### OPTIONAL ANNUAL REPORT TEMPLATE

**Drinking-Water System Number: Drinking-Water System Name: Drinking-Water System Owner: Drinking-Water System Category:**  260034918 **RKY Camp Well Supply RKY Camp** Small Non-Municipal Non-Residential

**Period being reported:** 

01/01/2019 - 12/31/2019

# Complete if your Category is Large Municipal Residential or Small Municipal Residential

**Does your Drinking-Water System serve** more than 10,000 people? Yes [ ] No [x]

Is your annual report available to the public at no charge on a web site on the Internet? Yes [x] No [ ]

**Location where Summary Report required** under O. Reg. 170/03 Schedule 22 will be available for inspection.

http://rkycamp.org/about/camp-facilitiesand-features.html

# Complete for all other Categories.

**Number of Designated Facilities served:** 

0

Did you provide a copy of your annual report to all Designated Facilities you serve?

Yes [ ] No [ x ]

**Number of Interested Authorities you** report to:

Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [ ] No [ x ]

Note: For the following tables below, additional rows or columns may be added or an appendix may be attached to the report

List all Drinking-Water Systems (if any), which receive all of their drinking water from your system:

<b>Drinking Water System Name</b>	Drinking Water System Number
RKY Camp Well Supply	260034918

Did you provide a copy of your annual report to all Drinking-Water System owners that are connected to you and to whom you provide all of its drinking water?

Yes [ ] No [ x ]

Indicate how you notified system users that your annual report is available, and is free of charge. [x] Public access/notice via the web [ ] Public access/notice via Government Office [ ] Public access/notice via a newspaper [ ] Public access/notice via Public Request [ ] Public access/notice via a Public Library [ ] Public access/notice via other method \_\_\_\_\_ **Describe your Drinking-Water System** See Appendices These locations are: The RKY Camp Homestead (Year Round) o Kitchen o Bathrooms Showers Abenaki (Director's Private Residence) (Year Round) Composters – Hand Washing (Spring, Summer, Fall) Camper Showers (Spring, Summer, Fall) Camper Hand washing Station/Trough - (Spring, Summer, Fall) Two Drinking Fountains o Archery Area - (Spring, Summer, Fall) o Nature Shed - (Spring, Summer, Fall) Wellness Centre/Cottage - (Spring, Summer, Fall)

- Wastewater is then diverted to the RKY Camp septic systems which are located:
- Homestead/Poti Law Bed
- Archery Field Bed
- Wellness Centre Bed

List all water treatment chemicals used over this reporting period				
- Javex 12				
Were any significant expenses incurred to?				
[] Install required equipment				
[ ] Repair required equipment				
[ ] Replace required equipment				
Please provide a brief description and a breakdown of monetary expenses incurred				

Provide details on the notices submitted in accordance with subsection 18(1) of the Safe Drinking-Water Act or section 16-4 of Schedule 16 of O.Reg.170/03 and reported to Spills Action Centre

AWQI#	<b>Incident Date</b>	Parameter	Result	Unit of Measure	<b>Corrective Action</b>	Corrective Action Date
					-	
					-	

Microbiological testing done under the Schedule 10, 11 or 12 of Regulation 170/03, during this reporting period.

	Number of Samples	Range of E.Coli Or Fecal Results (min #)-(max #)	Range of Total Coliform Results (min #)-(max #)	Number of HPC Samples	Range of HPC Results (min #)-(max #)		
Raw: RKY Can	np Well #1	l	1	J			
	12	0	0	12	0-103		
Distribution: Tr	rough			•	·		
	6	0	0	6	0 - 1		
Distribution: Ki	itchen						
	12	0	0	12	0 – 128		
Distribution: W	ellness Cer	itre					
	6	0	0	6	0-369		
Distribution: Co	ompoosters						
	5	0	0	5	0 -0		
Treated: Post U	V						
	4	N02/N03 - <0.1	N02/N03 - <0.10 - 0.48				

Operational testing done under Schedule 7, 8 or 9 of Regulation 170/03 during the

period covered by this Annual Report.

periou covercu b	y unis Ainiua	n Kepor 6	
	Number of Grab Samples	Range of Results (min #)-(max #)	Unit of Measure
Turbidity	N/A	See EER -2014	Pg 7/8
Chlorine Residual Distribution System (Kitchen)	153	0.36-0.90	mg/L
Chlorine Treated Water System (Trough - Seasonal)	71	0.38- 0.90	mg/L
Chlorine Treated Water (Compoosters – Seasonal)	5	0.40 – 0.65	mg/L

NOTE: For continuous monitors use 8760 as the number of samples.

Summary of additional testing and sampling carried out in accordance with the

requirement of an approval, order or other legal instrument.

