PWSID ME0090610

Gardiner Water District Hayford Heights System

2025 Consumer Confidence Report

General Information

Water System Contact Name: Zachary Lovely

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Report Covering Calendar Year: Jan 1 - Dec 31, 2025

Upcoming Regularly Scheduled Meeting(s): June 10, 2026 @ 4:00 pm

Source Water Information

Description of Water Source:

Wells: 2 Consecutive Connections: 2 (Cconn W/ Augusta, Cconn W/ Gardiner)

Water Treatment & Filtration Information:

Sodium Hypochlorite and Polyphosphate

Source Water Assessment:

The sources of drinking water include rivers, lakes, ponds, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and radioactive material and can pick up substances resulting from human or animal activity. The Maine Drinking Water Program (DWP) has evaluated all public water supplies as part of the Source Water Assessment Program (SWAP). The assessments included geology, hydrology, land uses, water testing information, and the extent of land ownership or protection by local ordinance to see how likely our drinking water source is to being contaminated by human activities in the future. Assessment results are available at town offices and public water systems.

Definitions:

Action Level (AL): The concentration of a contaminant that, if exceeded, triggers treatment or other requirements that a water system must follow.

Locational Running Annual Average (LRAA): A 12 month rolling average of all monthly or quarterly samples at specific sampling locations. Calculation of the RAA may contain data from the previous year.

Maximum Contaminant Level or MCL: 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 or MCLG: 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.

Running Annual Average (RAA): A 12 month rolling average of all monthly or quarterly samples at all locations. Calculation of the RAA may contain data from the previous year.

Secondary Maximum Contaminant Level (SMCL): Non-mandatory water quality standards.

Treatment Technique (TT): A required process intended to reduce the level of a contaminant in drinking water.

Units: ppm = parts per million or milligrams per liter (mg/L). pCi/L = picocuries per liter (a measure of radioactivity).
ppb = parts per billion or micrograms per liter (µg/L). ppt = parts per trillion or nanograms per liter (ng/L) MFL = million fibers per liter. pos = positive samples.

Water Test Results

Contaminant	*Date*	*Results*	*MCL*	*MCLG Possible Sources of Contamination*
Microbiological				
COLIFORM (TCR) (9)	2025	**0 pos**	1 pos/mo or 5%	0 pos Naturally present in the environment.
Inorganics				
ARSENIC (1)	8/29/2023	**0.92 ppb**	10 ppb	0 ppb Erosion of natural deposits. Runoff from orchards, glass and electronics production wastes.
BARIUM	8/29/2023	**0.016 ppm**	2 ppm	2 ppm Discharge of drilling wastes. Discharge from metal refineries. Erosion of natural deposits.
NITRATE (6)	5/20/2025	**1.11 ppm**	10 ppm	10 ppm Runoff from fertilizer use. Leaching from septic tanks, sewage. Erosion of natural deposits.
Synthetics				
TOTAL PFAS (6 regulated) (7)	12/23/2025	**30.85 ppt**	20 ppt	0 ppt Man-made chemicals in a wide variety of consumer products and industrial applications. Stain- and water-resistant fabrics, carpeting, non-stick cookware, cleaning products and paints, Class B Firefighting foam (AFFF) foam and industrial processes.
Radionuclides				
COMBINED URANIUM	12/19/2024	**5.4 ppb**	30 ppb	0 ppb Erosion of natural deposits.
GROSS ALPHA (4)	12/19/2024	**3.58 pCi/l**	15 pCi/l	0 pCi/l Erosion of natural deposits.
Lead/Copper				
COPPER 90TH% VALUE (5)	1/1/2021 - 12/31/2023	**0.88 ppm** **Range (0.29-1.1 ppm)**	AL = 1.3 ppm	1.3 ppm Corrosion of household plumbing systems.
Number of sampling sites exceeding the action level: **0**				
LEAD 90TH% VALUE (5)	1/1/2021 - 12/31/2023	**1.6 ppb** **Range (0.56-2 ppb)**	AL = 15 ppb	0 ppb Corrosion of household plumbing systems.
Number of sampling sites exceeding the action level: **0**		Complete lead tap sampling data are available upon request		
Disinfectants and Disinfection Byproducts				
DISTRIBUTION SYSTEM				
TOTAL HALOACETIC ACIDS (HAA5) (10)	9/25/2025	**1 ppb**	60 ppb	0 ppb By-product of drinking water chlorination.
TOTAL TRIHALOMETHANE (TTHM) (10)	9/25/2025	**6.7 ppb**	80 ppb	0 ppb By-product of drinking water chlorination.
Chlorine Residual (Add chlorine residual information)				
CHLORINE RESIDUAL	**Range (__0.7__ - _1.2__ ppm)**		MRDL=4 ppm	MRDLG= 4 ppm By-product of drinking water chlorination.

