



SPECIALIZED UTILITY SERVICES PROGRAM

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May 10, 2018

State Water Resources Control Board  
Division of Drinking Water  
Salvador Turrubiartes, P.E., Associate Sanitary Engineer  
1001 I St, 13<sup>th</sup> Floor  
Sacramento, CA 95834

**Regarding: Wild Wings C.S.A. April 2018 Monthly Water System Report**

Mr. Turrubiartes,

Specialized Utilities Services Program, Inc., on behalf of the Wild Wings C.S.A. has prepared and is submitting to the Division of Drinking Water, the April 2018 Monthly Water Monitoring Report.

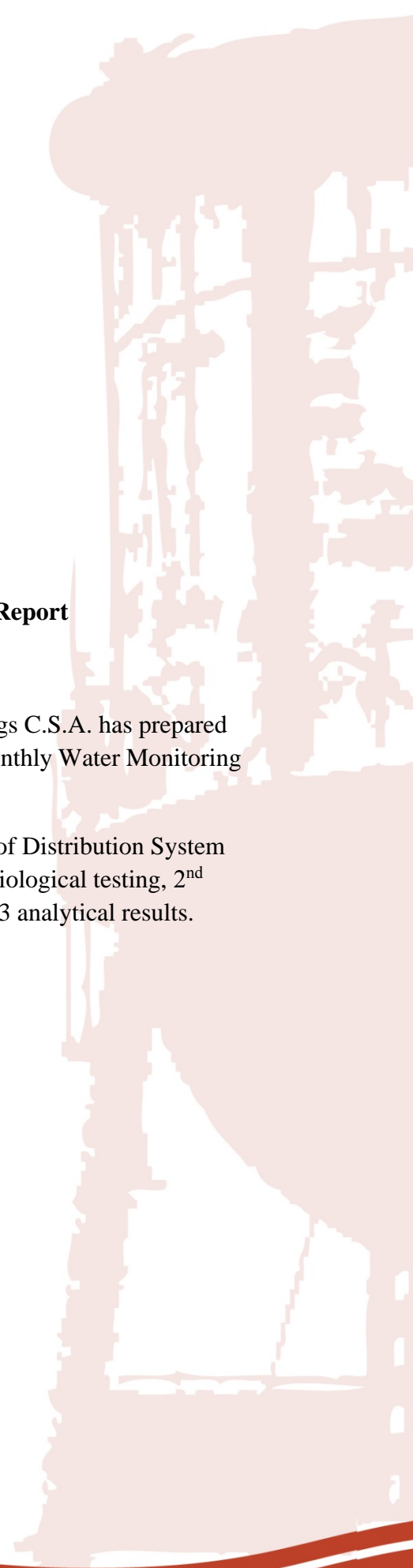
Enclosed are the April Monthly Water System Flow Report, Summary of Distribution System Coliform Monitoring Report, the laboratory analytical results for bacteriological testing, 2<sup>nd</sup> Quarter Report for Disinfectant Residuals Compliance; and the TCP 123 analytical results.

Please contact me if you have any questions.

Sincerely,

A handwritten signature in black ink that reads 'Dan DeMoss'.

Dan DeMoss.  
Operator  
Phone: (916) 616-7761  
Email: [ddemoss@calruralwater.org](mailto:ddemoss@calruralwater.org)



## MONTHLY SUMMARY OF DISTRIBUTION SYSTEM COLIFORM MONITORING

System Name <p style="text-align: center; font-size: 1.2em;">Wild Wings</p>	System Number <p style="text-align: center; font-size: 1.2em;">571011</p>
Sampling Period <p style="text-align: center; font-size: 1.2em; color: blue;">April</p>	Year <p style="text-align: center; font-size: 1.2em;">2018</p>

	Number Required	Number Collected	Number Total Coliform Positives	Number Fecal/ E.coli Positives
1. Routine Samples (see note 1)	2	2	0	0
2. Repeat Samples Following Samples Which are Total Coliform Positive and Fecal/E.coli <i>Negative</i> (see notes 5 and 6)		0	0	0
3. Repeat Samples Following Routine Samples Which are Total Coliform <i>Positive</i> and Fecal/E.coli Positive (see notes 5 and 6)		0	0	0
4. MCL Computation For Total Coliform Positive Samples				
a. Totals (sum of columns)	2	2	0	
b. If 40 or more samples collected in month, determine percent of samples that are total coliform positive [(total number positive/total number collected) x 100]				
c. Is system in compliance. . . with fecal/E. coli MCL? (see notes 2 and 3)		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
. . . with monthly MCL? (see note 4)		<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	
5. Invalidated Samples (Note what samples, if any, were invalidated; who authorized the invalidation; and when replacement samples were collected. Attach additional sheets, if necessary.)				

