



# Arkansas Department of Health

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DONNIE STEWART  
HOXIE WATER DEPARTMENT  
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HOXIE, AR 72433

PWS ID 301

## RE: 2017 Annual Drinking Water Report (Consumer Confidence Report)

Dear Donnie Stewart:

Enclosed is your water system's 2017 Consumer Confidence Report (CCR), instructions for distributing it to your customers, and a certification form. **The CCR must be distributed by July 1, 2018.** It is the responsibility of your water system to thoroughly review the report for accuracy.

Your water system is required to distribute your CCR in **one** of the following ways:

1. Electronic Distribution.
2. Publishing the CCR in the local newspaper for a least one day.
3. Mailing or hand delivering to each residential and commercial customers.

Electronic Distribution is the easiest and least costly way to deliver the CCR to your customers. You do not have to have your own website to use this method. Your CCR is already published on the Department of Health's Engineering Section's website, but you have to let your customers know the web address.

### I. For Electronic Distribution:

1. Notification that the CCR is available on a website must be provided to each customer in writing, either as an insert or printed on the water bill. The water system must provide a direct URL to the CCR. You can use the exact wording below:

**Your Annual Drinking Water Quality Report is available at  
[www.healthy.arkansas.gov/eng/ccr/301.pdf](http://www.healthy.arkansas.gov/eng/ccr/301.pdf)  
Copies are available upon request from our office.**

YOUR DIRECT URL LINK TO VIEW THE CCR IS AS FOLLOWS:

[www.healthy.arkansas.gov/eng/ccr/301.pdf](http://www.healthy.arkansas.gov/eng/ccr/301.pdf)

2. Documentation of the water bill or notification that will be delivered to the customers must be delivered to our office, **prior to sending to customers.**
3. If the water system is aware that its customers are unable to receive CCRs electronically, it must provide a paper CCR using one of the traditional delivery methods.
4. Two reminders must be sent to customers alerting them that the CCR is available electronically, and one reminder must be sent before July 1<sup>st</sup>.

# **Hoxie Water Department**

## **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 Northeast Arkansas Public Water Authority (NEAPWA), whose source is the Spring River.

### ***How Safe Is The Source Of Our Drinking Water?***

The Arkansas Department of Health has completed a Source Water Vulnerability Assessment for Hoxie Water Department. The assessment summarizes the potential for contamination of our sources of drinking water and can be used as a basis for developing a source water protection plan. Based on the various criteria of the assessment, our water sources have been determined to have a medium susceptibility to contamination. You may request a summary of the Source Water Vulnerability Assessment 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.

### ***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 Joseph Jensen, Operator, at 870-202-9896. 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. Our meetings are held at 6:30 PM the second Tuesday of each month, at 400 SW Hartigan, in Hoxie.

## **TEST RESULTS**

We and North East Public Water Authority 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 1<sup>st</sup> to December 31<sup>st</sup>, 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.

**Level 2 Assessment** – A level 2 assessment is a very detailed study of the water system to identify potential problems and determine (if possible) why an *E.coli* MCL violation has occurred and/or why total coliform bacteria have been found in our water system on multiple occasions.

**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.

**NA** - Not applicable

**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.

TURBIDITY						
Contaminant	Violation Y/N	Level Detected	Unit	MCLG (Public Health Goal)	MCL (Allowable Level)	Major Sources in Drinking Water
Turbidity (NEAPWA)	N	Highest yearly sample result: 0.21	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. NEAPWA monitors it because it is a good indicator of the effectiveness of their filtration system.						
INORGANIC CONTAMINANTS						
Contaminant	Violation Y/N	Level Detected	Unit	MCLG (Public Health Goal)	MCL (Allowable Level)	Major Sources in Drinking Water
Fluoride (NEAPWA)	N	Average: 0.71 Range: 0.63 - 0.82	ppm	4	4	Erosion of natural deposits; water additive which promotes strong teeth
Nitrate [as Nitrogen] (NEAPWA)	N	Average: 0.49 Range: 0.44 - 0.55	ppm	10	10	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits
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. 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).						
LEAD AND COPPER TAP MONITORING						
Contaminant	Number of Sites over Action Level	90 <sup>th</sup> Percentile Result	Unit	Action Level	Major Sources in Drinking Water	
Lead (Hoxie)	0	<0.003	ppm	0.015	Corrosion from household plumbing systems; erosion of natural deposits	
Copper (Hoxie)	0	0.14	ppm	1.3		
♦ We are currently on a reduced monitoring schedule and required to sample once every three years for lead and copper at the customers' taps. The results above are from our last monitoring period in 2017. Our next required monitoring period is in 2020.						
REGULATED DISINFECTANTS						
Disinfectant	Violation Y/N	Level Detected	Unit	MRDLG (Public Health Goal)	MRDL (Allowable Level)	Major Sources in Drinking Water
Chlorine (Hoxie)	N	Average: 0.93 Range: 0.8 - 1.1	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)	
HAAs [Haloacetic Acids] (Hoxie)	N	Average: 26 Range: 13.4 - 45.9	ppb	0	60	
THM [Total Trihalomethanes] (Hoxie)	N	Average: 39 Range: 20 - 65.8	ppb	NA	80	

<b>UNREGULATED CONTAMINANTS</b>				
<b>Contaminant</b>	<b>Level Detected</b>	<b>Unit</b>	<b>MCLG (Public Health Goal)</b>	<b>Major Sources in Drinking Water</b>
Chloroform (NEAPWA)	8.22	ppb	70	By-product of drinking water disinfection
Bromodichloromethane (NEAPWA)	3.28	ppb	0	
Dibromochloromethane (NEAPWA)	0.87	ppb	60	
<p>♦ 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.</p>				