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PUBLIC SERVICE  
COMMISSION

**ENERGY AND ENVIRONMENT CABINET**

**Steven L. Beshear**  
Governor

**Office of General Counsel**  
Environmental Protection Legal Division  
John G. Horne, II  
GENERAL COUNSEL  
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**Leonard K. Peters**  
Secretary

December 15, 2008

Public Service Commission  
211 Sower Blvd.  
P. O. Box 615  
Frankfort, Kentucky 40602-0615

RE: Case No. 2008-00443

Dear Ms. Stumbo and Members of the Commission,

Enclosed is the Division of Water's written sworn testimony, filed this date in the above-captioned case in response to the Commission's Order entered on November 24, 2008. I apologize to the Commission for the late filing of this testimony, which is due to my illness this past Friday, December 12, 2008.

Sincerely,

Mary Stephens  
Counsel for the Energy and Environment Cabinet

cc: Randall Hardin  
Thomas Howard  
Billy J. Rowe, Sr.  
Hon. David Edward Spenard  
James W. Hoskins  
Judy Jackson  
A. David Blankenship

COMMONWEALTH OF KENTUCKY  
BEFORE THE PUBLIC SERVICE COMMISSION

IN THE MATTER OF:

AN INVESTIGATION INTO THE ADEQUACY )	CASE
OF THE WATER SUPPLY OF MAGOFFIN )	NO. 2008-00443
COUNTY WATER DISTRICT )	

TESTIMONY OF WILLIAM CALDWELL  
ON BEHALF OF THE ENERGY AND ENVIRONMENT CABINET  
DIVISION OF WATER

1 **Adequacy of the quantity source of water: historical hydrologic records:**

2 All drinking water distributed by MCWD is purchased from Salyersville Water Works (PWSID  
3 #0770566). The primary source of water supply is the Licking River, located in the uppermost  
4 reaches of the Licking River basin. At the point of withdrawal the drainage area above the intake  
5 is approximately 107 square miles.

6 Historical streamflow records for the Licking River near Salyersville are available for a 63-year  
7 period of record from 1939 through 1997 and 2001-2004. The record was evaluated to identify  
8 the occurrence of drought events of sufficient intensity and duration to create a water-supply  
9 deficit at the primary Licking River source. Each deficit that was identified was compared to the  
10 amount of water available from the backup wells (estimated to be 300,000 gallons per day) and  
11 from the “buffer” created from the stored water behind the dam on the Licking River at the  
12 intake site (estimated to be 2.5 million gallons).

13 The results indicate that drought events in the 1940s and 1950s were likely severe enough to  
14 cause some level of water-supply deficit under today’s current demands. Most of these events  
15 occur late in the summer and early fall of the year. A repeat of these drought events could  
16 require some level of supplemental water supply above what could be supplied by the SWW  
17 river intake or backup wells (Table 3.).

18  
19

20 **Table 3. Estimated water supply shortfall at Salyersville Water Works for the period**  
21 **1939 through 1997 under an assumed demand of 700,000 gpd.**

22

		Supplemental Water Supply Requirement	
Drought Year	~Duration of Water Supply Deficit	Average	Maximum
	(days)	(million gallons per day)	
1943	34	0.275	0.400

1948	21	0.360	0.400
1953	45	0.240	0.400
1955	65	0.285	0.400
1957	8	0.250	0.400

1  
2 Compared to the instrumental record that began in 1895, the 30-years between 1930 and 1960  
3 were characterized by a higher frequency and severity of drought events than any other similar  
4 period. Prior to the events of 2007 and 2008, significant water supply deficits at SWW were  
5 essentially absent for more than 50 years.

6 **Adequacy of the quantity of source of water: modern-day water shortages**

7  
8 Following the last extreme droughts of the 1950s extreme hydrologic drought was virtually  
9 absent for a 30-year period until the mid to late 1980s. The drought of 1988 reached extreme  
10 status in central and eastern Kentucky by mid-July but flows in the Licking River remained well  
11 above a critical level at Salyersville. A more severe drought in 1999 caused some concerns at  
12 Salyersville, but no actions beyond voluntary measures under a water shortage advisory were  
13 necessary. MCWD issued a voluntary advisory on June 24, 1999 following the announcement  
14 of a water shortage advisory by SWW. During the summer of 1999 flows in the Licking River  
15 remained at a useable level and drought conditions abated in early October.


16 The recent shortages and subsequent water-supply emergency in Magoffin County are the result  
17 of a two-year drought event that has had severe impacts to the hydrologic conditions in the upper  
18 Licking River watershed. Based on historical climate and hydrologic records, the 2007-2008  
19 drought in Magoffin County ranks as one of the five (5) most severe droughts of the instrumental  
20 record. Furthermore, measured flows in the Licking River at Salyersville and Red River in  
21 Wolfe County suggest that this two-year drought is the most severe two-year hydrologic drought  
22 on record in the area comprising the upper Licking River and upper Red River basins.

23

1 As is the case with many water systems in Kentucky, MCWD is exposed to periodic  
2 occurrences of drought that have the potential to negatively impact the adequacy of the source of  
3 supply. Historical records indicate that the upper Licking River basin does not have a history of  
4 routinely reaching the level of hydrologic impact that developed by August of 2008. In most  
5 years and under the more common drought scenarios, a combination of the Licking River and  
6 backup wells can be expected to provide an adequate supply provided SWW and MCWD can  
7 effectively limit total water demand to no more than 700,000 gallons per day. Common drought  
8 scenarios will be those in which flows in the Licking River fall below a level that can fully meet  
9 the demands for raw water by SWW and MCWD, and where supplemental water from the  
10 backup wells is sufficient to meet the deficit. This level of drought can be expected to recur on a  
11 routine basis, at least one or two years each decade. It is not possible to place an upper limit on  
12 the “safe yield” of the combined sources of supply to SWW and MCWD. However, as demands  
13 on these sources increase so that 700,000 gpd is no longer an achievable conservation goal, the  
14 adequacy of these sources will become less certain under common drought scenarios.

15 Hydrologic records and recent events confirm that there is potential for more extreme hydrologic  
16 drought in this area that can result in a loss of nearly all of the available flow in the Licking  
17 River. This level of drought may be statistically uncommon, but the potential consequences of  
18 having no options beyond the river and backup wells could be a significant threat to human  
19 health and safety when these droughts recur. Under these conditions the sources of supply to  
20 MCWD via SWW will not be adequate to meet demands. Increases in demand for water by  
21 MCWD either from population growth or line extensions to un-served areas will only exacerbate  
22 this condition.

1 I adopt the foregoing as my sworn testimony, and state that the statements are true and correct to  
2 the best of my knowledge, information and belief formed after a reasonable inquiry.

3  
4   
5 William Caldwell  
6 Division of Water  
7

8  
9  
10 My analysis and conclusions came from the raw data for the USGS streamflow gages for  
11 Licking River at Salyersville and Red River, near Hazel Green, available at the site below:

12 <http://waterdata.usgs.gov/ky/nwis/rt>  
13

14 Individual links to the gage-specific information that I used are provided below:  
15

16 Red River near Hazel Green; USGS # 03282500  
17

18 [http://waterdata.usgs.gov/nwis/dv?cb\\_00060=on&format=rdb&begin\\_date=1954-04-01&end\\_date=2008-12-03&site\\_no=03282500&referred\\_module=sw](http://waterdata.usgs.gov/nwis/dv?cb_00060=on&format=rdb&begin_date=1954-04-01&end_date=2008-12-03&site_no=03282500&referred_module=sw)  
19

20 Licking River near Salyersville; USGS # 03248500  
21

22 [http://waterdata.usgs.gov/nwis/dv?cb\\_00060=on&format=rdb&begin\\_date=1938-10-01&end\\_date=1997-09-30&site\\_no=03248500&referred\\_module=sw](http://waterdata.usgs.gov/nwis/dv?cb_00060=on&format=rdb&begin_date=1938-10-01&end_date=1997-09-30&site_no=03248500&referred_module=sw)  
23

24 Licking River below Mason Fork near Salyersville; USGS # 03248300  
25

26 [http://waterdata.usgs.gov/nwis/dv?cb\\_00060=on&format=rdb&begin\\_date=2001-04-25&end\\_date=2008-12-03&site\\_no=03248300&referred\\_module=sw](http://waterdata.usgs.gov/nwis/dv?cb_00060=on&format=rdb&begin_date=2001-04-25&end_date=2008-12-03&site_no=03248300&referred_module=sw)  
27

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1 CERTIFICATE OF SERVICE

2  
3 I hereby certify that on the 15<sup>th</sup> day of December, 2008,  
4 a true and accurate copy of the foregoing Testimony of  
5 William Caldwell was mailed, postage prepaid,  
6 to the following:  
7

8  
9 Randall Hardin, Chair  
10 Magoffin County Water District  
11 749 Parkway Road  
12 P.O. Box 490  
13 Salyersville, Kentucky 41465  
14

James W. Hoskins, Superintendent  
Magoffin County Water District  
749 Parkway Road  
P.O. Box 490  
Salyersville, Kentucky 41465

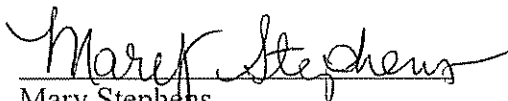
15 Thomas Howard, Superintendent  
16 Salyersville Water Works  
17 401 College Street  
18 Salyersville, Kentucky 41465  
19

Judy Jackson, Chair  
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21 HC 60 Box 255  
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24 Honorable David Edward Spenard  
25 Assistant Attorney General  
26 Office of the Attorney General  
27 Utility & Rate Intervention Division  
28 1024 Capital Center Drive Suite 200  
29 Frankfort, Kentucky 40601-8204  
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UTILITIES COMMISSION

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32   
33 \_\_\_\_\_  
34 Mary Stephens  
35  
36  
37

COMMONWEALTH OF KENTUCKY  
BEFORE THE PUBLIC SERVICE COMMISSION

IN THE MATTER OF:

AN INVESTIGATION INTO THE ADEQUACY )	CASE
OF THE WATER SUPPLY OF MAGOFFIN )	NO. 2008-00443
COUNTY WATER DISTRICT )	

Testimony of Julie Roney  
Energy and Environment Cabinet  
Department for Environmental Protection  
Division of Water



1  
2 Magoffin County Water District (MCWD), PWSID# KY0770525, is identified as a  
3 surface water purchaser under the Safe Drinking Water Act as implemented in Kentucky.  
4 This means that MCWD does not have a water treatment plant and therefore does not  
5 produce its own potable water. Presently, all drinking water distributed by MCWD is  
6 purchased from Salyersville Water Works (SWW), PWSID #0770566. SWW has one (1)  
7 surface water treatment plant that relies primarily on the Licking River for source water.  
8 During emergency situations, SWW has two (2) limited-capacity groundwater wells that  
9 can be used. However, the wells can only supply 30% of the rated one million gallon per  
10 day (1 MGD) design flow of the SWW treatment plant.

11 During the drought situation in Magoffin County in 2008, it became necessary for  
12 SWW to utilize the two wells to supplement customer demand and lessen the stress on  
13 the Licking River. In addition, SWW engaged in stream-channel trenching to release  
14 water that was stored in pools upstream of the water supply intake and transferred water  
15 from a pool below the intake back into the water supply pool. Both of these actions were  
16 implemented by SWW as efforts to maintain a useable level of water in the water supply  
17 pool on the Licking River.

18 As a water system that treats surface water, SWW must conduct testing on the filtered  
19 water at the treatment plant as well as test the finished water in the distribution system.  
20 MCWD, as a purchasing system, conducts less monitoring than that required of SWW  
21 and only on the water distributed by this public water system. Therefore, there are fewer  
22 compliance criteria placed on purchasing systems than those that treat raw source water.

1 The quality of the drinking water distributed to MCWD customers is related to the quality  
2 of water supplied by SWW and influenced by the layout of the MCWD distribution  
3 system.

4 **Primary Safe Drinking Water Act (SDWA) Contaminants:**

5  
6 SWW has had eleven (11) violations of the SDWA since 2003: seven (7) for not  
7 meeting total organic carbon removal and four (4) for exceeding haloacetic acid  
8 (disinfection by-product) maximum contaminant levels. SWW is now in compliance  
9 with TOC removal.

10 MCWD has had four (4) violations of the SDWA since 2003: two (2) for  
11 monitoring issues associated with the Total Coliform Rule and two (2) for Consumer  
12 Confidence Report content.

