88	113	0.92	1.08
17	1.83	120	1.00	1.18
18	1.85	109	0.95	1.06
19	1.76	112	1.01	1.14
20	1.66	108	0.96	1.17
21	1.87	124	0.99	1.19
22	2.11	130	1.11	1.11
23	1.88	121	0.67	1.16
24	1.96	127	0.91	1.17
25	1.96	113	0.99	1.04
26	2.06	131	0.94	1.14
27	1.77	109	0.89	1.11
28	1.89	119	0.93	1.13
29	2.12	135	0.25	1.15
30	2.04	132	0.00	1.17
31	2.04	120	0.00	1.41
Avg	1.92	121	0.89	1.15
Min	1.66	108	0.00	1.04
Max	2.12	135	1.23	1.41
Total	59.44	3,757		

Systems that don't use the state lab need to report their distribution system certified lab results here.

Date	Location in the distribution system	Result mg/L

Notes:
 The wells are monitored with a continuous fluoride analyzer (Hach CA610). This analyzer was not reading accurately this month and was sent out for repair on May 29. Use the theoretical calculation for compliance.

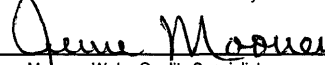
Bacteriological Report Form

Utility: Augusta Water District, PWSID: 90080

Laboratory: Augusta Water District, Lab # 1015075

Number of samples required	15
Number of samples taken for compliance	30
Number of quality control samples	1
Number of positive samples	0

I hereby certify that this report is true and correct and that the bacterial analyses reported herein were performed in accordance with the Standard Methods for Water Analysis.