6. Summary Completed By:

Signature 	Title <p style="text-align: center; font-size: 1.2em;">Water Operator</p>	Date <p style="text-align: center; font-size: 1.2em;">5/10/2018</p>
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NOTES AND INSTRUCTIONS:

1. Routine samples include:
    - a. Samples required pursuant to 22 CCR Section 64423, and any additional samples required by an approved routine sample siting plan established pursuant to 22 CCR Section 64422.
    - b. Extra samples required for systems collecting less than five routine samples per month that had one or more total coliform positives in previous month;
    - c. Extra samples for systems with high source water turbidities that are using surface water or groundwater under direct influence of surface water and do not practice filtration in compliance with regulations;
  2. Note: For a repeat sample following a total coliform positive sample, any fecal/E.coli positive repeat (boxed entry) **constitutes an MCL violation and requires immediate notification to the department** (22, CCR, Section 64426.1).
  3. Note: For repeat sample following a fecal/E.coli positive sample, any total coliform positive repeat (boxed entry) **constitutes an MCL violation and requires immediate notification to the department** (22, CCR, Section 64426.1).
  4. Total coliform MCL (**Notify Department within 24 hours of MCL violation**):
    - a. For systems collecting less than 40 samples, if two or more samples are total coliform positive, then the MCL is violated.
    - b. For systems collecting 40 or more samples, if more than 5.0 percent of samples collected are total coliform positive, then the MCL is violated.
  5. Positive results and their associated repeat samples must be tracked on the worksheet on the other side.
  6. For systems collecting more than one routine sample per month, three repeat samples must be collected for each total coliform positive sample. Repeat samples must be collected within 24 hours of being notified of the positive results.
  7. For systems collecting one or less routine samples per month, four repeat samples must be collected for each total coliform positive sample.
- CDPH 8477 (10/2007)

Date	PINTAIL WELL SITE			CANVAS WELL SITE			MONTH: APRIL 2018	
	Meter Read	Flow MGD	Reservoir CL <sub>2</sub> Residual	Meter Read	Flow MGD	Reservoir CL <sub>2</sub> Residual	Mallard CL <sub>2</sub> Residual	Mandarian CL <sub>2</sub> Residual
1	1313.1523	0.2278	0.62	1105.3835	0	0	0.48	0.51
2	1313.3801	0.1512	0.43	1105.3835	0	0	0.43	0.46
3	1313.5313	0.1403	0.42	1105.3835	0.0067	0	0.56	0.26
4	1313.6716	0.1820	0.37	1105.3902	0	0	0.35	0.35
5	1313.8536	0.1394	0.31	1105.3902	0	0	0.31	0.26
6	1313.9930	0.0683	0.40	1105.3902	0	0	0.34	0.52
7	1314.0613	0.1461	0.60	1105.3902	0	0	0.75	0.61
8	1314.2074	0.1468	0.62	1105.3902	0	0	0.60	0.73
9	1314.3542	0.1406	0.93	1105.3902	0	0	0.82	0.86
10	1314.4948	0.1241	0.83	1105.3902	0	0	0.85	0.81
11	1314.6189	0.0825	0.85	1105.3902	0	0	0.90	0.75
12	1314.7014	0.1387	0.95	1105.3902	0	0	0.61	0.65
13	1314.8401	0.1431	0.87	1105.3902	0	0	0.82	1.06
14	1314.9832	0.1433	0.97	1105.3902	0	0	1.00	0.98
15	1315.1265	0.1417	0.60	1105.3902	0	0	1.05	1.10
16	1315.2682	0.1440	1.04	1105.3902	0	0	0.93	1.11
17	1315.4122	0.1428	0.78	1105.3902	0	0	1.13	0.96
18	1315.5550	0.1465	0.98	1105.3902	0	0	0.98	1.00
19	1315.7015	0.1523	1.07	1105.3902	0	0	0.88	0.86
20	1315.8538	0.1498	0.70	1105.3902	0	0	0.77	0.78
21	1316.0036	0.2228	1.00	1105.3902	0	0	1.00	1.03
22	1316.2264	0.2328	0.85	1105.3902	0	0	0.85	0.76
23	1316.4592	0.2287	1.25	1105.3902	0	0	0.86	1.20
24	1316.6879	0.3284	1.26	1105.3902	0	0	0.97	1.34
25	1317.0163	0.2458	0.91	1105.3902	0	0	0.88	1.03
26	1317.2621	0.2332	0.91	1105.3902	0	0	0.73	0.89
27	1317.4953	0.3191	0.93	1105.3902	0	0	0.91	0.97
28	1317.8144	0.2423	0.97	1105.3902	0	0	0.70	0.78
29	1318.0567	0.1994	0.83	1105.3902	0	0	0.80	0.87
30	1318.2561	0.3914	0.89	1105.3902	0	0	0.76	0.79
1	1318.6475			1105.3902		0		