13 **Turbidity:**

14  
15 As a result of the decreasing water quality in the Licking River, SWW exceeded the  
16 treatment technique (TT) requirements of the Long Term 1 Surface Water Treatment  
17 Rule for turbidity removal in October. The TT requirements are 2-fold:

- 18 • No more than 5%<sup>1</sup> of the filtered water turbidity results can exceed 0.3 Turbidity  
19 Units (NTU)
- 20 • At no time will the filtered water turbidity exceed 1 NTU

21 As of October 27, 2008, SWW exceeded 0.3 NTU in 30% of the filtered water turbidity  
22 readings and one (1) NTU fourteen (14) times. SWW will receive two notices of

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<sup>1</sup> In the Division of Water's October 29, 2008 Response to Commission staff's information request it is stated, incorrectly, that the treatment technique requirements include that, "No more than 95% of the filtered water turbidity results can exceed 0.3 turbidity Units (NTU)". The correct statement of the requirement is that, "No more than 5% of the filtered water turbidity results can exceed 0.3 turbidity Units (NTU)".

1 violation for the month of October 2008 for violation of turbidity TT requirements and  
2 will be required to conduct public notification.

3 In addition, SWW failed to collect sufficient turbidity readings on 5 days through  
4 October 26, 2008 and will so receive a Notice of Violation for a Monitoring and  
5 Reporting violation.

6 As MCWD purchases water from SWW, they, too, have purchased and  
7 distributed water with elevated turbidity and will also be required to notify their  
8 customers via a public notification process.

9 On October 7, 2008, a county-wide Boil Water Advisory (BWA) was issued due  
10 to the elevated turbidity levels. The BWA will remain in effect until the turbidity levels  
11 decrease to and remain below the regulatory treatment technique limit of 0.3 NTU.

12 Testing conducted by the Division of Water for Secondary Maximum Contaminants  
13 Levels (SMCLs, see below) indicate the turbidity to be due to color from oxidized  
14 manganese—treatment has been adjusted at the SWW treatment plant to improve  
15 manganese removal.

16 Residual Disinfectant:

17  
18 The SDWA and 401 KAR 8:150 Section 1(1)(a)(4) require that chlorine residuals be  
19 checked daily at representative points throughout the system. MCWD will receive a  
20 notice of violation for a Monitoring and Reporting violation; specifically for failure to  
21 monitor the distribution system for chlorine residual on a **daily** basis. However, of the  
22 chlorine residual levels reported, none were less than the minimum of 0.2 mg/L.

1 **Secondary SDWA Contaminants**

2  
3 EPA has regulated Secondary Maximum Contaminant Levels (SMCL) for  
4 contaminants that are not health-based but rather mean to address aesthetic concerns such  
5 as taste, odor or color. Should such contaminants be detected in the source water and not  
6 adequately removed through treatment, the finished water can be considered  
7 unsatisfactory in appearance or taste to customers. SMCLs are not considered  
8 “enforceable” but “the cabinet may direct that supplier to modify the treatment procedure  
9 or to locate a more suitable source of water” (401 KAR 8:600 Section 1(7)).

10 Decreasing source-water levels and diminished flow in the Licking River can result in  
11 increased levels of secondary contaminants that cause discolored water. The Division of  
12 Water, in an effort to determine the cause of the elevated filtered water turbidity at the  
13 SWW plant, collected water samples from the Licking River, the producing water wells,  
14 the water treatment plant tap and a distribution site within the SWW distribution system.  
15 The samples were analyzed for pH, turbidity, iron, manganese, color and total organic  
16 carbon.

- 17
- 18 • The Licking River exceeded the SMCLs for iron, manganese and color.
  - 19 • The water sampled at the treatment plant tap exceeded the SMCL for manganese.
  - 20 • The sample of the SWW distribution exceeded the SMCL for manganese.
  - 21 • The two wells continue to show good quality water

22 Manganese above the secondary standard of 0.050 mg/L can result in discolored water  
23 and a metallic taste. Treatment was adjusted at the water treatment plant on October 20,  
2008 to improve removing the manganese from the Licking River.

1 **Table 1. 4-Hour Compliance Turbidity Readings for October through 10/26/08—No**  
 2 **more than 5% over 0.3 NTU/None over 1 NTU**

Date	Hours Operated	Period 1	Period 2	Period 3	Period 4	Period 5	Period 6
1	17	0.13	0.13	0.13	0.13	0.13	0.12
2	13	0.12	0.12	0.12	0.12	0.11	0.12
3	14.3	0.12	0.12	0.12	0.12	0.11	0.11
4	14.3	0.1	0.1	0.1	0.16	0.16	0.17
5	13.3	0.17	0.17	0.11	0.13		
6	16.3	0.22	0.22	0.24	<b>0.53</b>		
7	11.5						
8	19.2		<b>3.9</b>	<b>3.4</b>	<b>1.04</b>	<b>2.78</b>	<b>1.1</b>
9	17.3	<b>0.90</b>	<b>0.70</b>	<b>3.17</b>	<b>2.62</b>	<b>0.33</b>	<b>0.51</b>
10	19.5	<b>0.55</b>	<b>1.09</b>			<b>1.2</b>	<b>0.60</b>
11	16.3	<b>0.75</b>	<b>1.22</b>	<b>1.09</b>		<b>0.99</b>	<b>0.49</b>
12	20.0	<b>0.56</b>	<b>1.54</b>	<b>3.29</b>	0.24	0.20	<b>0.40</b>
13	16.3	0.10	0.10	0.10	0.13		
14	15.5	<b>0.89</b>	0.15	0.24	0.14	0.30	<b>0.32</b>
15	10.3	<b>0.34</b>	<b>0.34</b>	<b>0.33</b>	0.25	0.16	<b>0.52</b>
16	11.3	0.23		0.09	0.11	0.08	0.10
17	15.3	0.11		0.17	0.24	0.16	<b>0.52</b>
18	12.3	<b>0.83</b>	<b>0.92</b>	0.10	0.10	0.11	0.13
19	12.2	<b>0.37</b>	<b>0.34</b>	<b>1.93</b>	0.09	0.10	<b>0.60</b>
20	10.5	0.12		0.13	0.12	0.11	0.10
21	23.2	0.09		0.22	<b>0.33</b>	0.12	<b>0.38</b>
22	17.1	<b>0.53</b>	0.21	0.20	0.17	0.18	0.21
23	20.5	0.13	0.17	0.17	0.11	0.28	0.19
24	19.7	0.11	0.11	0.17	0.14	0.16	0.26
25	20.6	0.16	<b>0.32</b>	0.13	0.09	0.22	0.16
26	14.3	0.13	0.18	0.13	0.10	0.14	0.15
27							
28							
29							
30							
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3  
 4 42 readings over 0.3 NTU out of 138 readings taken = 30%  
 5

6 **Table 2. Secondary Maximum Contaminant Level (SMCL) Monitoring—Collected**  
 7 **10/14/08**

Parameter	Licking River @ Intake	Well #1	Well #2	WTP Tap	Salyersville Wastewater Plant	SMCL (mg/L)
Total organic carbon	3.97	0.556	0.732	1.86	1.46	

(mg/L)						
Color (S.U.)	23.5	4.82	ND	3.61	ND	15
pH	7.5	8.4	8.2	7.8	7.9	6.5 – 8.5
Iron (mg/L)	0.577	0.0495	0.110	0.0192	ND	0.3
Manganese (mg/L)	1.300	0.00452	0.00348	<i>1.14</i>	<i>0.0895</i>	0.05
Turbidity (NTU)	8.2	0.98	0.36	<i>1.15</i>	0.67	See table above

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**Supplement to Testimony Originally Presented to PSC on October 24, 2008  
Magoffin County Water Supply Issues**

**Salyersville Municipal Water:**

The water supply concerns lessened in November 2008 in Magoffin County as rain moved through the area, resulting in 3” of rainfall (November Monthly Operation Report for Salyersville) and increased flow in the Licking River. However, water quality became an issue due to poor source water conditions.

Due to color in the Licking River, increased turbidity in the finished drinking water occurred in mid-November. The color, primarily due to dissolved manganese and organics, also resulted in a significant chlorine demand that could not be handled by the current processes at the water treatment plant. This led to chlorine residuals in the distribution system that were below the required 0.2 mg/L free chlorine, prompting a Boil Water Advisory from November 13 until it was lifted by the DOW on November 25.

1 Samples collected by DOW staff on November 21, 2008 confirmed the decreasing levels  
2 of manganese in the raw and distributed water:

3

Site	TOC (mg/L)	Iron (mg/L)	Manganese( mg/L)
Licking River	4.06	0.534	0.056
Plant Tap	3.33	0.0247	0.012
Fire Station	4.00	0.0843	0.034

4 Secondary Maximum Contaminant Level: Iron 0.3 mg/L  
5 Manganese 0.05 mg/L  
6

7 In November, Salyersville violated Treatment Techniques two times: once exceeding 1  
8 NTU turbidity in the filtered water and once exceeding 0.3 NTU in more than 5% of the  
9 filtered water turbidity values. They also violated distribution system chlorine residuals  
10 with detection below 0.2 mg/L in more than 5% of the monthly readings for 2  
11 consecutive months. Preliminary data also indicate that Salyersville violated the  
12 Maximum Contaminant Level for trihalomethanes and haloacetic acids for the 4<sup>th</sup> quarter  
13 of 2008. Salyersville will be issued an NOV for the above violations and will be required  
14 to do Public Notification for Tier 2 violations (customer notification within 30 days of  
15 receipt of the violation). I and other Division staff conducted an inspection of the  
16 Salyersville water system on November 21, 2008 and observed numerous operational,  
17 maintenance, design and management deficiencies. An Inspection Report noting these  
18 deficiencies has been mailed to Salyersville and the Division will be referring them to the  
19 Division of Enforcement for resolution of the deficiencies by a formal Agreed Order.

20 **Magoffin County Water District:**

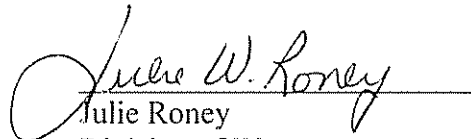
21  
22 Magoffin County Water District (MCWD) has the ability to boost the chlorine residual in  
23 the distributed water at several locations in their distribution system. This enabled them

1 to maintain a sufficient chlorine residual during November when Salyersville was having  
2 difficulty doing so.  
3 MCWD will also be required to conduct Public Notification for Salyersville's turbidity  
4 and disinfection by-product violations in November.  
5

6 To prepare my testimony I reviewed the documents submitted herewith as:

- 7 1. Cabinet's Exhibit 1 - Monthly Operation Report (MOR), 10/2008  
8  
9 Magoffin County Water District PWS ID: KY0770525  
10
- 11 2. Cabinet's Exhibit 2 - Monthly Operation Report (MOR), 10/2008  
12 Salyersville Water Works PWSID: KY0770566
- 13 3. Cabinet's Exhibit 3 - Kentucky Division of Water/Drinking Water  
14 Branch, Monthly Operating Report (MOR) Plant Summary Form, Salyersville Water  
15 Works PWS ID: KY0770566 Monitoring Period 10/2008
- 16 4. Cabinet's Exhibit 4 - response letter and Division of Water Drinking  
17 Water Sanitary Survey, Salyersville Water Works, PWS ID: KY0770566, dated  
18 5/07/2007
- 19 5. Cabinet's Exhibit 5 - Inspection Letter, dated December 11, 2008

20  
21 I certify that the foregoing statements are true and accurate to the best of my  
22 knowledge after reasonable investigation, and adopt them as my sworn testimony, as if  
23 under oath.  
24

25  
26   
27 Julie Roney  
28 Division of Water  
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30  
31



1 CERTIFICATE OF SERVICE

2  
3 I hereby certify that on the \_\_\_\_\_ day of \_\_\_\_\_, 2008,  
4 a true and accurate copy of the foregoing Testimony of  
5 Julie Roney and Exhibits thereto were mailed, postage prepaid,  
6 to the following:  
7

8  
9 Randall Hardin, Chair  
10 Magoffin County Water District  
11 749 Parkway Road  
12 P.O. Box 490  
13 Salyersville, Kentucky 41465

James W. Hoskins, Superintendent  
Magoffin County Water District  
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15 Thomas Howard, Superintendent  
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Judy Jackson, Chair  
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22 Salyersville, Kentucky 41465

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24 Honorable David Edward Spenard  
25 Assistant Attorney General  
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Mary Stephens  
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SCANNED / QC

AC 116-08

KENTUCKY DIVISION OF WATER 2008 NOV -5 AM 9:55 Revised 7/1/06  
DRINKING WATER BRANCH DIVISION OF WATER

MONTHLY OPERATION REPORT (MOR)--ALL WATER SYSTEMS

MONTH & YEAR OF: ~~11/03/08~~

DEP Form 4012--Revised 07/2006

PWS ID :	<u>KY0770525</u>	PLANT ID:	PLANT NAME:
PWS NAME:	<u>Magoffin County Water Dist.</u>	PLANT CLASS:	DIST CLASS: <u>II-D</u>
AGENCY INTEREST (AI):	<u>34014</u>	DATE MAILED:	<u>11/03/2008</u>
SOURCE NAME:	<u>Salyersville Water Works</u>	COUNTY:	<u>Magoffin</u>
OPERATOR(S) RESPONSIBLE / IN-CHARGE		CLASS	CERTIFICATION NUMBER
WTP SHIFT 1:			
WTP SHIFT 2:			
WTP SHIFT 3:			
DISTRIBUTION:	<u>James W. Hoskins</u>	<u>II-D</u>	<u>2803</u>

THIS REPORT MUST BE RECEIVED BY THE DIVISION OF WATER AND APPLICABLE FIELD OFFICE  
NO LATER THAN 10 DAYS AFTER THE END OF THE MONTH.