June Mooney, Water Quality Specialist

Seq. #	Samp. #	Location	Sam. Type	Collected by	Collection date & time	Free Cl ₂	Total Cl ₂	Fluoride (mg/l)	Set up by:	Date & time	Coliform		Method		Lauryl Tryptose		EC 44.5c	HPC 48 hrs
											Present/Absent	MF/COLILERT	24 hr	48 hr	bril. green			
70501	1	WESTERN STA.	DIS	MOONEY	5-1-07/1:00	1.27	1.26	1.08	MOONEY	5-2-07/7:30	A	COLILERT						
70502	2	WELLHOUSE	DIS	MOONEY	5-1-07/1:15	1.40	1.39	1.17	MOONEY	5-2-07/7:30	A	COLILERT						
70503	3	NORTHWEST STA.	DIS	MOONEY	5-1-07/1:45	1.39	1.41	1.61	MOONEY	5-2-07/7:30	A	COLILERT						
70504	4	OFFICE	DIS	MOONEY	5-1-07/2:10	1.28	1.31	1.25	MOONEY	5-2-07/7:30	A	COLILERT						
70505	5	HOSPITAL ST. STA.	DIS	MOONEY	5-1-07/2:30	1.15	1.15	1.19	MOONEY	5-2-07/7:30	A	COLILERT						
70510	6	WESTERN STA.	DIS	MOONEY	5-8-07/11:00	1.16	1.20	1.08	MOONEY	5-8-07/3:00	A	COLILERT						
70511	7	WELLHOUSE	DIS	MOONEY	5-8-07/11:45	1.44	1.42	1.35	MOONEY	5-8-07/3:00	A	COLILERT						
70512	8	NORTHWEST STA.	DIS	MOONEY	5-8-07/12:15	1.38	1.38	1.68	MOONEY	5-8-07/3:00	A	COLILERT						
70513	9	WILLOW ST. STA.	DIS	MOONEY	5-8-07/12:40	1.22	1.19	1.15	MOONEY	5-8-07/3:00	A	COLILERT						
70514	10	OFFICE	DIS	MOONEY	5-8-07/1:00	1.27	1.27	1.14	MOONEY	5-8-07/3:00	A	COLILERT						
70515	11	HOSPITAL ST. STA.	DIS	MOONEY	5-8-07/1:30	1.11	1.12	1.13	MOONEY	5-8-07/3:00	A	COLILERT						
50716	12	FARRINGTON SCHOOL	DIS	MOONEY	5-8-07/2:00	1.14	1.16	1.11	MOONEY	5-8-07/3:00	A	COLILERT						
70520	13	WELLHOUSE	DIS	MOONEY	5-14-07/10:40	1.52	1.51	1.17	MOONEY	5-14-07/3:30	A	COLILERT						
70521	14	WESTERN STA.	DIS	MOONEY	5-14-07/11:05	1.31	1.33	1.10	MOONEY	5-14-07/3:30	A	COLILERT						
70522	15	BEST INN	DIS	MOONEY	5-14-07/11:30	0.92	0.94	1.14	MOONEY	5-14-07/3:30	A	COLILERT						
70523	16	NORTHWEST STA.	DIS	MOONEY	5-14-07/12:10	1.38	1.37	1.06	MOONEY	5-14-07/3:30	A	COLILERT						
70524	17	OFFICE	DIS	MOONEY	5-14-07/1:40	1.36	1.38	1.09	MOONEY	5-14-07/3:30	A	COLILERT						
70525	18	HOSPITAL ST. STA.	DIS	MOONEY	5-14-07/1:50	1.18	1.20	1.13	MOONEY	5-14-07/3:30	A	COLILERT						
70526	19	K.V. CREDIT UNION	DIS	MOONEY	5-14-07/2:15	1.18	1.19	1.14	MOONEY	5-14-07/3:30	A	COLILERT						
70528	20	WELLHOUSE	DIS	MOONEY	5-22-07/10:45	1.08	1.08	1.29	MOONEY	5-22-07/3:30	A	COLILERT						
70529	21	WESTERN STA.	DIS	MOONEY	5-22-07/11:10	0.23	0.26	1.22	MOONEY	5-22-07/3:30	A	COLILERT						
70530	22	OFFICE	DIS	MOONEY	5-22-07/11:30	1.04	1.06	1.22	MOONEY	5-22-07/3:30	A	COLILERT						
70531	23	HOSPITAL ST. STA.	DIS	MOONEY	5-22-07/12:50	0.95	0.97	1.17	MOONEY	5-22-07/3:30	A	COLILERT						
70532	24	NORTHWEST STA.	DIS	MOONEY	5-22-07/1:15	1.08	1.08	1.61	MOONEY	5-22-07/3:30	A	COLILERT						
70533	25	MANCHESTER TOWN OFFICE	DIS	MOONEY	5-22-07/1:45	0.67	0.70	1.13	MOONEY	5-22-07/3:30	A	COLILERT						
70537	26	WELLHOUSE	DIS	MOONEY	5-29-07/10:40	1.07	1.06	1.07	MOONEY	5-29-07/1:20	A	COLILERT						
70538	27	WESTERN STA.	DIS	MOONEY	5-29-07/11:10	0.89	0.90	1.19	MOONEY	5-29-07/1:20	A	COLILERT						
70539	28	NORTHWEST STA.	DIS	MOONEY	5-29-07/11:25	1.04	1.07	1.14	MOONEY	5-29-07/1:20	A	COLILERT						
70540	29	OFFICE	DIS	MOONEY	5-29-07/11:50	1.03	1.04	1.12	MOONEY	5-29-07/1:20	A	COLILERT						
70541	30	HOSPITAL ST. STA.	DIS	MOONEY	5-29-07/12:10	0.89	0.92	1.14	MOONEY	5-29-07/1:20	A	COLILERT						
70506		FAIRFIELD INN LINE #1	O&M	SAHARIC	5-3-07/1:00	0.60		1.18	MOONEY	5-3-07/2:30	A	COLILERT						
70507		FAIRFIELD INN LINE #2	O&M	SAHARIC	5-3-07/2:00	0.60		1.13	MOONEY	5-3-07/2:30	A	COLILERT						
70508		PEARL&QUIMBY	O&M	MILLS	5-7-07/8:50	0.50		1.13	TANGERMA	5-7-07/9:47	A	COLILERT						
70509		PEARL ST. HYDRANT	O&M	HAMLIN	5-7-07/11:00	0.50		1.12	TANGERMA	5-7-07/11:10	A	COLILERT						
70517		WALNUT DR.	O&M	SAHARIC	5-9-07/2:14	0.50		1.17	TANGERMA	5-9-07/2:30	A	COLILERT						
70518		AUGUSTA CROSSING NORTH	O&M	HAMLIN	5-10-07/12:45	1.50		1.11	MOONEY	5-10-07/2:45	A	COLILERT						
70519		AUGUSTA CROSSING WEST	O&M	HAMLIN	5-10-07/2:10	1.00		1.14	MOONEY	5-10-07/2:45	A	COLILERT						
70527	*	LAB DISTILLED WATER	SPT	MOONEY	5-21-07/8:30	0.00	0.00		MOONEY	5-21-07/9:00						COND.=1.14	umhos	0:1ML