Notes:

1) Arsenic: While your drinking water may meet EPA's standard for Arsenic, if it contains between 5 to 10 ppb you should know that the standard balances the current understanding of arsenic's possible health effects against the costs of removing it from drinking water. EPA continues to research the health effects of low levels of arsenic, which is a mineral known to cause cancer in humans at high concentrations and is linked to other health effects such as skin damage and circulatory problems. Quarterly compliance is based on running annual average.
2) E. coli: E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Human pathogens in these wastes can cause short-term effects, such as diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a greater health risk for infants, young children, the elderly, and people with severely-compromised immune systems.
3) Fluoride: For those systems that fluoridate, fluoride levels must be maintained between 0.5 to 1.2 ppm. The optimum level is 0.7 ppm.
4) Gross Alpha: Action level over 5 pCi/L requires testing for Radium 226 and 228. Action level over 15 pCi/L requires testing for Uranium.
Compliance is based on Gross Alpha results minus Uranium results = Net Gross Alpha.
5) Lead/Copper: Action levels (AL) are measured at consumer's tap. 90% of the tests must be equal to or below the action level.
6) Nitrate: Nitrate in drinking water at levels above 10 ppm is a health risk for infants of less than six months of age. High nitrate levels in drinking water can cause blue baby syndrome. Nitrate levels may rise quickly for short periods of time because of rainfall or agricultural activity. If you are caring for an infant you should ask advice from your health provider.
7) PFAS: The degree of risk depends on the level of chemicals and duration of exposure. Laboratory studies of animals exposed to high doses of PFAS have shown numerous negative effects such as issues with reproduction, growth and development, thyroid function, immune system, neurology, as well as injury to the liver. Research is still relatively new, and more needs to be done to fully assess exposure effects on the human body.

8) Radon: The State of Maine adopted a Maximum Exposure Guideline (MEG) for Radon in drinking water at 4000 pCi/L, effective 1/1/07. If Radon exceeds the MEG in water, treatment is recommended. It is also advisable to test indoor air for Radon.
9) Total Coliform Bacteria: Reported as the highest monthly number of positive samples, for water systems that take less than 40 samples per month.
10) TTHM/HAA5: Total Trihalomethanes and Haloacetic Acids (TTHM and HAA5) are formed as a by-product of drinking water chlorination. This chemical reaction occurs when chlorine combines with naturally occurring organic matter in water. Compliance is based on LRAA.
11) Turbidity: Turbidity has no health effects. However, turbidity can interfere with disinfection and provide a medium for microbial growth. Turbidity may indicate the presence of disease-causing organisms. These organisms include bacteria, viruses, and parasites that can cause symptoms such as nausea, cramps, diarrhea and associated headaches.

All other regulated drinking water contaminants were below detection levels.

Secondary Contaminants (You are not required to list detects for secondary contaminants, but this information, particularly sodium levels, might be useful to your customers. The decision to supply this information in your CCR is up to you.)

SULFATE	11 ppm	8/29/2023
MAGNESIUM	4.3 ppm	8/29/2023
SODIUM	18 ppm	8/29/2023
MANGANESE	0.058 ppm	8/29/2023
CHLORIDE	38 ppm	8/29/2023
IRON	0.24 ppm	8/29/2023

Health Information

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. 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 operations, and wildlife.

Inorganic contaminants, such as salts and metals, which can be naturally occurring or result from urban stormwater runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.

Pesticides and herbicides, which may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses.

Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production and can also come from gas stations, urban runoff, and septic systems.

Radioactive Contaminants, which can be naturally-occurring or be the result of oil and gas production and mining activities.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immunocompromised 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 microbial contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791) or at the following link: **https://www.epa.gov/ccr/forms/contact-us-about-consumer-confidence-reports**

Lead and Copper

Lead 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. Your public water system is responsible for providing high quality drinking water and removing lead pipes, but cannot control the variety of materials used in plumbing components in your home. You share the responsibility for protecting yourself and your family from the lead in your home plumbing. You can take responsibility by identifying and removing lead materials within your home plumbing and taking steps to reduce your family's risk. Before drinking tap water, flush your pipes for several minutes by running your tap, taking a shower, doing laundry or a load of dishes. You can also use a filter certified by an American National Standards Institute accredited certifier to reduce lead in drinking water. If you are concerned about lead in your water and wish to have your water tested, contact your public water system. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available at: **http://www.epa.gov/safewater/lead**

Our public water system completed a Lead Service Line Inventory (LSLI) as required by the Revised Lead and Copper Rule. It is publicly accessible by either contacting your system via phone or email, picking up or viewing a copy at a physical address, or via the website link provided (must link directly to report). Our system is making the inventory available using this method: https://www.hallowellwaterdistrict.com/lead-service-line-inventory

Violations

Violation Period	Violation Type
1/1/2025 - 12/31/2025	SE Violation - STATE EXCEEDANCE TOTAL PFOA AND PFOS TREAT PT 2

PFAS Exceedance: In 2025, our water system exceeded the State total PFAS standard of 20 ppt (parts per trillion). Our water system has been placed on quarterly sampling for PFAS. Results of subsequent PFAS testing will be made available. While research on PFAS exposure is still relatively new, people exposed to high levels of PFAS could experience health effects linked to reproduction and development, thyroid function as well as immune and neurologic issues. We are currently working to address this issue.

5/15/26 - 5/22/26	34 Violation - MONITOR GWR TRIGGERED/ADDITONAL, MAJOR E. COLI DIST SYS

Hallowell Water District is required to monitor our drinking water for specific contaminants following a positive total coliform bacteria result. during 2026, we failed to collect the necessary source water Groundwater Rule samples as required by federal regulations. Upon notice of a positive coliform indication, the Hallowell Water District collected five (5) samples, three (3) at point of use and two (2) raw water samples from Well #1 all samples indicated negative results for coliform. The violation occurred due to the double sampling at Well #1 versus standard practice of a sample from one for each raw water source, Well #1 and Well # 2. Upon MDWP notification of non-compliance, the district completed two (2) samples of raw water at well #2 and both Samples also indicated negative presence of coliform.

Waiver Information (to be included in the CCR for systems that were granted a waiver)

We completed all Synthetic Organic Compounds testing in 2025

Please share this information with anyone who drinks this water (or their guardians), especially those who may not have received this report directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this report in a public place or distributing copies by hand, mail, email, or another method.