

Phone: (207) 622-3701
(207) 622-6184

AUGUSTA WATER & SANITARY DISTRICTS

Fax: (207) 622-4539

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

DALE C. GLIDDEN
General Manager

Engineering Fax: (207) 621-0360

TRUSTEES:

DAVID P. SMITH, President
BEVERLY W. BEAUCAGE, Treasurer
PAUL F. McCLAY

COMMISSIONERS:

KENNETH R. KNIGHT, Chair
WILLIAM R. BRIDGEO, Treasurer
DIANE HASTINGS, Clerk

December 6, 2006

Denise Douin
State of Maine Drinking Water Program
11 State House Station
Augusta, ME 04333-0011

Dear Ms. Douin:

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 November. You should find the following documents:

1. Fluoridation Report;
2. Total Coliform Monitoring Report for Dawn Carpenter;
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


cc: Dale Glidden

Monthly Fluoride Report
System Type - Fluoride Systems

System Name: **Augusta Water District**

PWSID#: **90080**

Reporting period: **November, 2006**

Signature:  Date: **12/9/2006**

System Information

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

Fluoride chemical used: **Sodium fluoride**

Notes:

Date	AWD	Location	HETL
11/13/2006 10:45	1.39	Triangle Station	1.40
not required under 2006 rule revisions		Western Station	n/a
		Northwest Station	n/a
		Hospital Street	n/a

Fluoride

Date	Total production	Gallons of makeup water	Daily Average Residual	Theoretical Calculation
units:	Mgals	gallons	mg / L	mg / L
1	1.74	123	1.26	1.28
2	2.04	138	1.23	1.22
3	1.77	118	1.27	1.20
4	1.66	122	1.19	1.33
5	1.59	111	1.22	1.25
6	1.94	136	1.23	1.26
7	1.59	107	1.29	1.21
8	1.66	121	1.24	1.32
9	1.68	119	1.21	1.28
10	1.87	129	1.18	1.25
11	1.42	107	1.19	1.35
12	1.88	130	1.19	1.24
13	1.65	111	1.24	1.21
14	1.94	134	1.22	1.25
15	1.75	122	1.05	1.26
16	1.81	126	1.48	1.25
17	1.87	122	1.33	1.18
18	1.71	121	1.21	1.28
19	1.64	118	1.19	1.30
20	1.92	128	1.23	1.20
21	1.82	126	1.22	1.25
22	1.74	119	1.26	1.23
23	1.45	109	1.22	1.35
24	1.63	119	1.17	1.32
25	1.81	124	1.16	1.23
26	1.66	121	1.18	1.31
27	1.83	121	1.25	1.19
28	1.81	126	1.23	1.26
29	1.95	131	1.20	1.21
30	1.87	124	1.21	1.19
Avg	1.76	138	1.23	1.25
Min	1.42	107	1.05	1.18
Max	2.04	138	1.48	1.35
Total	52.70	3,666		

allowable range: 1.0 to 2.0 mg/L
if outside that range > 10 days, see rules

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 average value recorded for the day is reported 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
 June Mooney, Water Quality Specialist

