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2023 Drinking Water Report



Making Safe Drinking Water

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Your drinking water comes from a surface water source: surface water drawn from Budd Lake.

Fairmont works hard to provide you with safe and reliable drinking water that meets federal and state water quality requirements. The purpose of this report is to provide you with information on your drinking water and how to protect our precious water resources.

Contact **Brady Powers, Water/Wastewater Superintendent, at 507.235.6789 or bpowers@fairmont.org** if you have questions about Fairmont's drinking water. You can also ask for information about how you can take part in decisions that may affect water quality.

The U.S. Environmental Protection Agency sets safe drinking water standards. These standards limit the amounts of specific contaminants allowed in drinking water. This ensures that tap water is safe to drink for most people. The U.S. Food and Drug Administration regulates the amount of certain contaminants in bottled water. Bottled water must provide the same public health protection as public tap water.

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 water poses a health risk. 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.

Fairmont Monitoring Results

This document contains our monitoring results from January 1 to December 31, 2023.

We work with the Minnesota Department of Health to test drinking water for more than 100 contaminants. It is not unusual to detect contaminants in small amounts. No water supply is ever completely free of contaminants. Drinking water standards protect Minnesotans from substances that may be harmful to their health.

Learn more by visiting the Minnesota Department of Health's webpage

<u>Basics of Monitoring and Testing of Drinking Water in Minnesota</u>

https://www.health.state.mn.us/communities/environment/water/factsheet/sampling.html

Learn more about your Drinking Water

Groundwater supplies 75 percent of Minnesota's drinking water, and is found in aquifers beneath the surface of the land. Surface water supplies 25 percent of Minnesota's drinking water, and is the water in lakes, rivers, and streams above the surface of the land. Contaminants can get in drinking water sources from the natural environment and from people's daily activities. There are five main types of contaminants in drinking water sources.

Microbial contaminants, such as viruses, bacteria, and parasites. Sources include sewage treatment plants, septic systems, agricultural livestock operations, pets, and wildlife.

Inorganic contaminants include salts and metals from natural sources (e.g. rock and soil), oil and gas production, mining and farming operations, urban stormwater runoff, and wastewater discharges.

Pesticides and herbicides are chemicals used to reduce or kill unwanted plants and pests. Sources include agriculture, urban stormwater runoff, and commercial and residential properties.

Organic chemical contaminants include synthetic and volatile organic compounds. Sources include industrial processes and petroleum production, gas stations, urban stormwater runoff, and septic systems.

Radioactive contaminants such as radium, thorium, and uranium isotopes come from natural sources (e.g. radon gas from soils and rock), mining operations, and oil and gas production.

The Minnesota Department of Health provides information about your drinking water source(s) in a source water assessment, including:

- How Fairmont is protecting your drinking water source(s);
- Nearby threats to your drinking water sources;
- How easily water and pollution can move from the surface of the land into drinking water sources, based on natural geology and the way wells are constructed.

Find your source water assessment at <u>Source Water Assessments</u> <u>https://www.health.state.mn.us/communities/environment/water/swp/swa</u> or call 651.201.4700 between 8:00 am and 4:30 pm, Monday through Friday.

Some People Are More Vulnerable to Contaminants in Drinking Water

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 infections. The developing fetus and therefore pregnant women may also be more vulnerable to contaminants in drinking water. These people or their caregivers should seek advice about drinking water from their health care providers. EPA/Centers for Disease Control (CDC) guidelines on appropriate means to lessen the risk of infection by *Cryptosporidium* and other microbial contaminants are available from the Safe Drinking Water Hotline at 1.800.426.4791.

Lead in Drinking Water

You may be in contact with lead through paint, water, dust, soil, food, hobbies, or your job. Coming in contact with lead can cause serious health problems for everyone. There is no safe level of lead. Babies, children under six years, and pregnant women are at the highest risk.