Monthly Well Production Report
System Type - All GW systems

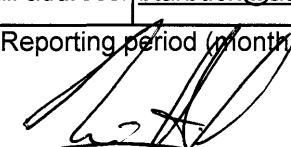
System Name: **Augusta Water District**

PWSID#: **90080**

Designated operator name and ME License #: **Brian Tarbuck**
2026

e-mail address: **btarbuck@augustawater.org**

Reporting period (month and year): **May - 07**

Signature:  Date: **6/6/2007**

System Information

Treatment plant/pump station: **All wells**

Select one

Community System →

Non-transient Non-community →

Transient Non-Community →

List any new or changed system information (facilities, treatments, sources, operators, address, tele, etc.):

List any operation problems or comments:

This sheet reports production from all three wells at Augusta Water District. This is a supplemental report to the MOR.

Daily water production (MG)

Date	Triangle Well	South Well	Brookside Well	Sum
1	0.88	0.59	0.41	1.88
2	0.90	0.56	0.40	1.85
3	0.87	0.57	0.36	1.80
4	0.88	0.67	0.49	2.04
5	0.90	0.48	0.31	1.69
6	0.86	0.83	0.38	2.07
7	0.89	0.62	0.40	1.91
8	0.84	0.76	0.51	2.12
9	0.86	0.68	0.48	2.02
10	0.85	0.75	0.50	2.10
11	0.87	0.66	0.45	1.98
12	0.89	0.51	0.34	1.74
13	0.88	0.53	0.36	1.77
14	0.88	0.61	0.43	1.92
15	0.86	0.69	0.33	1.88
16	0.88	0.60	0.40	1.88
17	0.88	0.81	0.13	1.83
18	0.88	0.57	0.40	1.85
19	0.88	0.56	0.32	1.76
20	0.89	0.49	0.27	1.66
21	0.88	0.53	0.46	1.87
22	0.83	0.76	0.51	2.11
23	0.88	0.57	0.43	1.88
24	0.85	0.67	0.44	1.96
25	0.76	0.76	0.44	1.96
26	0.57	1.03	0.46	2.06
27	0.39	1.06	0.31	1.77
28	0.44	1.06	0.39	1.89
29	0.66	1.03	0.43	2.12
30	0.60	1.05	0.39	2.04
31	0.61	1.04	0.39	2.04
Sum	25.02	22.10	12.32	59.44

Monthly Operating Report
System Type - All GW systems

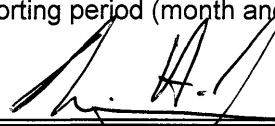
System Name: **Augusta Water District**

PWSID#: **90080**

Designated operator name and ME License #: **Brian Tarbuck**
2026

e-mail address: **btarbuck@augustawater.org**

Reporting period (month and year): **May - 07**

Signature:  Date: **6/6/2007**

System Information

Treatment plant/pump station: **Triangle Station**

Community System →

Non-transient Non-community →

Transient Non-Community →

Select one

List any new or changed system information (facilities, treatments, sources, operators, address, tele, ect.):

List any operation problems or comments:
 The GLI chlorine residual analyzer failed on 5/8. Repair parts were ordered and installed on 5/17. Grab samples are show in blue.