TREATMENT PLANTS COMPLETE:

- DESIGN CAPACITY (gpm): \_\_\_\_\_
- TYPE OF FILTRATION USED: \_\_\_\_\_
- DESIGN FILTRATION RATE (gpm/sq. ft.): \_\_\_\_\_
- PERCENT BACKWASH WATER USED: \_\_\_\_\_
- DATE FLOCCULATION BASIN(S) LAST CLEANED:• \_\_\_\_\_
- DATE SETTLING BASIN(S) LAST CLEANED: \_\_\_\_\_

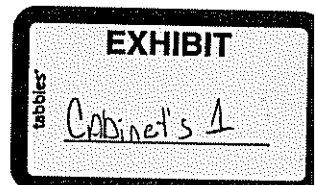
I certify under penalty of law that I have personally examined and am familiar with the information submitted herein. Based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See KRS 224.99-010 and 401 KAR 8:020. (Penalties under this statute and regulation may include fines up to \$25,000 per violation or by imprisonment for not more than one year, or both).

Alta McCaskey

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

11/03/2008

DATE



PWS ID: KY 77 525  
 PLANT ID: \_\_\_\_\_



REPORT MONTH/YEAR: 10 / 2008

PAGE 7 OF 11

DAY	CHEMICALS ADDED			TEST RESULTS							
	CHLORINE BOOSTER	CHLORINE BOOSTER		TOTAL (T) AND FREE (F) CHLORINE RESIDUAL (ppm)							
				NORTH		SOUTH		EAST		WEST	
	LBS	LBS		T	F	T	F	T	F	T	F
1							1.2		1.0		
2							1.0				1.1
3					0.9				0.9		
4											
5											
6	<.5				0.8		1.1		0.7		1.0
7							1.3		0.9		
8					1.0		1.5				
9					1.0						0.9
10							1.8		1.2		
11											
12											
13	<.5				1.1		2.0		1.3		1.0
14							1.9				1.1
15					1.0				1.2		
16					1.2		1.8				
17									1.4		1.2
18											
19											
20	<.5				1.0		1.5		1.3		1.0
21					0.9		1.6				
22									1.2		0.9
23					1.1		1.5				
24							1.4				0.8
25											
26											
27	<.5				1.3		1.6		1.3		1.0
28					1.2				1.1		
29							1.7				1.1
30					1.1		1.5				
31									1.0		1.0
AVERAGE	<.5		Average		1.0		1.5		1.1		1.0
TOTAL	<2.0		Total Minimum		0.8		1.0		0.7		0.8
			Free Minimum								
			Maximum								

Total # Chlorine Samples \_\_\_\_\_  
 # Less than 0.2 mg/L/0.5 mg/L \_\_\_\_\_

Number of Free Residuals: 54  
 Number of Total Residuals: \_\_\_\_\_  
 Total # Less than 0.2 mg/L: \_\_\_\_\_  
 Total # Less than 0.5 mg/L: \_\_\_\_\_

Minimum Monthly Free Residual: 0.7  
 Minimum Monthly Total Residual: \_\_\_\_\_

Disinfectant Chloramines? (Y/N) N  
 Number of days of operation? 20



1 to maintain a sufficient chlorine residual during November when Salyersville was having  
2 difficulty doing so.  
3 MCWD will also be required to conduct Public Notification for Salyersville's turbidity  
4 and disinfection by-product violations in November.

5

6 To prepare my testimony I reviewed the documents submitted herewith as:

- 7 1. Cabinet's Exhibit 1 - Monthly Operation Report (MOR), 10/2008  
8  
9 Magoffin County Water District PWS ID: KY0770525  
10
- 11 2. Cabinet's Exhibit 2 - Monthly Operation Report (MOR), 10/2008  
12 Salyersville Water Works PWSID: KY0770566
- 13 3. Cabinet's Exhibit 3 - Kentucky Division of Water/Drinking Water  
14 Branch, Monthly Operating Report (MOR) Plant Summary Form, Salyersville Water  
15 Works PWS ID: KY0770566 Monitoring Period 10/2008
- 16 4. Cabinet's Exhibit 4 - response letter and Division of Water Drinking  
17 Water Sanitary Survey, Salyersville Water Works, PWS ID: KY0770566, dated  
18 5/07/2007
- 19 5. Cabinet's Exhibit 5 - Inspection Letter, dated December 11, 2008

20

21 I certify that the foregoing statements are true and accurate to the best of my  
22 knowledge after reasonable investigation, and adopt them as my sworn testimony, as if  
23 under oath.

24

25

26

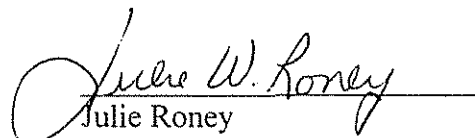
27

28

29

30

31

  
Julie Roney  
Division of Water

1 CERTIFICATE OF SERVICE

2  
3 I hereby certify that on the \_\_\_\_ day of \_\_\_\_\_, 2008,  
4 a true and accurate copy of the foregoing Testimony of  
5 Julie Roney and Exhibits thereto were mailed, postage prepaid,  
6 to the following:

7  
8  
9 Randall Hardin, Chair  
10 Magoffin County Water District  
11 749 Parkway Road  
12 P.O. Box 490  
13 Salyersville, Kentucky 41465

James W. Hoskins, Superintendent  
Magoffin County Water District  
749 Parkway Road  
P.O. Box 490  
Salyersville, Kentucky 41465

14  
15 Thomas Howard, Superintendent  
16 Salyersville Water Works  
17 401 College Street  
18 Salyersville, Kentucky 41465

Judy Jackson, Chair  
Salyersville Water Works  
401 College Street  
Salyersville, Kentucky 41465

19  
20 Billy J. Rowe, Sr.  
21 HC 60 Box 255  
22 Salyersville, Kentucky 41465

23  
24 Honorable David Edward Spenard  
25 Assistant Attorney General  
26 Office of the Attorney General  
27 Utility & Rate Intervention Division  
28 1024 Capital Center Drive Suite 200  
29 Frankfort, Kentucky 40601-8204

A. David Blankenship, Esq.  
Blankenship Law Office, LC  
328 E. Court Street  
Prestonsburg, Kentucky 41653  
COUNSEL FOR PAINTSVILLE  
UTILITIES COMMISSION

30  
31  
32  
33  
34 \_\_\_\_\_  
Mary Stephens

SCANNED / QC  
A.K. 11-7-08

2008 NOV -5 PM 4:00

KENTUCKY DIVISION OF WATER  
DRINKING WATER BRANCH

DIVISION OF WATER

Revised 01/04/07

MONTHLY OPERATION REPORT (MOR)--ALL WATER SYSTEMS

MONTH & YEAR (mm/yyyy)

10/2008

Indicate one  
with "X"

SURFACE WATER

GROUNDWATER

PURCHASE/DISTRIBUTE ONLY

DEP Form 4012--Revised 07/2006

PWS ID :	KY0770566	PLANT ID: A	PLANT NAME:	Salyersville Water Works
PWS NAME:	Salyersville Water Works	PLANT CLASS: 3-A	DIST. CLASS: 2-D	
AGENCY INTEREST (AI):	2889	DATE MAILED:		
SOURCE NAME:	Licking River	COUNTY:	Magoffin	
	Gardener Trail Wells			
	OPERATOR(S) RESPONSIBLE / IN-CHARGE	CLASS	CERTIFICATION NUMBER	
WTP SHIFT 1:	Nora Bauer	3-A	51050	
WTP SHIFT 2:				
WTP SHIFT 3:				
DISTRIBUTION:	Adam Hunley	2-D	2254	

THIS REPORT MUST BE RECEIVED BY THE DIVISION OF WATER AND APPLICABLE FIELD OFFICE  
NO LATER THAN 10 DAYS AFTER THE END OF THE MONTH.

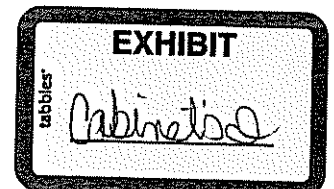
TREATMENT PLANTS COMPLETE:

- |   |            |
|---|------------|
| 1. DESIGN CAPACITY (gpm):                   | 695        |
| 2. TYPE OF FILTRATION USED:                 | Dual Media |
| 3. DESIGN FILTRATION RATE (gpm/sq. ft.):    | 3          |
| 4. PERCENT BACKWASH WATER USED:             | 1.4        |
| 5. DATE FLOCCULATION BASIN(S) LAST CLEANED: | 04/23/2008 |
| 6. DATE SETTLING BASIN(S) LAST CLEANED:     | 04/23/2008 |

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein. Based on my inquiry of those individuals immediately responsible for obtaining the information, I believe the submitted information is true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment. See KRS 224.99-010 and 401 KAR 8:020. (Penalties under this statute and regulation may include fines up to \$25,000 per violation or by imprisonment for not more that one year, or both).

Nora Bauer  
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

11-3-08  
DATE



KENTUCKY DIVISION OF WATER - DRINKING WATER BRANCH  
 WATER TREATMENT PLANT - MONTHLY OPERATING REPORT

PWS ID : KY0770566  
 PLANT ID: A

REPORT MONTH/YEAR: 10/2008  
 PAGE 1 OF 11

DAY	RAW WATER TREATED GALLONS	HOURS PLANT OPERATED	COAGULANT DELPAC 2020		COAGULANT		pH ADJUSTMENT LIME		DISINFECTANT Chlorine Pre		DISINFECTANT Chlorine Post	
			LBS	PPM	LBS	PPM	LBS	PPM	LBS	PPM	LBS	PPM
	814,112	17.0	195.0	28.7			51.0	7.5	7.6	1.1	8.5	1.3
	582,931	13.0	149.0	30.6			39.0	8.0	5.8	1.2	6.5	1.3
	761,053	14.3	164.0	25.8			42.0	6.6	6.4	1.0	7.1	1.1
	595,884	14.3	209.0	42.1			42.0	8.5	6.4	1.3	7.1	1.4
	609,953	13.3	187.0	36.8			39.0	7.7	5.9	1.2	6.6	1.3
	767,703	16.3	187.0	29.2			48.0	7.5	7.3	1.1	8.1	1.3
	774,165	11.5	131.0	20.3			34.0	5.3	5.1	0.8	6.0	0.9
	713,651	19.2	220.0	37.0			57.0	9.6	8.6	1.4	10.1	1.7
	607,672	17.3	220.0	43.4			51.0	10.1	8.6	1.7	9.1	1.8
	768,141	19.5	248.0	38.7			58.0	9.1	9.7	1.5	10.3	1.6
	623,800	16.3	207.0	39.8			48.0	9.2	8.1	1.6	8.6	1.7
	726,348	20.0	255.0	42.1			60.0	9.9	10.0	1.7	10.6	1.7
	763,261	16.3	207.0	32.5			48.0	7.5	8.1	1.3	8.6	1.4
	688,416	15.5	197.0	34.3			46.0	8.0	9.5	1.7	10.9	1.9
	640,402	10.3	117.0	21.9			30.0	5.6	6.7	1.3	7.2	1.3
	695,059	11.3	129.0	22.3			33.0	5.7	8.0	1.4	8.0	1.4
	663,140	15.3	175.0	31.6			45.0	8.1	10.8	2.0	10.8	2.0
	655,797	12.3	141.0	25.8			36.0	6.6	8.7	1.6	8.7	1.6
	793,478	12.2	139.0	21.0			36.0	5.4	9.1	1.4	7.5	1.1
	408,071	10.5	120.0	35.3			31.0	9.1	7.8	2.3	6.5	1.9
	800,579	23.2	253.0	37.9			69.0	10.3	16.4	2.5	14.3	2.1
	561,406	17.1	169.0	36.1			51.0	10.9	12.1	2.6	10.6	2.3
	739,080	20.5	202.0	32.8			61.0	9.9	14.5	2.4	12.6	2.0
	673,647	19.7	195.0	34.7			59.0	10.5	14.0	2.5	12.2	2.2
	708,167	20.6	236.0	40.0			51.0	8.6	14.6	2.5	12.7	2.2
	629,301	14.3	164.0	31.2			35.0	6.7	10.1	1.9	8.8	1.7
	1,032,869	16.2	185.0	21.5			40.0	4.6	12.1	1.4	10.6	1.2
	606,359	14.2	139.0	27.5			35.0	6.9	10.6	2.1	9.3	1.8
	651,446	15.3	122.0	22.5			38.0	7.0	11.4	2.1	10.0	1.8
	854,460	20.0	140.0	19.6			50.0	7.0	15.0	2.1	13.2	1.9
	653,816	15.2	106.0	19.4			37.0	6.8	11.3	2.1	9.9	1.8
TOTAL	21,564,167		5508.0		0.0		1400.0		300.3		291.0	
AVERAGE	695,618		177.7	31.0	#DIV/0!	#DIV/0!	45.2	7.9	9.7	1.7	9.4	1.6
MAX	1,032,869											