Lead is rarely in a drinking water source, but it can get in your drinking water as it passes through lead service lines and your household plumbing system. Fairmont is responsible for providing high quality drinking water, but it cannot control the plumbing materials used in private buildings. Read below to learn how you can protect yourself from lead in drinking water.

- **1. Let the water run** for 30-60 seconds before using it for drinking or cooking if the water has not been turned on in over six hours. If you have a lead service line, you may need to let the water run longer. A service line is the underground pipe that brings water from the main water pipe under the street to your home.
 - You can find out if you have a lead service line by contacting your public water system, or you can check by following the steps at: https://www.mprnews.org/story/2016/06/24/npr-find-lead-pipes-in-your-home
 - The only way to know if lead has been reduced by letting water run is to check with a test. If letting the water run does not reduce lead, consider other options to reduce your exposure.
- 2. Use cold water for drinking, making food, and making baby formula. Hot water releases more lead from pipes than cold water.
- **3. Test your water.** In most cases, letting the water run and using cold water for drinking and cooking should keep lead levels low in your drinking water. If you are still concerned about lead, arrange with a laboratory to test your tap water. Testing your water is important if young children or pregnant women drink your tap water.
 - Contact a Minnesota Department of Health accredited laboratory to get a sample container and instructions on how to submit a sample:

Environmental Laboratory Accreditation Program

https://eldo.web.health.state.mn.us/public/accreditedlabs/labsearch.seam

The Minnesota Department of Health can help you understand your test results.

- 4. Treat your water if a test shows your water has high levels of lead after you let the water run.
 - Read about water treatment units:

Point-of-Use Water Treatment Units for Lead Reduction

https://www.health.state.mn.us/communities/environment/water/factsheet/pouled.html

Learn more:

- Visit <u>Lead in Drinking Water</u>
 - https://www.health.state.mn.us/communities/environment/water/contaminants/lead.html
- Visit Basic Information about Lead in Drinking Water http://www.epa.gov/safewater/lead
- Call the EPA Safe Drinking Water Hotline at 1.800.426.4791. To learn about how to reduce your contact with lead from sources other than your drinking water, visit Common Sources of Lead
 http://www.health.state.mn.us/communities/environment/lead/fs/common.html

How to Read the Water Quality Data Table

The tables below show the contaminants we found last year or the most recent time we sampled for that contaminant. They also show the levels of those contaminants and the Environmental Protection Agency's limits. Substances that we tested for but did not find are not included in the tables.

We sample for some contaminants less than once a year because their levels in water are not expected to change from year to year. If we found any of these contaminants the last time we sampled for them, we included them in the tables below with the detection date.

We may have done additional monitoring for contaminants that are not included in the Safe Drinking Water Act. To request a copy of these results, call the Minnesota Department of Health at 651.201.4700 between 8:00 a.m. and 4:30 p.m., Monday through Friday.

Some contaminants are monitored regularly throughout the year and rolling (or moving) annual averages are used to manage compliance. Because of this averaging, there are times where the Range of Detected Test Results for the calendar year is lower than the Highest Average or Highest Single Test Result, because it occurred in the previous calendar year.

Definitions

- **AL (Action Level)**: The concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow.
- **EPA:** Environmental Protection Agency
- MCL (Maximum contaminant level): 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.
- MCLG (Maximum contaminant level 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.
- MRDL (Maximum residual disinfectant level): 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.
- MRDLG (Maximum residual disinfectant level goal): 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.
- N/A (Not applicable): Does not apply.
- NTU (Nephelometric Turbidity Units): A measure of the cloudiness of the water (turbidity).
- **ppb (parts per billion)**: One part per billion in water is like one drop in one billion drops of water, or about one drop in a swimming pool. ppb is the same as micrograms per liter (μg/l).
- **ppm (parts per million)**: One part per million is like one drop in one million drops of water, or about one cup in a swimming pool. ppm is the same as milligrams per liter (mg/l).
- **ppt (parts per trillion)**: One part per trillion is like one drop in one trillion drops of water, or about one drop in an Olympic sized swimming pool. ppt is the same as nanograms per liter (ng/l).
- **PWSID**: Public water system identification.
- TT (Treatment Technique): A required process intended to reduce the level of a contaminant in drinking water.