Daily water production

Date	Mgals pumped	Peak hourly flow	pH	Dis. log inactivation
1	1.88	n/a	7.69	n/a
2	1.85	n/a	7.69	n/a
3	1.80	n/a	7.69	n/a
4	2.04	n/a	7.69	n/a
5	1.69	n/a	7.69	n/a
6	2.07	n/a	7.70	n/a
7	1.91	n/a	7.69	n/a
8	2.12	n/a	7.70	n/a
9	2.02	n/a	7.69	n/a
10	2.10	n/a	7.70	n/a
11	1.98	n/a	7.70	n/a
12	1.74	n/a	7.69	n/a
13	1.77	n/a	7.69	n/a
14	1.92	n/a	7.69	n/a
15	1.88	n/a	7.70	n/a
16	1.88	n/a	7.70	n/a
17	1.83	n/a	7.71	n/a
18	1.85	n/a	7.70	n/a
19	1.76	n/a	7.70	n/a
20	1.66	n/a	7.70	n/a
21	1.87	n/a	7.69	n/a
22	2.11	n/a	7.69	n/a
23	1.88	n/a	7.68	n/a
24	1.96	n/a	7.69	n/a
25	1.96	n/a	7.71	n/a
26	2.06	n/a	7.72	n/a
27	1.77	n/a	7.74	n/a
28	1.89	n/a	7.73	n/a
29	2.12	n/a	7.72	n/a
30	2.04	n/a	7.73	n/a
31	2.04	n/a	7.73	n/a
Summary	59.44		7.70	

(total) (avg.) (avg.) (min.)

From table below:
 List units: (i.e. lbs, gal)

Chemical usage

1	2	3	4	5	6	Disinfectant Residual
gal	gal	lbs				mg/L
1.1	23.6	150				1.24
1.3	19.6	0				1.19
1.9	22.0	0				1.18
1.3	19.3	100				1.21
1.9	23.6	0				1.18
1.9	18.3	0				0.92
1.6	22.3	0				0.97
1.9	20.7	150				1.44
0.8	22.0	0				1.42
1.3	25.3	0				1.45
1.3	16.9	100				1.39
2.4	22.8	0				1.44
1.3	20.1	0				1.40
2.1	21.5	0				1.52
1.6	20.1	0				1.40
0.8	19.9	150				0.00
4.0	24.7	0				0.85
0.5	19.3	150				1.54
1.1	21.0	0				1.21
1.1	19.6	0				1.20
1.6	18.3	0				1.01
2.7	15.3	150				1.03
1.9	19.1	0				1.02
1.9	16.9	0				1.00
0.0	15.0	150				1.00
1.1	19.9	0				0.96
1.9	15.8	0				0.92
1.3	16.4	0				0.91
2.1	16.1	0				0.99
2.4	22.0	0				1.08
1.1	19.1	0				1.23
49.43	617	1,100				0.00

(total) (total) (total) (total) (total) (total) (min.)

Chemicals Used

(report fluoride info on separate fluoride form)

Number	Chemical Name	Purpose	Chemical Strength
1	Calcquest 75 / 25 liquid	calcium sequestration / Pb / Cu control	75% polyphosphate
2	Sodium hypochlorite	primary and secondary disinfection	12.50%
3	sodium fluoride	fluoridation	
4			
5			
6			
Disinfectant			

Summary of Total Coliform Bacteria Rule - please continue to submit complete results

Number of routine samples taken:	30	Number of repeat samples taken:	0
Number of positive samples:	0	Average chlorine residual at sites:	1.13