KENTUCKY DIVISION OF WATER - DRINKING WATER BRANCH  
 WATER TREATMENT PLANT - MONTHLY OPERATING REPORT

PWS ID : KY0770566  
 PLANT ID: A

REPORT MONTH/YEAR: 10/2008

PAGE 3 OF 11

DAY	pH			TOTAL ALKALINITY		TOTAL HARDNESS		CHLORINE RESIDUAL				TURBIDITY (NTU)		
	RAW	TOP OF FILTER	TAP	RAW	TAP	RAW	TAP	TOP OF FILTER		PLANT TAP		RAW	SETTLED WATER	PLANT TAP
		TOTAL						FREE	TOTAL	FREE				
	7.29	7.39	7.51	102	98	328	340	0.53	0.43	1.56	1.48	16.00	1.30	0.13
	7.43	7.77	7.62	100	100	320	214	0.68	0.60	1.54	1.68	14.00	2.00	0.12
	7.29	7.21	7.53	100	102	304	258	0.96	0.74	1.46	1.58	16.00	1.90	0.11
	7.34	7.35	7.50	100	100	300	284	0.64	0.51	1.71	1.60	24.00	1.80	
	7.40	7.61	7.50	104	102	308	288	0.71	0.62	1.67	1.55	21.00	1.80	
	7.41	7.17	7.60	106	104	300	300	0.73	0.61	1.68	1.63	17.00	1.60	0.24
	7.38	7.06	7.47	102	90	290	286	0.74	0.60	1.36	1.75	16.00	1.70	0.46
	7.45	7.62	7.98	90	160	232	110	0.87	0.58	2.23	2.21	15.00	2.50	0.45
	7.38	7.86	7.42	100	160	274	108	0.31	0.29	1.29	1.51	19.00	2.10	1.07
	7.55	7.54	7.89	102	168	270	102	0.69	0.75	1.90	1.71	18.00	3.30	2.62
	7.51	7.50	7.81	102				0.78	0.71	2.12	1.93	19.00	2.10	
	7.53	7.57	7.77	100				0.53	0.41	2.19	2.00	20.00	2.30	
	7.26	7.27	7.77	94	134	270	150	0.33	0.22	1.79	1.74	11.00	1.30	0.14
	7.39	7.54	7.84	90	170	262	96	0.57	0.49	1.50	1.88	12.00	1.30	0.10
	7.29	7.45	7.68	100	170	256	140	0.13	0.21	1.42	1.16	9.00	1.70	0.25
	7.33	7.22	7.27	102	100	266	266	0.42	0.33	1.51	1.60	12.00	1.00	0.09
	7.50	7.13	7.27	100	100	252	220	0.42	0.44	1.27	1.13	12.00	1.30	0.24
	7.54	7.23	7.26	108	104	264	228	0.59	0.48	1.55	1.43	11.00	1.10	0.10
	7.43	7.55	7.31	106	106	268	222	0.91	0.77	1.71	1.59	10.00	1.90	0.09
	7.28	7.33	7.77	104	104	270	240	0.45	0.37	1.61	1.70	10.00	1.20	0.12
	7.25	7.16	7.29	94	86	252	250	0.81	0.72	1.47	1.38	11.00	1.80	0.33
	7.12	7.15	7.64	100	166	264	150	0.84	0.84	1.61	0.15	10.00	1.90	0.21
	7.30	6.93	7.75	104	160	256	170	0.59	0.58	1.30	1.33	12.00	2.10	0.17
	7.23	7.53	7.71	102	176	240	122	1.02	0.93	1.46	1.54	9.00	1.60	0.17
	7.31	7.39	7.82	148	183	222	146	1.18	1.03	1.88	1.79	14.00	1.70	0.10
	7.64	7.41	7.79	116	188	215	138	1.19	1.08	1.83	1.76	15.00	1.90	0.13
	7.18	7.35	7.86	90	112	266	230	0.80	0.56	1.40	1.46	13.00	2.50	0.18
	7.28	7.25	7.47	88	88	268	270	0.61	0.54	1.28	1.39	10.00	2.60	0.17
	7.39	7.29	7.49	100	92	310	306	0.52	0.53	1.39	1.36	8.00	2.40	0.21
	7.39	7.37	7.56	98	90	300	306	0.54	0.49	1.65	1.56	6.00	2.80	0.21
	7.38	7.37	7.55	102	92	350	356	0.47	0.30	1.40	1.54	4.00	1.80	0.27
AVERAGE	7.4	7.4	7.6	102	124	275	217	0.66	0.57	1.60	1.55	13.35	1.88	0.31

KENTUCKY DIVISION OF WATER - DRINKING WATER BRANCH  
 WATER TREATMENT PLANT - MONTHLY OPERATING REPORT

PWSID: KY0770586  
 PLANT ID: A

REPORT MONTH/YEAR: 10/2008

\*Please answer Y/N question below this chart.

PAGE 5 OF 11

DAY	FLUORIDE		IRON		MANGANESE				Lowest Daily Chlorine Residual Plant Tap On-Line Chlorine Analyzer	RAINFALL	WATER TEMP.
	RAW	TAP	RAW	TAP	RAW	TAP	RAW	TAP	FREE	INCHES	DEGREES C°
		0.88							1.42		18.4
		1.06							1.68		17.2
		0.92							1.37		16.4
		0.99							1.34		17.0
		1.08							1.48		16.8
		1.64							1.33		16.3
		0.81							1.11		15.9
		1.54							1.11	0.1	17.5
		1.55							1.49		17.2
		1.64							1.35		17.4
		1.31							1.56		17.1
		1.28							1.98		16.9
		1.32							1.72		17.2
		1.50							1.78		17.3
		1.37							1.16		17.5
		0.88							1.50		17.5
		0.97							1.13		17.2
		0.97							1.51		17.0
		1.01							1.90		16.5
		1.38							1.55		15.6
		0.76							1.38		13.5
		1.26							1.54		14.6
		1.24							1.33		14.2
		1.28							1.32	0.7	14.9
		1.15							1.32		14.4
		1.09							1.65		14.2
		0.85							1.45		14.6
		0.64							1.39		11.0
		0.87							1.36		9.8
		0.86							1.51		9.1
		0.78							1.37		8.8
AVERAGE	#DIV/0!	1.13	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	Monthly Minimum	Total Rainfall	15.5
									1.11		
									Number of readings	31	
									For Free Chlorine, # less than 0.2 mg/L	0	
									For Chloramines, # less than 0.5 mg/L		

Disinfectant Chloramines? (Y/N)

N

Number of readings	31
For Free Chlorine, # less than 0.2 mg/L	0
For Chloramines, # less than 0.5 mg/L	

KENTUCKY DIVISION OF WATER - DRINKING WATER BRANCH  
 WATER TREATMENT PLANT - MONTHLY OPERATING REPORT



PWS ID : KY0770566

PLANT ID: A

REPORT MONTH/YEAR: 10/2008

PAGE 6

OF 11

DAY	TOTAL WASH WATER GALLONS	No: <u>1</u>		No: <u>2</u>		No: _____		No: _____		No: _____	
		AREA (square feet)	226	AREA (square feet)	226	AREA (square feet)	FILT RUN	AREA (square feet)	FILT RUN	AREA (square feet)	FILT RUN
		WASHWATER GALLONS	FILT RUN HRS	WASHWATER GALLONS	FILT RUN HRS	WASHWATER GALLONS	HRS	WASHWATER GALLONS	HRS	WASHWATER GALLONS	FILT RUN HRS
1			17.00		17.00						
2			13.00		13.00						
3			14.30		14.30						
4			14.30		14.30						
5	40,000	20,000	13.30	20,000	13.30						
6			16.30		16.30						
7			11.45		11.45						
8	45,000	23,000	19.15	22,000	19.15						
9			17.30		17.30						
10			19.45		19.45						
11			16.30		16.30						
12	56,000	28,000	20.00	28,000	20.00						
13			16.30		16.30						
14			15.45		15.45						
15			10.30		10.30						
16			11.30		11.30						
17	45,000	23,000	15.30	22,000	15.30						
18			12.30		12.30						
19	44,000	22,000	12.15	22,000	12.15						
20			11.00		11.00						
21			23.00		23.00						
22			17.15		17.15						
23			20.45		20.45						
24			20.00		20.00						
25			21.00		21.00						
26			14.30		14.30						
27	42,000	21,000	16.15	21,000	16.15						
28			14.15		14.15						
29	34,000	17,000	15.30	17,000	15.30						
30			20.00		20.00						
31			15.15		15.15						
TOTAL	306,000	154,000	492.60	152,000	492.60	0	0.00	0	0.00	0	0.00
AVERAGE	43,714	22,000	15.890	21,714	15.890	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!

COPY AS NEEDED

KENTUCKY DIVISION OF WATER - DRINKING WATER BRANCH  
 WATER TREATMENT PLANT - MONTHLY OPERATING REPORT

PWS ID : KY0770566  
 PLANT ID : A

REPORT MONTH/YEAR: 10/2008

PAGE 7 OF 11

DAY	CHEMICALS ADDED		TEST RESULTS								
	CHLORINE BOOSTER LBS	CHLORINE BOOSTER LBS	TOTAL (T) AND FREE (F) CHLORINE RESIDUAL (ppm)								
			NORTH		SOUTH		EAST		WEST		
	T	F	T	F	T	F	T	F			
						0.65		0.71			
			0.45			1.01		1.15		0.58	
			0.88			0.90		0.64		0.74	
			0.50			0.22		0.27		0.46	
			0.28			0.11		0.19		0.34	
			0.30			0.41		0.50		0.42	
			0.35			0.53		0.55		0.48	
			1.05			0.40		0.43		1.03	
			0.12			0.16		0.12		0.15	
			0.40			1.09		0.77		0.68	
			0.54			0.68		0.76		0.63	
			0.22			0.57		0.61		0.19	
			1.48			1.09		0.65		1.01	
			0.42			0.30		0.27		0.38	
			0.48			0.75		1.05		0.78	
					0.12			0.20			
			0.33							0.42	
AVERAGE	#DIV/0!	#DIV/0!	Average	#DIV/0!	0.52	0.12	0.59	#DIV/0!	0.55	#DIV/0!	0.55
TOTAL	0.0	0.0	Total Minimum Free Minimum		0.12		0.11		0.12		0.15
			Total # Chlorine Samples	0	15	1	15	0	18	0	15
			# Less than 0.2 mg/L/0.5 mg/L	0	1	1	2	0	2	0	2

Number of Free Residuals	61
Number of Total Residuals	1
Total # Less than 0.2 mg/L	7
Total # Less than 0.5 mg/L	