Potential Health Effects and Corrective Actions (If Applicable)

Fluoride: If your drinking water fluoride levels are below the optimal concentration range of 0.5 to 0.9 ppm, please talk with your dentist about how you can protect your teeth and your family's teeth from tooth decay and cavities. Fore more information, visit: MDH Drinking Water Fluoridation

https://www.health.state.mn.us/communities/environment/water/com/fluoride.html

Fluoride is nature's cavity fighter, with small amounts present naturally in many drinking water sources. There is an overwhelming weight of credible, peer-reviewed, scientific evidence that fluoridation reduces tooth decay and cavities in children and adults, even when there is availability of fluoride from other sources, such as fluoride toothpaste and mouth rinses. Since studies show that optimal fluoride levels in drinking water benefit public health, municipal community water systems adjust the level of fluoride in the water to an optimal concentration between 0.5 to 0.9 parts per million (ppm) to protect your teeth. Fluoride levels below 2.0 ppm are not expected to increase the risk of a cosmetic condition known as enamel fluorosis.

Water is life's matter and matrix, mother and medium.

There is no life without water.

Monitoring Results - Regulated Substances

EPA's

Action Level

90% of homes

EPA's Ideal Goal

(MCLG)

0 ppm

LEAD AND COPPER - Tested at customer taps.

Contaminant

(Date, if sampled

in previous year)

Copper (08/11/21)

	less than 1.3	ppm						Corrosion of household	
Lead (08/11/21)	90% of hom less than 15	I	0 ppb		5 ppb 0 out of 30		NO	plumbing.	
INORGANIC & ORG	SANIC CONT	AMINANTS -	Tested in o	drinking v	vater.				
Contaminant (Date, if sampled in previous year)	EPA's Limit (MCL)	EPA's Idea Goal (MCLG)	or High	Highest Average or Highest Single Test Result		e of Detected est Results	Violation	Typical Sources	
Nitrate	10.4 ppm	10 ppm	1.	1.8 ppm		3 - 1.80 ppm	NO	Runoff from fertilizer use; Leaching from septic tanks, sewage; Erosion of natural deposits.	
Barium (07/20/2020)	2 ppm	2 ppm	2 ppm 0.04 pp		N/A		NO	Discharge of drilling wastes; Discharge from metal refineries; Erosion of natural deposit.	
CONTAMINANTS R	RELATED TO	DISINFECTIO	N - Tested	in drinkir	ng water.				
Substance (Date, if sampled in previous year)	EPA's Limit (MCL or MRDL)	EPA's Ideal Goal (MCLG OR MRDLG) Highest Av or Highest Test Res		_	Range of Detected		Violation	Typical Sources	
Total Trihalomethanes (TTHMs)	80 ppb	N/A	N/A 36.6 pp		24.0	0 - 44.90 ppb	NO	By-product of drinking water disinfection.	
Total Haloacetic Acids (HAA)	60 ppb	N/A	N/A 21.7 ppb		8.7	0 - 24.20 ppb	NO	water distillection.	
Total Chlorine	4.0 ppm	4.0 ppm	4.0 ppm 2.71 pp		1.7	0 - 4.05 ppm	NO	Water additive used to control microbes.	
Total HAA refers to HAA5									
OTHER SUBSTANCE	ES - Tested ir	n drinking wa	ater.						
Substance (Date, if sampled in previous year)	EPA's Limit (MCL)	EPA's Ideal Goal (MCLG)	or Highes	ighest Average r Highest Single Test Result		Detected Test Results	Violation	Typical Sources	
Fluoride	4.0 ppm	4.0 ppm	0.59 р	0.59 ppm		- 0.84 ppm	NO	Erosion of natural deposits; Water additive to promote strong teeth.	
TREATMENT INDICA	TOR - Tested o	during treatme	ent.						
Substance	Removal Required	Lowest Monthly Percent of Results in Compliance			Highest 1	est Result	Violation	Typical Sources	
Turbidity	TT	g	97%		10	00%	NO	Soil Runoff.	
DISINFECTION BYP	RODUCT INI	DICATOR - Te	ested in sou	ırce wate	er and in	drinking water.			
Substance	Remova Require	0			_	e of Percent al Achieved	Violation	Typical Sources	
Total Organic Carbon Variable		e	41 – 64			53	NO	N/A	
The percentage of Total Org	ganic Carbon (TOC) removal was me	asured each mo	onth. The syst	em met all T	OC removal requirem	ents, unless there	e is a "YES" in the Violation column.	