Avg. CL <sub>2</sub>	0.80
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Quarterly report for Disinfectant Residuals Compliance  
For Systems Using Chlorine or Chloramines

System Name: Wild Wings  
Calendar Year: 2018

System No : 5710011  
Quarter: 2

1st Quarter		
Month	Number of Samples Taken	Monthly Avg. chlorine Level (mg/l)
Previous Year	April	1.0
	May	1.1
	June	0.9
	July	1.0
	August	1.0
	September	1.1
	October	1.0
	November	1.0
	December	1.0
	Current Year	January
February		2
March		2
Running Annual Average (RAA):		1.1
Meets standard? (i.e. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No)		RAA ≤ MRDL of 4.0 mg/l as cl <sub>2</sub>

2 nd Quarter		
Month	Number of Samples Taken	Monthly Avg. chlorine Level (mg/l)
Previous Year	July	1.0
	August	1.0
	September	1.1
	October	1.0
	November	1.0
	December	1.0
	Current Year	January
February		2
March		2
April		2
May		
June		
Running Annual Average (RAA):		1.05
Meets standard? (i.e. <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No)		RAA ≤ MRDL of 4.0 mg/l as cl <sub>2</sub>

3rd Quarter		
Month	Number of Samples Taken	Monthly Avg. chlorine Level (mg/l)
Current Year	October	
	November	
	December	
Previous Year	January	
	February	
	March	
	April	
	May	
	June	
	July	
	August	
	September	
Running Annual Average (RAA):		
Meets standard? (i.e. <input type="checkbox"/> Yes <input type="checkbox"/> No)		RAA ≤ MRDL of 4.0 mg/l as cl <sub>2</sub>

4th Quarter		
Month	Number of Samples Taken	Monthly Avg. chlorine Level (mg/l)
Current Year	January	
	February	
	March	
	April	
	May	
	June	
	July	
	August	
	September	
	October	
	November	
	December	
Running Annual Average (RAA):		
Meets standard? (i.e. <input type="checkbox"/> Yes <input type="checkbox"/> No)		RAA ≤ MRDL of 4.0 mg/l as cl <sub>2</sub>

Comments:

Signature: 

Date: 5/10/18



# CALIFORNIA LABORATORY SERVICES

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California Rural Water Association  
1234 N. Market Blvd.  
Sacramento, CA 95834

Project: Wild Wings  
Project Number: [none]  
Project Manager: Dan Demoss

CLS Work Order #: 18D0980  
COC #: 186492

## Microbiological Parameters by APHA Standard Methods

Analyte	Result	Reporting Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
<b>Mandarin D Sample Site (18D0980-01) Water</b> <b>Sampled: 04/18/18 07:30</b> <b>Received: 04/18/18 11:55</b>									
E. Coli	Absent	0.0	N/A	1	1803231	04/18/18	04/19/18	SM 9223	
<b>Residual Chlorine</b>	<b>1.00</b>	0.10	mg/L	"	"	04/18/18	04/18/18	SM 4500-CL-G	
Total Coliforms	Absent	0.0	N/A	"	"	04/18/18	04/19/18	SM 9223	

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04/18/18 14:24

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California Rural Water Association 1234 N. Market Blvd. Sacramento, CA 95834	Project: Wild Wings Project Number: [none] Project Manager: Dan Demoss	CLS Work Order #: <b>18D0609</b> COC #: 186457
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**Microbiological Parameters by APHA Standard Methods**

Analyte	Result	Reporting Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
<b>18118 Malard (18D0609-01) Water</b> <b>Sampled: 04/11/18 08:25</b> <b>Received: 04/11/18 12:00</b>									
Residual Chlorine	0.90	0.10	mg/L	1	1803009	04/11/18 08:25	04/11/18	SM 4500-CL-G	
Total Coliforms	Absent	0.0	N/A	"	"	04/11/18 12:30	04/12/18	SM 9223	
E. Coli	Absent	0.0	"	"	"	"	"	"	