Minimum Monthly Free Residual	0.11
Minimum Monthly Total Residual	0.12

Disinfectant Chloramines? (Y/N)  Y  
 Number of days of operation? 31

KENTUCKY DIVISION OF WATER - DRINKING WATER BRANCH  
 WATER TREATMENT PLANT - MONTHLY OPERATING REPORT

**TURBIDITY REPORT**

PWS ID : KY0770566  
 PLANT ID: A  
 Report Period (MM/YYYY): 10/2008

PWS Name: Salyersville Water Works

DAY									
	17.0	5	0.13	0.13	0.13	0.13	0.13	0.12	0.130
	13.0	4	0.12	0.12	0.12	0.12	0.11	0.12	0.120
	14.3	4	0.12	0.12	0.12	0.12	0.11	0.11	0.120
	14.3	4	0.10	0.10	0.10	0.16	0.16	0.17	0.170
	13.3	4	0.17	0.17	0.11	0.13		0.18	0.180
	16.3	5	0.22	0.22	0.24	0.53			0.530
	11.5	3							0.000
	19.2	5		3.90	3.40	1.04	2.78	1.10	3.900
	17.3	5	0.90	0.70	3.17	2.62	0.33	0.51	3.170
	19.5	5	0.55	1.09			1.20	0.60	1.200
	16.3	5	0.75	1.22	1.09		0.99	0.49	1.220
	20.0	5	0.56	1.54	3.29	0.24	0.20	0.40	3.290
	16.3	5	0.10	0.10	0.10	0.13			0.130
	15.5	4	0.89	0.15	0.24	0.14	0.30	0.32	0.890
	10.3	3	0.34	0.34	0.33	0.25	0.16	0.52	0.521
	11.3	3	0.23		0.09	0.11	0.08	0.10	0.231
	15.3	4	0.11		0.17	0.24	0.16	0.52	0.521
	12.3	4	0.83	0.92	0.10	0.10	0.11	0.13	0.920
	12.2	4	0.37	0.34	1.93	0.09	0.10	0.60	1.930
	10.5	3	0.12		0.13	0.12	0.11	0.10	0.125
	23.2	6	0.09		0.22	0.33	0.12	0.38	0.382
	17.1	5	0.53	0.21	0.20	0.17	0.18	0.21	0.528
	20.5	6	0.13	0.17	0.17	0.11	0.28	0.19	0.276
	19.7	5	0.11	0.11	0.17	0.14	0.16	0.26	0.259
	20.6	6	0.16	0.32	0.13	0.09	0.22	0.18	0.322
	14.3	4	0.13	0.18	0.13	0.10	0.14	0.15	0.178
	16.2	5	0.16	0.23	0.10	0.18	0.16	0.10	0.231
	14.2	4	0.08	0.16	0.17	0.24	0.17	0.22	0.240
	15.3	4	0.26	0.12	0.21	0.20	0.19	0.22	0.261
	20.0	5	0.10	0.21	0.30	0.21	0.15	0.35	0.352
	15.2	4	0.23		0.27	0.18	0.84	0.45	0.837
Total	491.6	138						166	3.900

TOTAL # OF TURBIDITY SAMPLES TAKEN -

ARE YOU USING EITHER CONVENTIONAL or DIRECT FILTRATION? (Y/N) Y  
 (Any type of filtration besides slow sand)

Number of samples exceeding → 0.1 NTU 150 0.3 NTU 46 1 NTU 14  
 For slow sand filtration, the number of samples exceeding → 1 NTU \_\_\_\_\_ 5 NTU \_\_\_\_\_

\*NOTE: The "Number of Turbidity Samples Required" is the number of hours the plant operated divided by 4 rounded up to the next whole number.

I certify that the above turbidity readings were taken every 4 hours during plant operation and in the time frames noted above.

[Signature]  
 Signature of Principal Executive Officer or Authorized Agent

11-3-08  
 Date

**KENTUCKY DIVISION OF WATER / DRINKING WATER BRANCH  
MONTHLY OPERATING REPORT (MOR) PLANT SUMMARY FORM**

PWS ID KY0770566

MONITORING PERIOD (MMYYYY) 10/2008

**NOTE: COMPLETE ALL APPLICABLE FIELDS!!! NOT ALL OF THE FIELDS ARE PRE-POPULATED FOR YOU!!!**

APPLICABLE TO ALL PLANTS			
PLANT ID <u>A</u>	TOTAL WATER TREATED (gallons)	<u>21,564,167</u>	
PLANT NAME <u>Salyersville Water Works</u>	AVE. DAILY PRODUCTION (gallons)	<u>695,618</u>	
AGENCY INTEREST <u>2889</u>	MAXIMUM PUMPAGE (gallons per day)	<u>1,032,869</u>	

APPLICABLE TO ALL PLANTS WITH FILTRATION	
ANALYTE CODE <u>0100</u>	
Was each filter monitored continuously? (Y/N)	_____
Were measurements recorded every 15 minutes? (Y/N)	_____
Was there a failure of the continuous monitoring equipment? (Y/N)	_____
If Yes, (1) were individual filter effluent turbidity grab samples collected every four hours of operation? (Y/N)	_____
(2) was the continuously monitoring equipment repaired within 5 working days? (Y/N)	_____
Was individual filter level greater than 1.0 NTU in two consecutive measurements? (Y/N)	_____
Was individual filter level greater than 0.5 NTU in two consecutive measurements after on line for more than four hours? (Y/N)	_____
Was individual filter level greater than 1.0 NTU in two consecutive measurements in three consecutive months? (Y/N)	_____
Was individual filter level greater than 2.0 NTU in two consecutive measurements in two consecutive months? (Y/N)	_____
<b>If any of the last 4 boxes are YES, fill out the Individual Filter Turbidity Sheet and submit with the MOR</b>	

APPLICABLE TO ALL PLANTS WITH FILTRATION	
ANALYTE CODE <u>0100</u>	
Number of hours of plant operation	<u>491.6</u>
Were samples taken every 4 hours of plant operation? (Y/N)	<input checked="" type="checkbox"/>
Number of samples taken	<u>166</u>
Highest single turbidity reading	<u>3.90</u>
For all filtration except slow sand filtration:	
Number of samples exceeded 0.1 NTU	<u>150</u>
Number of samples exceeded 0.3 NTU	<u>46</u>
Number of samples exceeded 1 NTU	<u>14</u>
When filtration is slow sand filtration:	
Number of samples exceeded 1 NTU	_____
Number of samples exceeded 5 NTU	_____

APPLICABLE TO ALL PLANTS	
ANALYTE CODE <u>0999</u>	
Number of days of plant operation	<u>31</u>
Were samples taken each day of operation? (Y/N)	<input checked="" type="checkbox"/>
Number of lowest chlorine samples recorded	<u>31</u>
Lowest single chlorine reading	<u>1.11</u>
If less than required:	
Was residual restored within 4 hours of plant operation? (Y/N)	<input type="checkbox"/>
Free Chlorine (for all disinfectants except chloramine):	
Number of samples under 0.2 mg/L	<u>0</u>
Total Chlorine (when disinfectant is Chloramine):	
Number of samples under 0.5 mg/L	_____

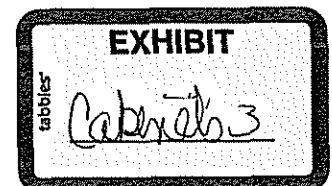
APPLICABLE TO PLANTS UTILIZING CHLORINE DIOXIDE	
ANALYTE CODE <u>1008</u>	
Number of days of plant operation	<u>31</u>
Were samples taken each day of operation? (Y/N)	<input type="checkbox"/>
Number of samples taken	<u>0</u>
Highest single chlorine dioxide reading	<u>0.00</u>
Number of chlorine dioxide samples exceeded 0.8 mg/L	<u>0</u>

APPLICABLE TO PLANTS UTILIZING CHLORINE DIOXIDE	
ANALYTE CODE <u>1009</u>	
Number of days of plant operation	<u>31</u>
Were samples taken each day of operation? (Y/N)	<input type="checkbox"/>
Number of samples taken	<u>0</u>
Highest single chlorite reading	<u>0.00</u>
Number of chlorite samples exceeded 1 mg/L	<u>0</u>

I certify under penalty of law that I have personally examined and am familiar with the information submitted herein. Based on my inquiry of those individuals immediately responsible for obtaining the information, the submitted information is true, accurate.

[Signature]  
Signature of Principal Executive Officer or Authorized Agent

11/3/08  
Date







AI 2889

**Salyersville Water Works**

401 College St.  
Salyersville, Ky. 41465  
Ph: 606-349-3743  
Fax: 606-349-3752

PRINTED ON

2007 AUG 31 PM 1:20

DRINKING WATER

PWSID-0770566

To: Kentucky Division of Water  
Drinking Water Branch  
14 Reilly Rd.  
Frankfort, Ky. 40601

Re: 2007 Sanitary Survey  
August 29, 2007

Attn: Leslie Harp

In response to the non-significant deficiencies noted in the 2007 Sanitary Survey,

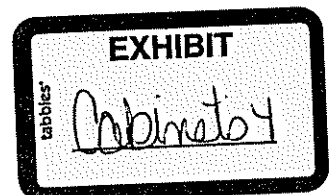
- 1- Our facility does not have enough storage space for a 30-day supply of chemicals. However we do have an agreement with our supplier for a 24-48 hour delivery time when needed.
- 2- In case of a leak or spill, our chemical storage room has a floor drain which connects to the sanitary sewer. Personnel in our sewage dept. are aware of this and have assured us that a release would not cause any significant problems.

If we need to take additional measures or if you have any questions, please call

Martin Vanderpool  
Ph: 606-349-3743

Thank you,

*Martin Vanderpool*



ENVIRONMENTAL AND PUBLIC PROTECTION CABINET  
 KENTUCKY DEPARTMENT FOR ENVIRONMENTAL PROTECTION  
 DIVISION OF WATER

**Drinking Water Sanitary Survey**

PWS ID: KY0770566	Division: Water	Regional Office: Frankfort
Agency Interest Number 2889		
Site Name: Salyersville Water Works	Program: Drinking Water	
Site Address: 401 Collage St.		
City: Salyersville	State: KY	Zip: 41465
		County: Magoffin
Inspection Type: Sanitary Survey	Purpose:	Not/Com #:
Inspection Dates: 5/07/2007	Time: Start 9 AM End 3 AM	
Latitude:	Longitude:	
Coordinate Collection Method:		

**Drinking Water Data**

**Revision Code: #033006**

(To be changed by Central Office Staff only)

**SANITARY SURVEY CODE:** 83

**INSPECTOR EMPLOYEE CODE:**

**PWSID:** KY0770566 **Plant Name:** Salyersville **Plant Contact:** Martin Vanderpool **Plant Type:** C (community) **Plant Class:** III (500,000-3,000,000 gpd)  
**Distribution Class:** IID-Pop. 1500-15,000 **County:** Magoffin **Phone Number:** 606-349-3743 **Fax Number:** 606-349-3752 **E-Mail Address:** waterworks@foothills.net  
**System Service Connections:** 983 **System Population Served:** 3244  
**Total No. Purchasers:** 1 **Total Population Served:** 12000

**Treatment**

**Primary Source:** Licking River **Secondary Source:** 2 wells **Maximum Pumping Rate:** 720 gpm  
**Plant Capacity MGD:** 1 **Filter Design Rate:** 3MGD **Total Distribution Storage Capacity (gallons):** 1 Million

**Pre-sedimentation Size:** NA **Aeration Code:**

**Sedimentation (Primary) Code:** T-Conventional/Tubes/Plates **Sedimentation 2 (if 2 different processes) Type:**

**Filter (Primary) Code:** M-High Rate/Mixed (sand/garnite/anthracite) **Filter 2 (if 2 different filter types) Type:**

**Clear well Size (gallons):** 200,000

**Chemicals**

**Pre-Disinfection/Treatment Code:** G-Chlorine Gas **Post-Disinfection Code:** G-Chlorine Gas  
**Primary Coagulant Code:** E-Polyaluminum chlorides/sulfates **Secondary Coagulant (Name):**  
**Filter Aid Name:**

**Corrosion Control Code:** L-pH adjustment/**Lime Taste and Odor Code:** **Softening Code:**  
**Iron (and Manganese) Removal Code:** **Fluoride Supplement Code:** S-Sodium Silicofluoride  
**Other Code:** **Other Name:**

**Legend – NA – Not Applicable NI – Not Inspected**

**I. Administrative Requirements**

**Comments:**  
**Compliance Status -** No violations observed

**II. Operator Certification/Accreditation Requirements**

(Check with Certification Section or in TEMPO)

Plant Class	Plant Capacity (MGD)	Hours operated per day (annual average)	Shifts Operated (per day)	Operator Class Required Plant Distribution
III	1	18-20	3	III IID

Does the plant have operators with the appropriate class certificate? Yes  No   
 Are the certifications up-to-date? Yes  No   
 Does the system appear well operated and maintained? Yes  No

List Operators and certification numbers:

Operator Name	Plant Certification #	Distribution Certification #
Martin Vanderpool	4A 202	
Christopher S Rowe	3A 1413	
Nora Bauer	3A 51050	
Adam Hunley		2D 2254

**Comments:** All operator certifications are on file and available for inspection.  
**Compliance Status -** No violations observed

