Community Water System
2017 Annual Drinking Water Quality Report

We're pleased to present to you this year's Annual Drinking Water Quality Report. This report is designed to inform you about the quality water and services we deliver to you every day. Our goal is to provide you with a safe and dependable supply of drinking water, and we want you to understand, and be involved in, the efforts we make to continually improve the water treatment process and protect our water resources.

Where Does Our Drinking Water Come From?

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. Our source is surface water from Greer's Ferry Lake.

How Safe Is The Source Of Our Drinking Water?

The Arkansas Department of Health has completed Source Water Vulnerability Assessment for Community Water System. The assessments summarize the potential for contamination of our sources of drinking water and can be used as a basis for developing source water protection plans. Based on the various criteria of the assessments, our water sources have been determined to have a low to medium susceptibility to contamination. You may request summaries of the Source Water Vulnerability Assessments from our office.

What Contaminants Can Be In Our Drinking Water?

As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and, in some cases, can pick up substances resulting from the presence of animals or from human activity. Contaminants that may be present in source water include: Microbial contaminants such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife; Inorganic contaminants such as salts and metals, which can be naturally occurring or result from urban stormwater runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming; Pesticides and herbicides which may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses; Organic chemical contaminants including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban stormwater runoff, and septic systems; Radioactive contaminants which can be naturally occurring or be the result of oil and gas production and mining activities.

In order to assure tap water is safe to drink, EPA has regulations which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

Am I at Risk?

All drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that the water poses a health risk. However, some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from small amounts of contamination. These people should seek advice about drinking water from their health care providers. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791. In addition, EPA/CDC guidelines on appropriate means to lessen the risk of infection by microbiological contaminants are also available from the Safe Drinking Water Hotline.

What is Cryptosporidium?

Cryptosporidium is a microbial pathogen found in surface water throughout the U.S. It lives and reproduces only with the host. In the environment, *Cryptosporidium* exists as a thick walled oocyst, containing four organisms. Monitoring by Community Water System in 2017 indicated no presence of any of these organisms in our water sources. It is important to know that although filtration removes *Cryptosporidium*, the most commonly used filtration methods cannot guarantee 100 percent removal. Ingestion of *Cryptosporidium* may cause cryptosporidiosis, an abdominal infection. Symptoms of infection include nausea, diarrhea, and abdominal cramps. Most healthy individuals can overcome the disease within a few weeks. However, immuno-compromised people are at greater risk of developing life-threatening illness. We encourage immuno-compromised individuals to consult their doctor regarding appropriate precautions to take to avoid infection. *Cryptosporidium* must be ingested to cause disease, and it may be spread through means other than drinking water.

Lead and Drinking Water

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. We are responsible for providing high quality drinking water but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking.

If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at http://www.epa.gov/safewater/lead.

How Can I Learn More About Our Drinking Water?

If you have any questions about this report or concerning your water utility, please contact Mike Messer, CIS/Compliance Manager, at 501-825-7294. We want our valued customers to be informed about their water utility. If you want to learn more, please attend any of our regularly scheduled meetings. They are held on the 3rd Thursday of each month at 4:00 PM at the Community Water System Board Room.

TEST RESULTS

We routinely monitor for constituents in your drinking water according to Federal and State laws. The test results table shows the results of our monitoring for the period of January 1st to December 31st, 2017. In the table you might find terms and abbreviations you are not familiar with. To help you better understand these terms we've provided the following definitions:

Action Level - the concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow.
Maximum Contaminant Level (MCL) - the highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.
Maximum Contaminant Level Goal (MCLG) – unenforceable public health goal; the level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.
Maximum Residual Disinfectant Level (MRDL) - the highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.
Maximum Residual Disinfectant Level Goal (MRDLG) - the level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.
Not applicable (NA)
Nephelometric Turbidity Unit (NTU) – a unit of measurement for the clarity of water. Turbidity in excess of 5 NTU is just noticeable to the average person.
Parts per billion (ppb) - a unit of measurement for detected levels of contaminants in drinking water. One part per billion corresponds to one minute in 2,000 years, or a single penny in $10,000,000.
Parts per million (ppm) – a unit of measurement for detected levels of contaminants in drinking water. One part per million corresponds to one minute in two years or a single penny in $10,000.