* 1 2 3 4 5 6 7 8 9 10 11 12 13 14 15 16 17 18 19 20 21 22 23 24 25 26 27 28 29 30	Sample #	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 Trypsole		
											Present/Absent	MF/COLLERT		24 hr	48 hr	bril. green
	1	WESTERN STA.	DIS	MOONEY	11-1-06/8:50	1.05	1.07	1.26	MOONEY	11-1-06/2:45	A	COLLERT				
	2	WELLHOUSE	DIS	MOONEY	11-1-06/10:55	1.31	1.31	1.24	MOONEY	11-1-06/2:45	A	COLLERT				
	3	NORTHWEST STA.	DIS	MOONEY	11-1-06/11:10	1.22	1.22	1.28	MOONEY	11-1-06/2:45	A	COLLERT				
	4	WILLOW ST. STA.	DIS	MOONEY	11-1-06/11:40	0.99	1.00	1.31	MOONEY	11-1-06/2:45	A	COLLERT				
	5	AWD OFFICE	DIS	MOONEY	11-1-06/12:10	1.08	1.09	1.33	MOONEY	11-1-06/2:45	A	COLLERT				
	6	HOSPITAL ST. STA.	DIS	MOONEY	11-1-06/12:45	0.95	0.95	1.25	MOONEY	11-1-06/2:45	A	COLLERT				
	7	MANCHESTER TOWN OFFICE	DIS	MOONEY	11-3-06/10:30	0.38	0.40	1.26	MOONEY	11-3-06/1:15	A	COLLERT				
	8	BEST INN	DIS	MOONEY	11-3-06/11:00	0.46	0.48	1.22	MOONEY	11-3-06/1:15	A	COLLERT				
	9	1000 RIVERSIDE DR.	DIS	MOONEY	11-7-06/9:50	0.28	0.27	1.25	MOONEY	11-7-06/3:15	A	COLLERT				
	10	HOSPITAL ST. STA.	DIS	MOONEY	11-7-06/10:20	0.79	0.80	1.20	MOONEY	11-7-06/3:15	A	COLLERT				
	11	AWD OFFICE	DIS	MOONEY	11-7-06/10:45	1.07	1.07	1.27	MOONEY	11-7-06/3:15	A	COLLERT				
	12	NORTHWEST STA.	DIS	MOONEY	11-7-06/11:20	1.04	1.05	1.27	MOONEY	11-7-06/3:15	A	COLLERT				
	13	WELLHOUSE	DIS	MOONEY	11-7-06/12:00	0.73	0.74	1.25	MOONEY	11-7-06/3:15	A	COLLERT				
	14	WESTERN STA.	DIS	MOONEY	11-7-06/12:20	0.73	0.74	1.25	MOONEY	11-7-06/3:15	A	COLLERT				
	15	GREYBIRCH	DIS	MOONEY	11-7-06/12:00	0.71	0.74	1.25	MOONEY	11-7-06/3:15	A	COLLERT				
	16	WELLHOUSE	DIS	MOONEY	11-13-06/10:45	1.21	1.22	1.39	MOONEY	11-13-06/1:30	A	COLLERT				
	17	NORTHWEST STA.	DIS	MOONEY	11-13-06/11:20	1.11	1.11	1.30	MOONEY	11-13-06/1:30	A	COLLERT				
	18	WESTERN STA.	DIS	MOONEY	11-13-06/11:40	0.75	0.77	1.27	MOONEY	11-13-06/1:30	A	COLLERT				
	19	AWD OFFICE	DIS	MOONEY	11-14-06/10:15	0.86	0.86	1.28	MOONEY	11-14-06/11:45	A	COLLERT				
	20	HOSPITAL ST. STA.	DIS	MOONEY	11-14-06/10:35	0.83	0.85	1.29	MOONEY	11-14-06/11:45	A	COLLERT				
	21	WESTERN STA.	DIS	MOONEY	11-20-06/9:30	0.68	0.69	1.24	MOONEY	11-20-06/1:30	A	COLLERT				
	22	WELLHOUSE	DIS	MOONEY	11-20-06/9:45	1.39	1.38	1.24	MOONEY	11-20-06/1:30	A	COLLERT				
	23	NORTHWEST STA.	DIS	MOONEY	11-20-06/10:15	1.24	1.25	1.28	MOONEY	11-20-06/1:30	A	COLLERT				
	24	AWD OFFICE	DIS	MOONEY	11-20-06/10:40	1.12	1.12	1.26	MOONEY	11-20-06/1:30	A	COLLERT				
	25	HOSPITAL ST. STA.	DIS	MOONEY	11-20-06/11:10	0.92	0.91	1.21	MOONEY	11-20-06/1:30	A	COLLERT				
	26	WESTERN STA.	DIS	MOONEY	11-28-06/11:50	0.82	0.83	1.25	MOONEY	11-29-06/7:30	A	COLLERT				
	27	WELLHOUSE	DIS	MOONEY	11-28-06/12:05	1.59	1.58	1.27	MOONEY	11-29-06/7:30	A	COLLERT				
	28	NORTHWEST STA.	DIS	MOONEY	11-28-06/1:30	1.42	1.45	1.44	MOONEY	11-29-06/7:30	A	COLLERT				
	29	AWD OFFICE	DIS	MOONEY	11-28-06/2:00	1.36	1.36	1.36	MOONEY	11-29-06/7:30	A	COLLERT				
	30	HOSPITAL ST. STA.	DIS	MOONEY	11-28-06/3:00	1.01	1.02	1.29	MOONEY	11-29-06/7:30	A	COLLERT				
		PLANT CLEARWELL TOP	O&M	BW&JM	11-1-06/9:45	1.53	1.55	1.46	MOONEY	11-1-06/2:45	A	COLLERT				
		PLANT CLEARWELL BOTTOM	O&M	BW&JM	11-3-06/9:35	1.86	1.84	1.29	MOONEY	11-3-06/1:15	A	COLLERT				
		MAINELY GYMNASIUMS	O&M	MOONEY	11-7-06/9:40	0.39	0.42	1.27	MOONEY	11-7-06/3:15	A	COLLERT				
		WATER ST.	O&M	HAMLIN	11-29-06/8:45	1.10		1.25	MOONEY	11-29-06/11:45	A	COLLERT				
		MAINE FLIGHT INSTRUMENT	O&M	HAMLIN	11-30-06/2:00	0.70			MOONEY	11-30-06/3:00	A	COLLERT				
		142 BANGOR ST.	CUS	CUS	11-14-06/9:15	0.40	0.41	1.26	MOONEY	11-14-06/11:45	A	COLLERT				
		16 TALLWOOD RD.	CUS	G. SCOTT	11-27-06/2:06			1.22	MOONEY	11-27-06/3:30	A	COLLERT				
			CUS	MOONEY	11-28-06/12:45	0.60	0.62	1.26	MOONEY	11-29-06/7:30	A	COLLERT				
			SPT	MOONEY	11-27-06/1:00	0.00	0.00		MOONEY	11-27-06/1:30		COLLERT				
													COND=1.1	UMHOS	0.2ML	