**III. Record Keeping Requirements**

Records to be kept on site	Time it must be kept	Check Yes or No
Data Summaries (if actual data not retained)	Based on data replaced	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
Bacteriological Analyses	5 years	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Chemical Analyses	10 years	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Lead and Copper Data	12 years	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Turbidity Analyses	1 year	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Individual Filter Turbidity Data	3 years	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Records of Violation Certification (required after May 1, 2002)	10 years	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Records of Sanitary Surveys	10 years	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Records of Variances and Exemptions	5 years	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
Distribution Maps	Updated 2006	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
O & M Manual	Updated 2006	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
Sampling Plans and Maps	Updated in progress	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
Consumer Confidence Report and Certification (CWS only)	On File	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A <input type="checkbox"/>
C-T Profiling Data		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
LT2 Cryptosporidium and E.coli Results	3 years after bin classification (see rule for applicable date—first one is April 2009)	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
LT2 Source Water Monitoring Avoidance	3 years	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
LT2 Toolbox Treatment Monitoring Results	3 years	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
Stage 2 IDSE Sampling Plan or 40/30 Certification	10 years	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>
Stage 2 IDSE Report	10 years	Yes <input type="checkbox"/> No <input type="checkbox"/> N/A <input checked="" type="checkbox"/>

**Comments:**

**Compliance Status** - No violations observed

**IV. Reporting Requirements**

(To be completed by Compliance Officer)

Reporting Item	Normal Reporting (list last reporting period and note any exceptions)	Emergency Reporting (List any reports to the public)
Asbestos	<input checked="" type="checkbox"/> 1 sample in the 1 <sup>st</sup> 3 years of the 9 year compliance cycle	<input type="checkbox"/>
Bacteriological	<input checked="" type="checkbox"/> per month	<input type="checkbox"/>
Consumer Confidence Report (CCR)	<input checked="" type="checkbox"/> Annually by July 1 (by April 1 to consecutive systems)	<input type="checkbox"/>
Dioxin	<input checked="" type="checkbox"/> With SOCs	<input type="checkbox"/>
Fluoride (supplemental)	<input checked="" type="checkbox"/> 2 per month; 1 plant tap and 1 distribution (6-2005)	<input type="checkbox"/>
Inorganic Chemicals (IOCs)	<input checked="" type="checkbox"/> Annually	<input type="checkbox"/>
Lead & Copper	<input checked="" type="checkbox"/> every 3 years (June to September)	<input type="checkbox"/>
Nitrate	<input checked="" type="checkbox"/> Annually	<input type="checkbox"/>
Nitrite	<input type="checkbox"/> 1 sample annually in the 1st 3 years of the 9 year compliance cycle	<input type="checkbox"/>
Operational Reports (MORs)	<input checked="" type="checkbox"/> Monthly	<input type="checkbox"/>
Radionuclides (RADs)	<input checked="" type="checkbox"/> 2007 1 sample/quarter	<input type="checkbox"/>
Secondary Contaminants (SECs)	<input checked="" type="checkbox"/> Annually	<input type="checkbox"/>
Corrosivity	<input checked="" type="checkbox"/> Annually; can be done with secondaries	<input type="checkbox"/>
Sodium	<input checked="" type="checkbox"/> 2 per year in wet and dry seasons; 1 can be done with secondaries [10-2006]	<input type="checkbox"/>
Synthetic Organic Compounds (SOCs)	<input checked="" type="checkbox"/> >3300 2 quarterly samples in 12 consecutive months in 3 year period [9-2006]	<input type="checkbox"/>
Total Trihalomethanes (TTHMs)	<input checked="" type="checkbox"/> per quarter [2007 1/quarter	<input type="checkbox"/>
Turbidity (Greater than 1 or 5 NTUs report ASAP)	<input checked="" type="checkbox"/> 0.1 and 1 NTU	<input type="checkbox"/>
Unregulated Contaminants (UCMR)	<input checked="" type="checkbox"/> Per EPA [Sampling in 2007]	<input type="checkbox"/>
Volatile Organic Chemicals (VOCs)	<input checked="" type="checkbox"/> Annually [11-2006]	<input type="checkbox"/>
Haloacetic Acids	<input checked="" type="checkbox"/> per quarter	<input checked="" type="checkbox"/> Violation in 2006. Notice mailed to customers
Chlorite (Chlorine Dioxide Only)	<input type="checkbox"/>	<input type="checkbox"/>
Bromate (Ozone only)	<input type="checkbox"/>	<input type="checkbox"/>

Chlorine/Chloramines	<input checked="" type="checkbox"/> Free chlorine monthly with compliance bacts; daily for MOR	<input type="checkbox"/>
Chlorine Dioxide	<input type="checkbox"/>	<input type="checkbox"/>
Total Organic Carbon	<input checked="" type="checkbox"/> Raw TOC/Alkalinity and CFE TOC	<input type="checkbox"/>
Emergency Reports (Immediate Notification)	<input checked="" type="checkbox"/> Line Breaks, <input type="checkbox"/> Loss of Pressure, <input type="checkbox"/> Loss of Disinfection	<input type="checkbox"/> Radio, Fax, TV, and health dept.
Sample Site Plan	<input checked="" type="checkbox"/> Bacts/LCR/DBPs	<input type="checkbox"/>

**Comments:**

**Compliance Status** - No violations observed

**V. Operation & Maintenance/Performance Requirements**

**MANAGEMENT AND SYSTEM OPERATION**

**Organization:**

What is the utility's governing body? Water Board  
 What is the term of office for board or council members? 3  
 Are the members familiar with water treatment? Yes  No   
 How often does this body meet? Monthly  
 Do operators attend? Yes  No   
 Is there an organization chart? (Provide) Yes  No   
 Does the chart include the WTP? If not provide additional chart. Yes  No   
 Have there been any changes since the last Sanitary Survey? Yes  No   
 If yes, explain  
 Is the system subject to Public Service Commission regulations? Yes  No   
 What professional organizations does the water system belong to? KRWA & KWWOA

**Communications:**

Does the system have a Mission Statement? (Provide) Yes  No   
 Does the system have water quality goals? (Provide) Yes  No   
 What parameters are included in these goals? Safety  
 Are the operators aware of these goals? Yes  No   
 Is the system aware of the Area-wide Optimization Program, coordinated through the DOW's Drinking Water Branch? Yes  No   
 Does the system have regular staff meetings? Yes  No   
 How often? Daily  
 Who is involved? Treatment and Distribution workers  
 Do the administrators (including the managing body) visit the water plant? Yes  No   
 How often? Monthly  
 Does the plant provide reports to the superintendent? Yes  No

Types Everything  
 Frequency Daily  
 Does the superintendent provide reports to administrators? Yes  No   
 Types Financial and Production  
 Frequency Monthly  
 Is there an Operations and Maintenance manual(s) for both the water plant and distribution system? Yes  No   
 Is the Operations and Maintenance Manual updated annually? Yes  No   
 If not, how often is it up-dated? As needed  
 Who up-dates the manual? Manager  
 How are operators made aware of the O&M procedures? Verbally  
 Are copies maintained in a location other than the water plant for security reasons? Yes  No   
 Does the system provide any public relations or education activities? Yes  No   
 Who is responsible for providing this? Superintendent  
 What types of public relations or education are done? Schools education and a once a year project at the park  
 Who answers customer inquiries? Secretaries  
 Is a customer inquiry log maintained? Yes  No

**Planning:**

Does the system have any short-term needs? Yes  No   
 Are they documented? Yes  No   
 How are they developed? By their need  
 Who provides input into these needs? Operators and Engineers  
 Are the operators involved? Yes  No   
 Does the system have any long-term needs? Yes  No   
 Are they documented? Yes  No   
 How are they developed? By their need  
 Who provides input into these needs? Operators and Engineers  
 Are the operators involved? Yes  No   
 How are chemicals inventoried? By sight and residual levels  
 How are distribution materials inventoried? Organizational shelving and by sight  
 Is there a bid process for chemicals, pipe or other large item purchases? Yes  No   
 Does the system attend Area Development District Meetings? Yes  No

**Security Issues:**

In general, what security measures are in place at the water plant? Fence, locks, alarms, cameras  
 In general, what security measures are in place in the distribution system? Locks and fences  
 In general, what security measures are in place for data systems (SCADA, billing, Internet)? Power backup, passwords, data backup, virus software  
 Has the system developed procedures for protecting sensitive documents? Yes  No   
 Has the system developed procedures for securing computer/SCADA usage? Yes  No   
 Does the plant ever disable the SCADA system and run on manual? Yes  No   
 Has the system performed, or had performed, a Vulnerability Assessment? Yes  No

Has the system updated its Emergency Response Plan? Yes  No   
 How is the ERP communicated to all employees? Trainings  
 Is the ERP exercised? Yes  No   
 Is the utility a member of the Local Emergency Planning Council? Yes  No   
 How has communication been established with important external suppliers (electric company, chemical suppliers, etc)? Phone  
 Has the system developed procedures for protecting backup equipment? Yes  No

**Personnel:** Note: Detailed Operator Certification Information in a Separate Section  
**Certified Operators** Number 4

Is the number of operators adequate to cover needed shifts, vacations, and vacancies? Yes  No   
 What is the attitude of the staff? Administration Good  
 Operators Good  
 Are the operators cross-trained (by shift, by plant, with distribution, with maintenance, etc)? Yes  No   
 Do the operators perform maintenance as well as operations? Yes  No   
 Is someone cross-trained with the plant lead operator/supervisor? Yes  No   
 Do you have contingency plans for replacing retiring system personnel?  
 Yes  No

How do the operators obtain the necessary Continuing Education Hours for license renewal? CE classes  
 Who are the training/technical assistance providers? DOW, KRWA, KWVOA  
 What type of training is typically obtained? CE  
 Does the system pay for registration, lodging and meals? Yes  No   
 Does the system allow operators to attend training on company time? Yes  No

**Plant Coverage:**

Is there shift operation at the plant? Yes  No   
 Length of shift 8  
 Number of operators per shift 1  
 Number of shifts/day 3  
 How are weekends and holidays covered? alternate  
 Does this system have unmanned operations? Yes  No   
 Do the operators ever leave the water plant property while the plant is producing water?  
 Yes  No   
 How long are the operators typically away from the plant?  
 What duties are the operators performing when they are away from the plant?  
 Are there safeguards for when operators may be doing work outside on the plant grounds?  
 Yes  No   
 What types of safeguards? alarms

**Financial:**

Does the system have a budget? Provide 1-page summary if available. Yes  No   
 Is the water plant meeting its expenses? Yes  No   
 Does the water plant revenue go to meet other city/district/association expenses (such as sewer or garbage)? Yes  No   
 Who prepares the budget? Superintendent and board



- Does the system have an external audit process? Yes  No
- Are training and license funds built into the budget? Yes  No
- Do the operators have any input into the budget? Yes  No
- Are general accounting procedures followed? Yes  No
- Is there a policy for delinquent accounts? Yes  No
- Is there a rate structure in place? Yes  No
- When was the last rate increase? 2006
- Are long-term needs built into rate increases? Yes  No
- Do rates promote conservation in time of drought? Yes  No
- Does the system have any long-term debts? Yes  No
- Is the debt being paid on time? Yes  No
- Does the system have a reserve account? Yes  No
- Does the system have a good credit rating (for obtaining bonds, etc)? Yes  No
- Where does the system typically go for financial assistance? FHA
- Does the system have a capital improvement plan? Yes  No
- How many years does the plan cover? 5 - 10 years
- What is the day-to-day spending authority of the plant superintendent? \$1000
- What is the emergency spending authority of the plant superintendent?
- Is there a purchase order process? Yes  No

**General Observations: The plant, plant operations, files, storage supplies and grounds appeared to be in sufficient condition.**



- Source water type/location
- Major unit processes (including baffling factors and volumes)
- Flow measurement locations
- Chemical injection locations
- Piping Flexibility (including number of raw and finished water mains)
- Waste handling

### Source

Name	Water Withdrawal Number	Permitted Amount	Is Capacity Adequate?	Are there Water Quality issues?
Licking River	0196	.750	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

List upstream land uses: residential, farming, oil production, mining

List upstream discharges (Within 5 miles):

Is there a source water protection plan in place? Yes  No

Are there any sources of Cryptosporidium in the watershed? Yes  No

Describe the sources: pasture, wildlife, sewage discharges from homes.

Is the system drought-vulnerable? Yes  No

Describe any water quality monitoring done on the source water:

If multiple sources are available, is the one in use the "best" in terms of both water quality and quantity? Yes  No

Observations: There are two wells that are used as emergency backup.

