



November 5, 2018

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

Regarding: Wild Wings C.S.A. October 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 October 2018 Monthly Water Monitoring Report.

Enclosed are the October Monthly Water System Flow Report, Summary of Distribution System Coliform Monitoring Report, the laboratory analytical results for bacteriological testing,

Please contact me if you have any questions.

Sincerely yours,

A handwritten signature in black ink, appearing to read "Dan DeMoss". The signature is fluid and cursive, written in a professional style.

Dan DeMoss.
Operator
Phone: (916) 616-7761
Email: 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;">October</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)	<u>2</u>	<u>2</u>	<u>0</u>	<u>0</u>
2. Repeat Samples Following Samples Which are Total Coliform Positive and Fecal/E.coli <i>Negative</i> (see notes 5 and 6)		<u>0</u>	<u>0</u>	<u>0</u>
3. Repeat Samples Following Routine Samples Which are Total Coliform <i>Positive</i> and Fecal/E.coli Positive (see notes 5 and 6)		<u>0</u>	<u>0</u>	<u>0</u>
4. MCL Computation For Total Coliform Positive Samples				
a. Totals (sum of columns)	<u>0</u>	<u>0</u>	<u>0</u>	
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]	<u>0</u>			
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;">11/5/2018</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: Oct-18		
	Meter Read	Flow MGD	Reservoir CL ₂ Residual	Meter Read	Flow MGD	Reservoir CL ₂ Residual	Mallard CL ₂ Residual	Mandarian CL ₂ Residual	Total Volume MGD
1	1373.4004	0.2196	1.16	1151.006	0.0795	N/A	1.07	1.10	0.2991
2	1373.62	0.2049	0.87	1151.0855	0.0000	N/A	*	1.03	0.2049
3	1373.8249	0.2566	1.02	1151.0855	0.0735	N/A	1.18	1.21	0.3301
4	1374.0815	0.2473	1.08	1151.159	0.0745	N/A	*	*	0.3218
5	1374.3288	0.1558	1.19	1151.2335	0.0000	N/A	1.31	1.19	0.1558
6	1374.4846	0.3237	1.2	1151.2335	0.0735	N/A	*	*	0.3972
7	1374.8083	0.2294	1.3	1151.307	0.3915	N/A	*	*	0.6209
8	1375.0377	0.2179	1.16	1151.6985	0.1635	N/A	1.13	1.01	0.3814
9	1375.2556	0.2753	1.38	1151.862	0.1610	N/A	1.22	1.03	0.4363
10	1375.5309	0.2649	1.3	1152.023	0.2231	N/A	0.98	1.10	0.4880
11	1375.7958	0.2573	1.04	1152.2461	0.1899	N/A	1.24	0.84	0.4472
12	1376.0531	0.2398	1.26	1152.436	0.2730	N/A	0.93	1.16	0.5128
13	1376.2929	0.2659	1.5	1152.709	0.2730	N/A	*	*	0.5389
14	1376.5588	0.2574	1.41	1152.982	0.2736	N/A	*	*	0.5310
15	1376.8162	0.3004	1.4	1153.2556	0.2444	N/A	0.96	1.12	0.5448
16	1377.1166	0.1966	1.48	1153.5	0.2473	N/A	1.00	0.99	0.4439
17	1377.3132	0.3045	1.1	1153.7473	0.2385	N/A	1.41	1.06	0.5430
18	1377.6177	0.2568	0.99	1153.9858	0.2534	N/A	1.21	1.07	0.5102
19	1377.8745	0.2671	1.06	1154.2392	0.1108	N/A	0.97	0.93	0.3779
20	1378.1416	0.2559	1.06	1154.35	0.1110	N/A	*	*	0.3669
21	1378.3975	0.2712	1.12	1154.461	0.1136	N/A	*	*	0.3848
22	1378.6687	0.2488	0.93	1154.5746	0.1789	N/A	1.07	1.06	0.4277
23	1378.9175	0.2584	0.99	1154.7535	0.2225	N/A	1.07	0.83	0.4809
24	1379.1759	0.2428	0.92	1154.976	0.1976	N/A	1.00	0.91	0.4404
25	1379.4187	0.2325	0.98	1155.1736	0.1854	N/A	0.99	0.89	0.4179
26	1379.6512	0.2052	0.83	1155.359	0.2325	N/A	1.13	1.04	0.4377
27	1379.8564	0.2414	0.89	1155.5915	0.0000	N/A	*	*	0.2414
28	1380.0978	0.2519	1.17	1155.5915	0.0524	N/A	*	*	0.3043
29	1380.3497	0.4641	1.29	1155.6439	0.1771	N/A	1.19	0.77	0.6412
30	1380.8138	0.2925	1.20	1155.821	0.1800	N/A	*	*	0.4725
31	1381.1063	0.0000	1.27	1156.001	0.2527	N/A	*	*	0.2527
1	1381.1063			1156.2537					

Max	0.4641
Min	0.0000
Avg	0.2486
Total	7.7059

Max	0.3915
Min	0.0000
Avg	0.1693
Total	5.2477

Max	0.6412
Min	0.1558
Avg	0.4179
Total	12.9536

* No chlorine residuals taken.

WATER



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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 #: 18J1141 COC #: 192040
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Microbiological Parameters by APHA Standard Methods

Analyte	Result	Reporting Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
Mallard P/A (18J1141-01) Water Sampled: 10/17/18 07:56 Received: 10/17/18 13:00									
E. Coli	Absent	0.0	N/A	1	1808858	10/17/18	10/18/18	SM 9223	
Residual Chlorine	1.41	0.10	mg/L	"	"	10/17/18	10/17/18	SM 4500-CL-G	
Total Coliforms	Absent	0.0	N/A	"	"	10/17/18	10/18/18	SM 9223	

WATER



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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 #: 18J0284 COC #: 192028
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Microbiological Parameters by APHA Standard Methods

Analyte	Result	Reporting Limit	Units	Dilution	Batch	Prepared	Analyzed	Method	Notes
Mandarin P/A (18J0284-01) Water Sampled: 10/03/18 08:00 Received: 10/03/18 12:30									
E. Coli	Absent	0.0	N/A	1	1808411	10/03/18	10/04/18	SM 9223	
Residual Chlorine	1.20	0.10	mg/L	"	"	10/03/18	10/03/18	SM 4500-CL-G	
Total Coliforms	Absent	0.0	N/A	"	"	10/03/18	10/04/18	SM 9223	