Monthly Well Production Report

System Type - All GW systems

System Information

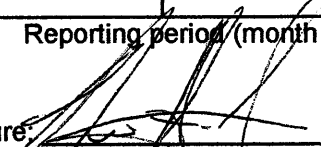
System Name: **Augusta Water District**

PWSID#: **90080**

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

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

Reporting period (month and year): **November - 06**

Signature:  Date: **12/10/2006**

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	0.92	0.65	0.17	1.74
2	0.88	0.68	0.47	2.04
3	0.91	0.50	0.36	1.77
4	0.90	0.45	0.30	1.66
5	0.92	0.49	0.18	1.59
6	0.89	0.64	0.41	1.94
7	0.92	0.41	0.27	1.59
8	0.88	0.47	0.31	1.66
9	0.89	0.51	0.28	1.68
10	0.89	0.57	0.40	1.87
11	0.93	0.47	0.02	1.42
12	0.89	0.73	0.26	1.88
13	0.92	0.45	0.29	1.65
14	0.89	0.64	0.41	1.94
15	0.91	0.53	0.31	1.75
16	0.90	0.56	0.36	1.81
17	0.89	0.57	0.41	1.87
18	0.91	0.49	0.31	1.71
19	0.92	0.43	0.30	1.64
20	0.90	0.62	0.40	1.92
21	0.91	0.54	0.37	1.82
22	0.91	0.52	0.31	1.74
23	0.94	0.45	0.07	1.45
24	0.92	0.71	0.00	1.63
25	0.91	0.55	0.35	1.81
26	0.91	0.60	0.15	1.66
27	0.91	0.70	0.22	1.83
28	0.76	0.77	0.28	1.81
29	0.61	0.79	0.56	1.95
30	0.58	0.79	0.51	1.87
Sum	26.41	17.26	9.03	52.70

Monthly Operating Report
System Type - All GW systems

System Name: **Augusta Water District**

PWSID#: **90080**

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

ME License #: **2026**

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

Reporting period (month and year): **November - 06**

Signature:  Date: **12/10/2006**

System Information

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

Community System → **Select one**
 Non-transient Non-community →
 Transient Non-Community →

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

List any operation problems or comments:

Daily water production

Date	Mgals pumped	Peak hourly flow	pH	Dis. log inactivation
1	1.74	n/a	7.64	n/a
2	2.04	n/a	7.65	n/a
3	1.77	n/a	7.63	n/a
4	1.66	n/a	7.63	n/a
5	1.59	n/a	7.63	n/a
6	1.94	n/a	7.65	n/a
7	1.59	n/a	7.65	n/a
8	1.66	n/a	7.65	n/a
9	1.68	n/a	7.70	n/a
10	1.87	n/a	7.76	n/a
11	1.42	n/a	7.76	n/a
12	1.88	n/a	7.76	n/a
13	1.65	n/a	7.75	n/a
14	1.94	n/a	7.77	n/a
15	1.75	n/a	7.75	n/a
16	1.81	n/a	7.73	n/a
17	1.87	n/a	7.76	n/a
18	1.71	n/a	7.72	n/a
19	1.64	n/a	7.73	n/a
20	1.92	n/a	7.74	n/a
21	1.82	n/a	7.71	n/a
22	1.74	n/a	7.73	n/a
23	1.45	n/a	7.72	n/a
24	1.63	n/a	7.75	n/a
25	1.81	n/a	7.75	n/a
26	1.66	n/a	7.73	n/a
27	1.83	n/a	7.75	n/a
28	1.81	n/a	7.74	n/a
29	1.95	n/a	7.78	n/a
30	1.87	n/a	7.78	n/a
Summary	52.70		7.72	
	(total)	(avg.)	(avg.)	(min.)

From table below:

List units: (i.e. lbs, gal)

Chemical usage

Chemical usage						Disinfectant Residual
1	2	3	4	5	6	mg/L
gal	gal	lbs				
1	19	0				1.19
2	20	0				1.22
3	23	0				1.20
2	20	0				1.20
1	19	0				1.18
1	16	0				1.22
2	21	150				1.21
1	18	0				1.24
1	18	0				1.22
1	19	0				1.22
3	21	0				1.22
1	16	0				1.24
2	21	150				1.23
2	19	0				1.24
2	21	0				1.28
1	22	0				0.72
1	7	150				0.88
2	19	0				1.24
3	21	0				1.20
2	21	150				1.27
2	22	0				1.27
2	17	100				1.48
2	24	0				1.54
1	16	0				1.61
1	23	0				1.58
3	20	0				1.63
1	21	150				1.46
2	23	0				1.43
2	28	0				1.26
2	22	0				1.06
51.57	598	850				0.72
(total)	(total)	(total)	(total)	(total)	(total)	(min.)

Chemicals Used

(report fluoride info on separate fluoride form)

Number	Chemical Name	Purpose	Chemical Strength
1	Calcquest 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:	0.99