### Intake Structure

Location	Type	Number of Inlets	Screen Size	Is Flooding a problem?	Is silt build-up a problem?
Licking River	submersible pumps	2	1/4"	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>
				Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>

Is raw water pumped?  Or gravity fed?

Number of raw water mains 1

Is raw water flow measured? Yes  No

If so when was the meter last calibrated? 2002

List any chemicals fed at the source:

If source is a reservoir is it aerated? Yes  No

List depths of intake levels (normal pool): 5'

Are screens stationary?  Or mechanical?

Is screen clogging a problem? Yes  No

Are Zebra mussels a problem? Yes  No

If yes list actions taken:

How often are the submerged portions of the intake inspected? as needed usually after any flood event

When was the date of the last inspection?

Observations:

**Electrical/Emergency Power Not Applicable**

Are emergency power generators available at the intake? Yes  No

Are emergency power generators available at the water plant? Yes  No

If available, can they support the entire plant? Yes  No

If the entire plant cannot be supported, are necessary systems provided power?  
Yes  No

Are emergency power generators available in the distribution system? Yes  No

Are emergency power generators available for main office functions? Yes  No

Are standby emergency generators exercised regularly? Yes  No

Is other standby equipment exercised regularly? Yes  No

Is there the ability to utilize natural gas, propane or other sources of fuel for power?

Yes  No

Have arrangements been made with outside contractors, other utilities, etc to provide needed emergency equipment? Yes  No

If equipment is shared with the wastewater plant, how is the equipment disinfected prior to use at the water plant?

Observations:

**Emergency Interconnections/Supplies Not Applicable**

Are emergency interconnections with other water supplies available? Yes  No

If yes list supplies and PWSID numbers:

If the system has an inactive water plant, is the plant exercised to maintain preparedness for emergencies? Yes  No

How often?

How is the plant disinfected prior to bringing it back on line?

Observations: There is a interconnection with Paintsville but it has been rendered unusable.

**General Plant Description: Conventional**

**Pre-sedimentation Not Applicable**

Capacity (gallons)	Flexibility to Bypass	Chemical Feed Capability	List Chemicals Fed
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	
	Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>	

Are treatment chemicals fed at the inlet to the pre-sedimentation basin? Yes  No

If so, is the chemical fed all the time Yes  or intermittently? Yes   
 Is algae growth a problem? Yes  No   
 How often is the pre-sedimentation basin(s) cleaned?  
 Observations:

**Aeration Not Applicable**

Type	Capacity (gallons)	Reason for Aeration

Observations:

**Rapid Mix Inspected**

Type	Number	Volume (gallons)	Physical Condition
Mechanical Mixer	1	403	Good

List chemicals fed in order they are fed at the rapid mix: chlorine.lime,fluoride,delpac, carbon if needed

Is adequate mixing of chemicals taking place? Yes  No   
 Are there flow splits after the quick mix? Yes  No   
 If so is the flow distribution even? Yes  No

Observations:

**Flocculation Basins Inspected**

Type	# Trains	Stages	Variable Speed Drive	Volume (gallons)	Physical Condition
Vertical Paddle	1	Multipl	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	32,335	Good
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		
			Yes <input type="checkbox"/> No <input type="checkbox"/>		

List any chemicals fed in the flocculation process:  
 What is the size OK and appearance of the floc? OK  
 How often are flocculation basins cleaned? twice annually  
 Are the flocculation speeds tapered (decreased) through the flocculation stages?  
 Yes  No   
 Are there flow splits after flocculation? Yes  No   
 Is flow distribution even? Yes  No

Observations:

**Sedimentation Basins Inspected**

Type	Number of Trains/ Stages	Volume (gallons)	% with tube settlers	Physical Condition
Conven. w/ tubes	2 2	54,191	35	Good

List any chemicals fed in the sedimentation process:

What is the sedimentation turbidity goal? <1

What is the overflow rate of the basins?

If an Actiflo process, what is the rise rate?

How often are the basins cleaned? semi annually

How often is sludge removed from the basins? 2Xweek

Is sludge removal mechanical?  Or manual?

What is the sludge depth at the time of the inspection? 2'

What is the settled water turbidity at the time of the inspection? 1.65

Is there evidence of short-circuiting (Flow or density currents)? Yes  No

Is baffling present in the basins? Yes  No

If yes, describe the baffling settling tubes

If multiple sedimentation basins, describe the piping from the basins to the filters: flow enters common duct which splits again for filters

Is there evidence of floc carryover to the filters? Yes  No

Observations:

**Filters**

Number of Filters 2

Type	Media Type	Filter Rate (at inspection)*	Filter control	Surface Wash Type	Filter to Waste	Filter Area	Physical Condition
High Rate	Mixed Media	1.2 gpm sq ft	None	Rotary	Yes <input checked="" type="checkbox"/> no <input type="checkbox"/>	228	good
					Yes <input type="checkbox"/> no <input type="checkbox"/>		
					Yes <input type="checkbox"/> no <input type="checkbox"/>		
					Yes <input type="checkbox"/> no <input type="checkbox"/>		
					Yes <input type="checkbox"/> no <input type="checkbox"/>		
					Yes <input type="checkbox"/> no <input type="checkbox"/>		
					Yes <input type="checkbox"/> no <input type="checkbox"/>		
					Yes <input type="checkbox"/> no <input type="checkbox"/>		
					Yes <input type="checkbox"/> no <input type="checkbox"/>		

\*Plant flow rate divided by total square footage of filters in service at the time of inspection

List any chemicals fed in the filtration process:

What is the filtered water turbidity goal? .05

Does this apply to the combined filter effluent? Yes  No  to individual filter effluents? Yes  No

What Criteria are used for filter backwash? turbidity, loss of head

What is the backwash rate in gallons per minute? 4000

Is filter backwash rate ramped up and down? Yes  No

Is backwash flow rate measured? Yes  No

Are filters ever bumped? Yes  No

Is air scouring used? Yes  No

Record the CFE turbidity at time of inspection 0.12

Are individual filters monitored for turbidity? Yes  No

Is this turbidity continuously recorded? Yes  No

Can this data be retrieved in usable from storage (tape or CDs) Yes  No

Is filter to waste (rewash) present? Yes  No

Is it used? Yes  No

Can turbidity be measured while filtering to waste? Yes  No

Are flows adjusted on remaining in-service filters during a backwash? Yes  No

Observations

**Residuals Handling**

What percent of plant production is used for in-plant processes (backwash, chemical feed, sanitary)? 3

How are spent backwash water and other liquid residuals handled? holding tank, decant discharged to river

If applicable, is the spent backwash holding tank/lagoon volume adequate? Yes  No

Does the plant discharge water from this tank/lagoon back to a body of water?

Yes  No

Does the plant have a KPDES discharge permit? Yes  No





Do the bulk liquid feed systems have day tanks? Yes  No

Are at least two feeders provided for essential processes (such as coagulation, disinfection)?  
Yes  No

Are spare parts available? Yes  No

Is there enough storage for at least 30 days supply of chemicals used? Yes  No

Are there containment areas around the chemicals in case of spills or leaks? Yes  No

Are in-plant water supplies protected from back-flow? (Cross connections): Yes  No

Does a certified tester test backflow prevention devices? Yes  No

What is the testing frequency? Last Tested

Observations:

### Disinfection

Type	Application Point	Redundancy Available	Feeder Type
Chlorine gas	Quick/Flash M	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Chlorinator
Chlorine gas	Clearwell	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Chlorinator
		Yes <input type="checkbox"/> No <input type="checkbox"/>	
		Yes <input type="checkbox"/> No <input type="checkbox"/>	

What is the means used to measure disinfectant chemical usage? Rotometers, scales

How is the disinfectant residual monitored? lab meter

Is there an on-line, recording chlorine analyzer on the plant tap? Yes  No

Are C-Ts calculated daily? Yes  No

Observations:

### Clearwells

Volume (gallons)	Baffling Type	Disinfectant Residual	
		Total	Free
200,000	0.1--None	1.87	1.97

List chemicals in the order in which they are fed into the clearwell: chlorine

If multiple clearwells are they in series (one following the other) Yes  or parallel (side by side and not connected) Yes

Are hatches secured? Yes  No

Are vents screened? Yes  No

How often are clear wells cleaned? never

Observations:

**Water Plant Pumps**

(Low service/raw water, high service/finished water and backwash)

Flow Stream	Location	Number of Pumps	Capacity (gpm)	Pump Type	Flow Control Method
Primary Raw Water	intake at river	2	680	Centrifugal	Manual
Finished Water	pipe gallery	2	800	Vertical Tur	Manual
Backwash water	pipe gallery	1	4000	Vertical Tur	Manual

Observations:

**Water Plant On-line Instrumentation**

Type	Flow Stream (Location)	Manufacturer	Last Calibration Date
Turbidity	Individual Fi	Hach	
	Tap	Hach	5/4/07
	Raw Water	Hach	
pH	Tap	Hach	5/4/07

Observations:

**Laboratory (Plant)**

Parameters Tested	Frequency	Equipment Used	Calibration Method
Turbidity - raw	2 hrs	Hach 2100	standards
finished	4 hrs	Hach 2100	
top of filter	2 hrs	Hach 2100	
Chlorine finished	4 hrs	Hach	
top of filter	4 hrs	Hach	
Ph raw			
finished	4 hrs	Hach	standards
top of filter			
Fluoride	1 day	titration	
Alkalinity	1 day	titration	
Hardness	1 day	titration	

Is space adequate? Yes  No

Is lighting adequate? Yes  No

Are analyses conducted according to Standard Methods? Yes  No

Are daily log sheets used to record day-to-day operations, testing, etc? Yes  No

If so, are they on the computer Yes  or are they hand-written Yes

Observations:

**In-Plant Sampling**

**(for example, top and bottom of filters)**

Site PLANT TAP	Cl. Free: 1.87 Total: 1.97 pH: 7.92 Turbidity: 0.11
Site TOP OF FILTERS	Cl. Free: 0.82 Total: 0.97 pH: 7.73 Turbidity: 1.65
Site COMBINED FILTER	Cl. Free: 0.67 Total: 0.76 pH: 7.74 Turbidity: 0.12
Site	Cl. Free: Total: pH: Turbidity:
Site	Cl. Free: Total: pH: Turbidity:
Site	Cl. Free: Total: pH: Turbidity:
Site	Cl. Free: Total: pH: Turbidity:
Site	Cl. Free: Total: pH: Turbidity:
Site	Cl. Free: Total: pH: Turbidity:

Observations: NO TAPS TO CATCH INDIVIDUAL FILTER EFFLUENTS

**Distribution Storage Facilities** Inspected

Location	Volume (gal)	Tank Type	Overflow		Last Cleaned/ Inspected	Telemetry	% Turnover (Per day)
			Screen/ Flapper	>10' From tank			
RT 7	500,000	Ground	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	50
CHURC H STREET	200,000	Ground	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	30
RT 40	100,000	Ground	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>	66
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
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			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
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			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	
			Yes <input type="checkbox"/> No <input type="checkbox"/>	Yes <input type="checkbox"/> No <input type="checkbox"/>		Yes <input type="checkbox"/> No <input type="checkbox"/>	

**Observations: THE GROUNDS AROUND THE TANKS SHOULD BE BETTER MAINTAINED, MOWED ECT.**

## Distribution Booster Pumps and or Booster Disinfection Facilities

Location	Pump = P Disinfection = D	Number & Capacity of pumps (gpm)	Disinfection Type	Auxiliary Power
RT 40	P <input checked="" type="checkbox"/> D <input type="checkbox"/>	2 @ 120		Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>
	P <input type="checkbox"/> D <input type="checkbox"/>	@		Yes <input type="checkbox"/> No <input type="checkbox"/>

Does a certified distribution operator oversee distribution activities? Yes  No

If there are separate distribution system areas, are they interconnected with each other?  
Yes  No

If they are not interconnected, how many separate areas are there?

What prevents these systems from being interconnected?

How many pressure zones are there? 1

What is the range of distribution pressures? 30-120

Do any distribution areas require reduced pressure valves? YES

What piping materials are included in the distribution system (in general)?

AC, DUCTILE, P.E., CAST IRON, P.V.C.

Is there a formal flushing schedule? Yes  No  Written Procedure? Yes  No

Describe the process for sterilizing new mains/main breaks: CONTRACTORS

RESPONSIBLE FOR NEW MAINS, BREAKS ARE REPAIRED, FLUSHED, BWA ISSUED AND SAMPLES ARE TAKEN BEFORE BWA LIFTED.

Are there maintenance schedules and procedures? Yes  No

What types of on-line instrumentation are located at booster or pump stations and tanks?  
NONE

Is there corrosion protection in the tanks? Yes  No

How often are tanks inspected? Cleaned?