TEST RESULTS

MICROBIOLOGICAL CONTAMINANTS

Contaminant	Violation Y/N	Level Detected	Unit	MCLG (Public Health Goal)	MCL (Allowable Level)	Major Sources in Drinking Water
Total Coliform Bacteria	N	1 positive sample in July	None at violation level	0	presence of coliform bacteria in 5% of monthly samples	Naturally present in the environment

TURBIDITY

Contaminant	Violation Y/N	Level Detected	Unit	MCLG (Public Health Goal)	MCL (Allowable Level)	Major Sources in Drinking Water
Turbidity	N	Highest yearly sample result: 0.16	NTU	NA	Any measurement in excess of 1 NTU constitutes a violation	Soil runoff
		Lowest monthly % of samples meeting the turbidity limit: 100			A value less than 95% of samples meeting the limit of 0.3 NTU, constitutes a violation	

♦ Turbidity is a measurement of the cloudiness of water. We monitor it because it is a good indicator of the effectiveness of our filtration systems.

INORGANIC CONTAMINANTS

Contaminant	Violation Y/N	Level Detected	Unit	MCLG (Public Health Goal)	MCL (Allowable Level)	Major Sources in Drinking Water
Nitrate [as Nitrogen]	N	0.12	ppm	10	10	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits
Fluoride	N	Average: 0.77 Range: 0.64 – 0.95	ppm	4	4	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories

LEAD AND COPPER TAP MONITORING

Contaminant	Number of Sites over Action Level	90th Percentile Result	Unit	Action Level	Major Sources in Drinking Water
Lead	0	<0.003	ppm	0.015	Corrosion from household plumbing systems; erosion of natural deposits
Copper	0	0.19	ppm	1.3	

♦ The results above are from our last completed monitoring period in 2017.

TOTAL ORGANIC CARBON

- The percentage of Total Organic Carbon (TOC) removal was routinely monitored in 2017, and all TOC removal requirements set by USEPA were met. Total organic carbon (TOC) has no health effects. However, total organic carbon provides a medium for the formation of disinfection by-products. These by-products include trihalomethanes (THMs) and haloacetic acids (HAAs).

REGULATED DISINFECTANTS

Disinfectant	Violation Y/N	Level Detected	Unit	MRDLG (Public Health Goal)	MRDL (Allowable Level)	Major Sources in Drinking Water
Chlorine	N	Average: 0.86 Range: 0.11 – 2.3	ppm	4	4	Water additive used to control microbes

BY-PRODUCTS OF DRINKING WATER DISINFECTION

Contaminant	Violation Y/N	Level Detected	Unit	MCLG (Public Health Goal)	MCL (Allowable Level)
HAA5 [Haloacetic Acids]	N	Highest Running 12 Month Average: 40 Range: 14.1 – **68.5**	ppb	0	**60**
TTHM [Total Trihalomethanes]	N	Highest Running 12 Month Average: 65 Range: 19.1 – **99.3**	ppb	NA	**80**
Chlorite	N	Average: 406 Range: 103 - 638	ppb	800	1000

- While only the upper ranges of the TTHMs and HAA5 exceeded their MCLs, and there were no violations, it should be noted that some people who drink water containing Trihalomethanes in excess of the MCL over many years may experience problems with their liver, kidneys, or central nervous systems. People who drink water with elevated levels of Trihalomethanes or Haloacetic Acids may also have an increased risk of getting cancer.

UNREGULATED CONTAMINANTS

Contaminant	Levels Detected	Unit	MCLG (Public Health Goal)	Major Sources in Drinking Water
Chloroform	7.73	ppb	70	By-products of drinking water disinfection
Bromodichloromethane	2.62	ppb	0	
Dibromochloromethane	0.52	ppb	60	

- Unregulated contaminants are those for which EPA has not established drinking water standards. The purpose of unregulated contaminant monitoring is to assist EPA in determining the occurrence of unregulated contaminants in drinking water and whether future regulation is warranted. MCLs (Maximum Contaminant Levels) and MCLGs (Maximum Contaminant Level Goals) have not been established for all unregulated contaminants.