Number of

Homes with

High Levels

0 out of 30

Violation

NO

Typical Sources

90% of Results

were less than

0.14 ppm

Monitoring Results - Unregulated Substances

In addition to testing drinking water for contaminants regulated under the Safe Drinking Water Act, we sometimes also monitor for containments that are not regulated. Unregulated contaminants do not have legal limits for drinking water.

Detection along of a regulated or unregulated contaminant should not cause concern. The meaning of a detection should be determined considering current health effects information. We are often still learning about the health effects, so this information can change over time.

The following table shows the unregulated contaminants we detected last year, as well as human-health based guidance values for comparison, where available. EPA may not have set human-health based guidance values for some contaminants. The comparison values are based only on potential health impacts and do not consider our availability to measure contaminants at very low concentrations or the cost and technology of prevention and/or treatment. They may be set at levels that are costly, challenging, or impossible for water systems to meet (for example, large-scale treatment technology may not exist for a given contaminant).

A person drinking water with a contaminant at or below the comparison value would be at little to no risk for harmful health effects. If the level of a contaminant is above the comparison value, people of a certain age or with special health conditions—like a fetus, infants, children elderly and people with impaired immunity - may need to take extra precautions. We are notifying you of the unregulated contaminants we have detected as a public education opportunity.

More information is available on MDH's A-Z List of Contaminants in Water

(https://www.health.state.mn.us/communities/environment/water/contaminants/index.html)

Fourth Unregulated Contaminant Monitoring Rule (UCMR 4)

(https://www.health.state.mn.us/communities/environment/water/com/ucmr4.html)

Fifth Unregulated Contaminant Monitoring Rule (UCMR 5)

(https://www.epa.gov/dwucmr/fifth-unregulated-contaminant-monitoring-rule)

EPA UCMR 5 Data Finder: The Unregulated Contaminant Monitoring Rule 5 (UCMR5) Data finder allows people to easily search for, summarize, and download the available UCMR 5 analytical results.

(https://www.epa.gov/dwucmr/fifth-unregulated-contaminant-monitoring-rule-data-finder)

EPA UCMR 5 Program Overview Fact sheet: This describes the UCMR5 contaminants and standards.

(https://www.epa.gov/system/files/documents/2022-02/ucmr5-factsheet.pdf)

UNREGULARED CONTAMINANTS - Tested in drinking water.								
Contaminant	Comparison Value	Highest Average Result or High- est Single Test Result	Range of Detected Test Results Typical Sources					
Sodium*	20 ppm	22.7 ppm	N/A					
Sulfate	500 ppm	24.1 ppm	N/A					
Perfluorobutanoic Acid (PFBA)	7000 ppt	6.9 ppt	6.3 - 7.5 ppt					
Lithium	10 ppb	15.9 ppb	14.7 - 18 ppb					

 $[\]ensuremath{^{*}}$ Home water softening can increase the level of sodium in your drinking water.

