We're pleased to present to you this year's Annual Water Quality Report. This report is designed to inform you about the quality water and services we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water. Our water source is groundwater. Our three wells draw from the Frederica Aquifer.

The Department of Natural Resources and Environmental Control in conjunction with the Division of Public Health has conducted a source water assessment. If you are interested in reviewing the assessment, please contact Dustan Russum @ 302.853.5203. Or go on-line @ http://delawareresourcewater.org/assessments/. Overall, the drinking water supply system exceeds standards to metals, has a moderate susceptibility to nutrients, a low susceptibility to petroleum hydrocarbons, pesticides, PCBs, other organics and other inorganics, and very low susceptibility to pathogens.

If you have any questions about this report or concerning your water utility, please contact Dustan Russum @ 302.853.5203. 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. They are held on the second Monday of each month @ 6:00p.m at Town Hall, 3 East Walnut Street.

Public Health, Office of Drinking Water and the Town of Magnolia routinely monitor for constituents in your drinking water according to Federal and State laws. This table shows the results of our monitoring for the period of January 1st to December 31st, 2017.

In this table you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms we've provided the following definitions:

Non-Detects (ND) - laboratory analysis indicates that the constituent is not present.

Parts per million (ppm) or Milligrams per liter (mg/l) - one part per million corresponds to one minute in two years or a single penny in $10,000. Or 1 drop in 13 gallons.

Parts per billion (ppb) or Micrograms per liter - one part per billion corresponds to one minute in 2,000 years, or a single penny in $10,000,000. Or 1 drop in 13,000 gallons.

Action Level - the concentration of a contaminant which if exceeded triggers treatment or other requirements which a water system must follow.

Maximum Contaminant Level (MCL) - The “Maximum Allowed” (MCL) is 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) - The “Goal” (MCLG) is 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.

<table>
<thead>
<tr>
<th>TEST RESULTS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Contaminant</td>
</tr>
<tr>
<td>--------------</td>
</tr>
<tr>
<td><strong>DISINFECTANTS</strong></td>
</tr>
<tr>
<td>Chlorine (Cl₂)</td>
</tr>
<tr>
<td><strong>Inorganic Contaminants</strong></td>
</tr>
<tr>
<td>Fluoride</td>
</tr>
<tr>
<td><strong>Lead and Copper</strong></td>
</tr>
<tr>
<td>Copper (0 sites exceeded the AL for Copper)</td>
</tr>
<tr>
<td>Lead (0 sites exceeded the AL for Lead)</td>
</tr>
<tr>
<td><strong>Secondary Standards</strong></td>
</tr>
<tr>
<td>Iron (Fe)</td>
</tr>
<tr>
<td>Sodium (Na)</td>
</tr>
<tr>
<td>Alkalinity (Alk)</td>
</tr>
<tr>
<td>pH</td>
</tr>
<tr>
<td>Chloride (Cl)</td>
</tr>
<tr>
<td>Sulfate</td>
</tr>
</tbody>
</table>

All other contaminants were ND in compliance with the Safe Drinking Water Act.
As you can see by the table, our system had no violations. We’re proud that your drinking water meets or exceeds all Federal and State requirements. We have learned through our monitoring and testing that some constituents have been detected. The EPA has determined that level in your water is below the MCL.

MCL’s are set at very stringent levels. To understand the possible health effects described for many regulated constituents, a person would have to drink 2 liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect. Thank you for allowing us to continue providing your family with clean, quality water this year.

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and, in some cases, radioactive material, and 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, and wildlife.
- Inorganic contaminants, such as salts and metals, which can be naturally occurring or result from storm water runoff, wastewater discharges, oil and gas production, mining, or farming.
- Pesticides and herbicides which may come from a variety of sources such as agriculture, storm water runoff, and residential uses.
- Organic chemical contaminants, including synthetic and volatile chemicals, which are by-products of industrial processes and petroleum production, and can, also, come from gas stations, storm water 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 insure tap water is safe to drink, EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations established limits for contaminants in bottled water, which must provide the same protection for public health.

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. 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.

Thank you for allowing us to continue providing your family with clean, quality water this year. In order to maintain a safe and dependable water supply we sometimes need to make improvements that will benefit all of our customers. These improvements are sometimes reflected as rate structure adjustments. Thank you for understanding.

If present, elevated lead levels 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. The Town of Magnolia is 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
www.epa.gov/safewater/lead.

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.
These people should seek advice about drinking water from their health care providers.
EPA/CDC guidelines on appropriate means to lessen the risk of infection by cryptosporidium
and other microbiological contaminants are available from the Safe Drinking Water Hotline
(800-426-4791).

Please call our office if you have questions.
Certification of Delivery for the Consumer Confidence Report (CCR)

Deliver the CCR by **JULY 1st** to the **Office of Drinking Water (ODW)**, your consumers, and the **Public Advocate**. Deliver this completed form by July 10th to ODW and the Public Advocate:

Office of Drinking Water  
Attn.: CCR Compliance  
43 S. DuPont Hwy.  
Dover, DE 19901  
(302) 741-8594  
Keith.Harrison@state.de.us

Public Advocate  
Carvel State Office Building  
4th Floor 820 N. French Street  
Wilmington, DE 19801  
(302) 577-5077  
Public.advocate@state.de.us

Note: The preferred method of delivery to the Public Advocate is email delivery. ODW does not track delivery to the Public Advocate.

Instructions for CCR and certification delivery to ODW:
- Email delivery to Keith.Harrison@state.de.us is preferred.
- A confirmation of receipt will be emailed to you.
- Put the water system’s name in the subject line.
- Use only one form of delivery to ODW, do not mail a hard copy if you choose email delivery.
- The attachment must be a PDF or JPEG file. Word files cannot be accepted due to virus vulnerability.

Water System Name: **Town of Magnolia**

Water System ID: **DE016210**

Certification Statement: I hereby confirm that the Consumer Confidence Report for the community water system named above has been distributed to customers or appropriate notices of availability have been given.

Certified by (print name): **Dustin L. Russell**

Certified by (signature): 

Telephone: **302-883-5203**  
Date CCR distributed: **6-1-18**

Name and email or phone number of person that produced the CCR: 

**Dustin L. Russell**  
nrssunw@gmail.com

CCR was directly delivered by (check one only):

☐ Mail

☐ Hand-delivery door-to-door

☐ Systems serving fewer than 500 people: CCR posted in a public place (the system’s office) and notified customers of the posting and will provide a CCR upon request.

☐ Systems serving more than 500 people: CCR was published in a local paper.

☐ For electronic distribution, write the direct web address of the CCR that you provided to your consumers (see reverse side for electronic delivery requirements):
  
  http://

☐ Good faith efforts were made to reach all nonbill-paying customers.

☐ Other form of delivery (explain):