Date of legal instrument issued	Parameter	Date Sampled	Result	Unit of Measure

Summary of Inorganic parameters tested during this reporting period or the most recent sample results

#### TREATED WATER – RKY KITCHEN

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Antimony	09/18/2018	See attached appendices for all results	mg/L	No
Arsenic	09/18/2018		mg/L	No
Barium	09/18/2018		mg/L	No
Boron	09/18/2018		mg/L	No
Cadmium	09/18/2018		mg/L	No
Chromium	09/18/2018		mg/L	No
*Lead	09/18/2018		mg/L	No
Mercury	09/18/2018		mg/L	No
Selenium	09/18/2018		mg/L	No
Sodium	10/10/2018		mg/L	Yes
Uranium	09/18/2018		mg/L	No
Fluoride	09/18/2018		mg/L	No

Nitrite	09/18/2018	mg/L	No	
Nitrate	09/18/2018	mg/L	No	

<sup>\*</sup>only for drinking water systems testing under Schedule 15.2; this includes large municipal non-residential systems, small municipal non-residential systems, non-municipal seasonal residential systems, large non-municipal non-residential systems, and small non-municipal non-residential systems

# Summary of lead testing under Schedule 15.1 during this reporting period

(applicable to the following drinking water systems; large municipal residential systems, small municipal residential systems, and non-municipal year-round residential systems)

<b>Location Type</b>	Number of Samples	Range of Lead Results (min#) – (max #)	Unit of Measure	Number of Exceedances
Plumbing	1	<0.001	mg/L	None
Distribution	1	<0.001	mg/L	None

# Summary of Organic parameters sampled during this reporting period or the most recent sample results

Parameter	Sample	Result	Unit of	Exceedance
	Date	Value	Measure	
Alachlor	09/18/2018		ug/L	No
Aldicarb	09/18/2018		ug/L	No
Aldrin + Dieldrin	09/18/2018		ug/L	No
Atrazine + N-dealkylated metobolites	09/18/2018		ug/L	No
Azinphos-methyl	09/18/2018		ug/L	No
Bendiocarb	09/18/2018		ug/L	No
Benzene	09/18/2018		ug/L	No
Benzo(a)pyrene	09/18/2018		ug/L	No
Bromoxynil	09/18/2018		ug/L	No
Carbaryl	09/18/2018		ug/L	No
Carbofuran	09/18/2018		ug/L	No
Carbon Tetrachloride	09/18/2018		ug/L	No
Chlordane (Total)	09/18/2018		ug/L	No
Chlorpyrifos	09/18/2018		ug/L	No
Cyanazine	09/18/2018		ug/L	No
Diazinon	09/18/2018		ug/L	No
Dicamba	09/18/2018		ug/L	No
1,2-Dichlorobenzene	09/18/2018		ug/L	No
1,4-Dichlorobenzene	09/18/2018		ug/L	No
Dichlorodiphenyltrichloroethane (DDT) + metabolites	09/18/2018		ug/L	No
1,2-Dichloroethane	09/18/2018		ug/L	No
1,1-Dichloroethylene (vinylidene chloride)	09/18/2018		ug/L	No
Dichloromethane	09/18/2018		ug/L	No
2-4 Dichlorophenol	09/18/2018		ug/L	No
2,4-Dichlorophenoxy acetic acid (2,4-D)	09/18/2018		ug/L	No

# Ontario Drinking-Water Systems Regulation O. Reg. 170/03

Diclofop-methyl	09/18/2018	ug/L	No
Dimethoate	09/18/2018	ug/L	No
Dinoseb	09/18/2018	ug/L	No
Diquat	09/18/2018	ug/L	No
Diuron	09/18/2018	ug/L	No
Glyphosate	09/18/2018	ug/L	No
Heptachlor + Heptachlor Epoxide	09/18/2018	ug/L	No
Lindane (Total)	09/18/2018	ug/L	No
Malathion	09/18/2018	ug/L	No
Methoxychlor	09/18/2018	ug/L	No
Metolachlor	09/18/2018	ug/L	No
Metribuzin	09/18/2018	ug/L	No
Monochlorobenzene	09/18/2018	ug/L	No
Paraquat	09/18/2018	ug/L	No
Parathion	09/18/2018	ug/L	No
Pentachlorophenol	09/18/2018	ug/L	No
Phorate	09/18/2018	ug/L	No
Picloram	09/18/2018	ug/L	No
Polychlorinated Biphenyls(PCB)	09/18/2018	ug/L	No
Prometryne	09/18/2018	ug/L	No
Simazine	09/18/2018	ug/L	No
THM	09/18/2018	-	-
(NOTE: show latest annual average)	00/10/2010		
Temephos	09/18/2018	ug/L	No
Terbufos	09/18/2018	ug/L	No
Tetrachloroethylene	09/18/2018	ug/L	No
2,3,4,6-Tetrachlorophenol	09/18/2018	ug/L	No
Triallate	09/18/2018	ug/L	No
Trichloroethylene	09/18/2018	ug/L	No
2,4,6-Trichlorophenol	09/18/2018	ug/L	No
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)	09/18/2018	ug/L	No
Trifluralin	09/18/2018	ug/L	No
Vinyl Chloride	09/18/2018	ug/L	No

List any Inorganic or Organic parameter(s) that exceeded half the standard prescribed in Schedule 2 of Ontario Drinking Water Quality Standards.

Parameter	Result Value	Unit of Measure	Date of Sample
N/A in 2018			
N/A in 2018			