Is there a valve exercise/replacement program? Yes  No

Is water loss tracked? Yes  No

If so what is the percentage of water lost? 5%

Is there a water meter replacement program? Yes  No

Does the utility have distribution maps? Yes  No

Are there main break/emergency notification procedures? Yes  No

Does the system have a cross-connection prevention program? Yes  No

Does a certified tester test the backflow prevention devices on a regular basis?

Yes  No

Has a calibrated hydraulic model been developed for the system? Yes  No

Observations:

**Distribution Sampling**

Site 1	Cl. Free:1.43 Total: 1.67 pH: 7.48 Turbidity: .10 Other:				
Site 2	Cl. Free:1.38 Total: 1.69 pH: 7.33 Turbidity: .12 Other:				
Site 3	Cl. Free:1.55 Total: 1.77 pH: 7.45 Turbidity: .77 Other:				
Site	Cl. Free:	Total:	pH:	Turbidity:	Other:
Site	Cl. Free:	Total:	pH:	Turbidity:	Other:
Site	Cl. Free:	Total:	pH:	Turbidity:	Other:
Site	Cl. Free:	Total:	pH:	Turbidity:	Other:
Site	Cl. Free:	Total:	pH:	Turbidity:	Other:
Site	Cl. Free:	Total:	pH:	Turbidity:	Other:

Observations:1. FALCON, 2. RT 114, 3. OLD STP

**Gas Chlorine Safety:**

Is the chlorine room enclosed and separate from other operating areas? Yes  No

Is there a working exhaust fan in the chlorine room? Yes  No

Does it provide one complete air change per minute? Yes  No

Does it exhaust from floor level? Yes  No

Is intake air near the ceiling? Yes  No

Are switches located outside the chlorine room? Yes  No

Are chlorine tanks secured? Yes  No

Are the scales operational? Yes  No

Is automatic switchover of chlorine cylinders provided? Yes  No

Is there a shatterproof viewing window in chlorine room? Yes  No

Is there a crash bar on the door of the chlorine room? Yes  No

Does it open out and to the exterior of the building? Yes  No

Is there a SCBA unit meeting NIOSH standards out side the chlorine room? Yes  No

Are personnel trained to use the SCBA? Yes  No

Is the "buddy system" practiced when changing or moving chlorine cylinders?

Yes  No

Is leak detection provided? Yes  No

If so is there an external audible and visual alarm? Yes  No

Is there a chlorine tank repair kit? Yes  No

Are personnel trained and certified to use the kits? Yes  No

Is ammonia available for chlorine leak detection? Yes  No

Is a lockout tag-out system used for electrical repairs? Yes  No

Observations:

**Chlorine Dioxide Safety: Not Applicable**

Is sodium chlorite stored in a separate room? Yes  No

Is it stored away from organic material? Yes  No

Many materials will catch fire and burn violently when in contact with chlorite.

Observations:

**Gas (Anhydrous) Ammonia Safety: Not Applicable**

Is the ammonia room enclosed and separate from other operating areas? Yes  No

Is there a working exhaust fan in the ammonia room? Yes  No

Does it provide one complete air change per minute? Yes  No

Does it exhaust from ceiling level? Yes  No

Is intake air near the floor? Yes  No

Are switches located outside the ammonia room? Yes  No

Are ammonia tanks secured? Yes  No

Is there a shatterproof viewing window in ammonia room? Yes  No

Is there a crash bar on the door of the ammonia room? Yes  No

Does it open out and to the exterior of the building? Yes  No

Is there a SCBA unit meeting NIOSH standards outside the ammonia room? Yes  No

Are personnel trained to use the SCBA? Yes  No

Is leak detection provided? Yes  No

If so is there an external audible and visual alarm? Yes  No

How are ammonia leaks detected?

Is a lockout tag-out system used for electrical repairs? Yes  No

Observations:

**Maintenance:**

Is plant housekeeping adequate? Yes  No

Is distribution storage housekeeping adequate? Yes  No

Are adequate supplies of spare parts kept on hand? Yes  No

Are needed tools available? Yes  No

What is the general condition of operating equipment? GOOD

Is there a written preventive maintenance program? Yes  No

If not, is preventive maintenance performed? Yes  No

Observations:

Comments:

Compliance Status - No violations observed

**VI. Discharge/Emission Compliance**

Comments:

Compliance Status - No violations observed

**VII. Monitoring/Analyses Evaluation**

Comments:

Compliance Status - Not Inspected

**VIII. Environmental /Health Impact**

Work Site Hazard Assessment :

ATTACHED

REVIEWED

Comments:

Compliance Status – No violations observed

**IX. Documentation**

- Samples taken by DEP
- Samples taken by outside source
- Instrument readings taken by DEP regional office
- Photographs obtained by DEP
- Copies of records obtained by DEP
- Other documentation

Inspector: Damon D White	Title: Environmental Inspector III	Date: 5/14/07
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Compliance/TAO:

Title:

Date:

<b>Overall Compliance Status</b>
<input type="checkbox"/> No Violations Observed
<input type="checkbox"/> No Violations Observed, but impending violation trends observed – Advisory Action Taken
<input type="checkbox"/> Out of Compliance. Non-recurrent deficiency noted – Verbal notice given or violation corrected at time of insp.
<input type="checkbox"/> Out of Compliance. Non-recurrent administrative or O & M deficiency noted – Warning Notice issued
<input type="checkbox"/> Out of Compliance – NOV issued

Comments:

Delivery Method: E-mail	Cert. Mail #:
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System Contact Mailing Address

Administrative Contact Mailing List



## ENERGY AND ENVIRONMENT CABINET

Steven L. Beshear  
Governor

Department for Environmental Protection  
Division of Water  
200 Fair Oaks Lane, 4<sup>th</sup> Floor  
Frankfort, Kentucky 40601  
Phone: (502) 564-3410  
Fax: (502) 564-2741  
www.water.ky.gov  
December 11, 2008

Leonard K. Peters  
Secretary

R. Bruce Scott  
Commissioner

Mr. Thomas Howard, Superintendent  
Salyersville Municipal Water  
401 College Street  
Salyersville, Kentucky 41465

RE: PWSID# KY0770566  
Water System Inspection

Dear Mr. Howard:

Due to the drought and water-quality related concerns in Salyersville during the late summer and fall of 2008, an inspection was conducted by the Division of Water of the water treatment plant on November 21, 2008. Present were Julie Roney and Robert Back (Compliance and Technical Assistance Branch), Chris Yeary (Watershed Management Branch), Ben Hale (Department for Environmental Protection Commissioner's Office) and Nora Bauer (Salyersville Municipal Water). Attached is a copy of that inspection. It should be noted that not all components of the inspection were completed due to unavailable Salyersville staff or lack of relevance to this inspection.

Salyersville will be receiving the following Safe Drinking Water Act (SDWA) violations:

October 2008:

1. Treatment Technique for exceeding 1 NTU
2. Treatment Technique for exceeding 0.3 NTU in 97% of readings

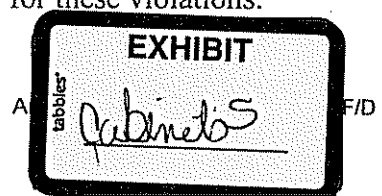
November 2008:

1. Treatment Technique for exceeding 1 NTU
2. Treatment Technique for exceeding 0.3 NTU in 97% of readings
3. No chlorine detected in distribution system in more than 5% of the readings in 2 consecutive months (resulting in a 12-day Boil Water Advisory in November)

4<sup>th</sup> Quarter 2008:

1. Potential THM and/or HAA MCL violations

Salyersville will be responsible for providing timely Public Notification for these violations.



The following are items of concern found during the inspection:

1. There are only 2 certified water treatment operators. One other employee can test in late winter 2009 but is not expected to stay with the system.
2. Operators do not attend pertinent training events.
3. Operators and management need basic water treatment operation and compliance training.
4. No O&M manual was available nor are there SOPs.
5. There is an emergency interconnection available with Paintsville but it is not utilized when needed.
6. The raw water supplies from the Licking River and the Gardner Well field are brought in separately to the water plant. Switching back and forth between 2 supplies of such different water quality makes treatment a challenge.
7. The rapid mix is enclosed and cannot be visually inspected.
8. Fluoride is fed into the rapid mix and not the clearwell. Fluoride can adversely react with alum-based coagulant to bind filters.
9. The roof drains empty into the sedimentation basins.
10. Several of the valves associated with the filter backwash process must be operated by hand (in the basement).
11. Filters are washed based on the amount of water used from the clearwell and not on water quality parameters.
12. The filter boxes are very deep and may prevent inspection/evaluation due to confined space issues.
13. Spent filter backwash tank cannot hold 2 backwashes; the inlet to the basin is on the same side and next to the discharge bell. The supernatant is discharged back to the Licking River below the intake through the raw water line to the plant (therefore the raw water pumps must be off in order to discharge the supernatant and the raw water line run to waste once the discharge is complete and the raw water pumps turned back on).
14. SCADA system is not “operator friendly”—it’s difficult to access historical trends from as little as 24 hours previous. The system is not maintained and was an in-house project.
15. Chemical feeders are not calibrated and chemical feeds are set based on an old document developed by an operator who is no longer with the system.
16. There is no ability to feed permanganate.
17. There is no backflow prevention device on the water supply line to the plant.
18. The chlorine feed system is set up to feed from only 1 cylinder to both the rapid mix and clearwell—this limits the amount of chlorine that can be fed to either point.
19. The buddy system is not practiced when changing chlorine cylinders.
20. The exhaust fan in the chlorine room only comes on when the alarm is activated and not when the door is opened.

21. C-Ts were not being calculated daily—these are needed should there be a request to change disinfection practices.
22. The on-line chlorine analyzer has not been operational for over 2 years; however, as Salyersville has a population of less than 3300, grab monitoring can be substituted for the use of an on-line instrument (this is being done).
23. The drought and need to conserve water has made it difficult to flush the distribution system to remove the discolored water from the mains and tanks. As flow increases and water quality improves in the Licking River, the certified distribution operator will begin flushing the system.

The Division of Water makes the following recommendations:

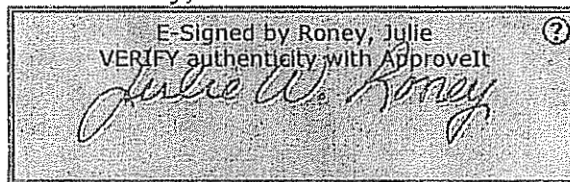
1. Operators and management need basic water treatment, operations, maintenance, regulatory and management training—there is a knowledge deficit of overall water system operation and the application of those concepts to process control and system management.
2. Schedule the uncertified operator for the Class IIIA test as soon as eligible.
3. Evaluate additional plant and distribution staffing needs.
4. Review and revise (if necessary) the water shortage response plan to reduce the potential for future drought-related impacts on the county.
5. Develop a plan for purchasing water from Paintsville in order to exercise the valves and piping associated with that connection.
6. SOPs (especially for filter washing) and the O&M manual need to be developed.
7. Begin calculating daily C-T values.
8. Chemical feed pumps and feeders should be calibrated.
9. Restore the ability of the malfunctioning filter wash valves to be operated automatically from the SCADA system.
10. Evaluate the ability to measure manganese and then purchase those reagents.
11. Investigate the infrastructure needed to blend the Licking River and the Gardner wells before the water enters the treatment plant.
12. Move the fluoride feed point to the clearwell.
13. Reroute the roof drains away from the sedimentation basins.
14. Evaluate the current chlorine feed system for the potential to upgrade to feeding from 2 cylinders to 2 separate feed points.
15. Contract with a company capable of improving the existing SCADA system.
16. Visually inspect the interior of the clearwell for any plating out of manganese on the interior walls.
17. Proceed with the Hach Company maintenance on all related instrumentation.
18. Discuss Salyersville's involvement in a Comprehensive Performance Evaluation or Performance Based-Training with the Division of Water.

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Salyersville has 45 days (January 25, 2009) to respond to the recommendations and present the Division of Water a plan of action for addressing them (January 23, 2009) Correspondence and any questions should be directed to Julie Roney with the Compliance and Technical Assistance Branch, 200 Fair Oaks Lane, 4<sup>th</sup> Floor, Frankfort KY 40601 or at 502/564-8158, extension 4958.

In addition, to assure resolution of these issues, they will be formally addressed through the Agreed Order process with the Division of Enforcement. Any response submitted by Salyersville will be taken into consideration when developing the Order.

Sincerely,



Julie W. Roney  
Drinking Water Coordinator  
Compliance & Technical Assistance Branch  
Division of Water