

STAGE 2 DISINFECTANTS AND DISINFECTION BYPRODUCTS RULE

(Stage 2 DBPR)

OPERATIONAL EVALUATION REPORT

PWS Name: McDowell County PSD Premier

PWS ID#: WV3302411

Period OEL Exceeded: 3rd Quarter 2021

Location of Exceedance: 88 Booker T Stephens Way

You need to complete this report to the best of your knowledge and submit it no later than 90 days after being notified of the analytical results that triggered this report. Explanations may need additional documentation. Make sure all documentation includes you PWS ID# on each page.

Operational Evaluation Level (OEL) exceeded

81.53

Level ug/L
HAA5 Level ug/L

Is this the first time this PWS has exceeded an OEL?

Yes No

Were you granted a limited scope OEL report?

Yes No

A. SOURCE & SOURCE WATER QUALITY

1. Have you changed the practices in getting you source water? E.g., changed well pumping depth, well rehab, changed intake depth or intake structure, changed pumping rates, pumping times or frequency, etc. Yes No

2. Have you changed/added sources? E.g., turned on emergency sources, drilled new well, changed/added purchase connection, etc. Yes No

3. Have you seen changes in source water quality? E.g., turbidity, pH, temp, alkalinity, hardness, drought conditions, heavy rain, changes in animal feed lots, agricultural practices, etc. Surface water systems should also consider algae blooms, fires in source water (protection) areas, increased filter changes or number of backwash cycles required. Yes No

If you answered "YES" to any of the questions above (Section A), please explain:

B. TREATMENT OPERATIONS

1. Have you changed the amount or type of disinfectant? E.g., chlorine to chloramines, changed disinfectant dosage, etc. Yes No

2. Have you changed or added locations of disinfectant points? E.g., add booster, etc. Yes No
3. Other than disinfection, have you changed or made additions to any treatment processes? Yes No
4. Have you made changes to any other chemical applications? E.g., change any chemicals (change coagulant type or filter aid), changes in application points, changing dosage of any chemical, etc. Yes No

If you answered "YES" to any of the questions above (Section B), please explain:

C. DISTRIBUTION SYSTEM OPERATIONS

1. Have you added additional service connections (industry or residential)? E.g., adding additional pipes or annexing additional areas of service which could change residence times Yes No
2. Have you experienced significant increases or decreases in water demand? E.g., drought restrictions, industry opening/closing, population change Yes No
3. Has additional piping created new loops or dead-ends? Yes No
4. Does your storage tank fill and drain from the bottom (potentially causing stagnation at the top)? Yes No
5. Has the residence time of your tank(s) increased or decreased? i.e., are tanks being filled/drained more or less often? Yes No
6. Have you had frequent line breaks or major construction in your distribution system? Yes No
7. Do you purchase water that has no disinfectant or a different disinfectant than what you currently use? E.g., you purchase water with chloramines and you add chlorine Yes No
8. Do you have areas where disinfectant residual levels are below the minimum regulatory requirement? Yes No
9. Have you had significant changes in chlorine demand to maintain residuals? Yes No
10. Have you changed your distribution flushing procedures? Yes No
11. Have you had any changes in treatment that occur in distribution? E.g., changes in booster chlorination or dosage? Yes No
12. Have you had an increase in customer complaints? Yes No

If you answered "YES" to any of the questions above (Section C), please explain:

The tank has turnover issues due to low customer base and is flushed periodically

D. ADDITIONAL QUESTIONS

- 1. Do you have tank management/operational procedures? E.g., cleaning schedule, set operational levels of you tank (high and low), etc? Yes No
- 2. Can you allow the tank(s) to drain lower to flush out "older" water? Yes No
- 3. Can you reduce chlorine/chloramines dosage and still maintain required residuals in distribution? Yes No
- 4. Do you have a flushing program? Yes No
- 5. Does your purchase contract require that water being delivered meets all Federal Standards, including DBPs? Yes No
- 6. Does your contract allow for a flushing credit? Yes No
- 7. Can you work with you seller system to optimize water age, reducing DBP formations? Yes No

If you answered "YES" to any of the questions above (Section D), please explain:

Due to low population relative to tank size, we have issues with turnovers, and we periodically flush and overflow the tank. This does cause a financial burden on the system as we are paying for water on the ground.

E. ADDITIONAL INFORMATION

Please explain what steps you could take to minimize future TTHM/HAA5 formations. E.g., changes in operation, treatment process, or distribution maintenance, etc. (Add additional pages if needed)

I certify that the information in this entire report, including attachments, is true and accurate to the best of my knowledge. I acknowledge that any knowingly false or misleading information may be punishable by law.

Signature: *Jared R Brewster*

Date: 11-9-21

Printed Name: JARED R BREWSTER

Certification #: WVDP11239

Contact Phone Number: 304-297-2622

Send the completed report no later than 90 days after being notified of the analytical results that caused the Operational Evaluation Level exceedance to:

WV Office of Environmental Health Services - Compliance and Enforcement
350 Capitol Street, Room 313
Charleston, WV 25301
Phone: (304) 558-2981 Fax: (304) 558-0139