

Water Sample Range Report

Island Health

Facility Name: TOWN OF PORT MCNEILL WATER SYSTEM
Facility Type: 301-10000 (DWT)
Date Range: Jan 1 2020 to Dec 31 2020
Date Created: Jan 26 2021

Sampling Site	Date Collected	Total Coliform	E. Coli	Fecal Coliform
<u>550 Southeast Main Road, Broughton Straight Campsite, Dist. site, Monthly</u>				
	07-Jan-2020	L1	L1	
	21-Jan-2020	L1	L1	
	11-Feb-2020 12:10:00 PM	LT1	LT1	
	03-Mar-2020 11:15:00 AM	LT1	LT1	
	14-Apr-2020 9:35:00 AM	LT1	LT1	
	11-May-2020 11:10:00 AM	LT1	LT1	
	01-Jun-2020 11:20:00 AM	LT1	LT1	
	20-Jul-2020 11:30:00 AM	LT1	LT1	
	17-Aug-2020 11:23:00 AM	1	LT1	
	31-Aug-2020 10:15:00 AM	LT1	LT1	
	21-Sep-2020 10:28:00 AM	LT1	LT1	
	19-Oct-2020 11:35:00 AM	LT1	LT1	
	09-Nov-2020 11:45:00 AM	LT1	LT1	
	14-Dec-2020 9:30:00 AM	LT1	LT1	
	Total Positive:	1	0	0

3255 Mine Road, Sewer Plant, Dist. site, Monthly

	07-Jan-2020	L1	L1
	21-Jan-2020	L1	L1
	11-Feb-2020 10:00:00 AM	LT1	LT1
	03-Mar-2020 10:45:00 AM	LT1	LT1
	14-Apr-2020 8:30:00	LT1	LT1

AM			
11-May-2020 9:08:00 AM	LT1	LT1	
01-Jun-2020 9:15:00 AM	LT1	LT1	
06-Jul-2020 9:20:00 AM	LT1	LT1	
17-Aug-2020 11:40:00 AM	LT1	LT1	
21-Sep-2020 9:20:00 AM	LT1	LT1	
13-Oct-2020 9:26:00 AM	LT1	LT1	
09-Nov-2020 8:30:00 AM	LT1	LT1	
14-Dec-2020 8:30:00 AM	<u>LT1</u>	<u>LT1</u>	
Total Positive:	0	0	0

Mine Road,
Reservoir Flow
Down Valve, Dist.
site, Monthly

07-Jan-2020	L1	L1	
21-Jan-2020	L1	L1	
11-Feb-2020 11:00:00 AM	LT1	LT1	
03-Mar-2020 11:40:00 AM	LT1	LT1	
14-Apr-2020 9:45:00 AM	LT1	LT1	
11-May-2020 10:05:00 AM	LT1	LT1	
01-Jun-2020 9:50:00 AM	LT1	LT1	
06-Jul-2020 9:35:00 AM	LT1	LT1	
10-Aug-2020 11:20:00 AM	LT1	LT1	
21-Sep-2020 10:55:00 AM	LT1	LT1	
05-Oct-2020 11:15:00 AM	LT1	LT1	
09-Nov-2020 11:15:00 AM	LT1	LT1	
14-Dec-2020 9:50:00 AM	<u>LT1</u>	<u>LT1</u>	
Total Positive:	0	0	0

Port McNeill, Port
McNeill Harbour
Office, Dist. site,
Monthly

21-Jan-2020	L1	L1	
11-Feb-2020	LT1	LT1	
10:20:00 AM			
03-Mar-2020	LT1	LT1	
11:00:00 AM			
17-Mar-2020	LT1	LT1	
11:45:00 AM			
14-Apr-2020 9:52:00 AM	LT1	LT1	
11-May-2020	15	LT1	
10:45:00 AM			
19-May-2020	LT1	LT1	
10:07:00 AM			
01-Jun-2020	LT1	LT1	
10:50:00 AM			
20-Jul-2020	LT1	LT1	
11:50:00 AM			
10-Aug-2020	LT1	LT1	
11:35:00 AM			
21-Sep-2020	LT1	LT1	
10:40:00 AM			
05-Oct-2020	LT1	LT1	
11:20:00 AM			
09-Nov-2020	LT1	LT1	
11:30:00 AM			
14-Dec-2020 9:15:00 AM	<u>LT1</u>	<u>LT1</u>	
Total Positive:	1	0	0

Across Well #3
along Campbell
Way, Rotary Trail
Interpretive Sign,
Dist. site, No
Regular Sampling

20-Apr-2020 9:40:00 AM	<u>LT1</u>	<u>LT1</u>	
Total Positive:	0	0	0

Result Values: E - estimated L - less than G - greater than

Interpreting Sample Reports

In VIHA, the results of drinking water sampling are reported using the following coding system:

L1 Less than 1 (no detectable bacteria) - Meaning: No bacteria present

OG Overgrown - Meaning: Too many background bacteria to give an accurate count

EST Estimated Count

and

A Sample not tested; Too long in transit

C Sample leaked/broken in transit

D Sample not tested; No collection date given

T Sample submitted unsatisfactory. Exceeded 30 hours holding time, please resample.

NS No sample received with requisition

Samples that contain total coliform:	2	3.64% of total
Samples that contain e. coli:	0	0.00% of total
Samples that contain fecal coliform:	0	0.00% of total
Number of positive samples in last 30 days:	0/0	
Total number of samples:	55	

Comments:



Environmental Health Officer
 Jun 2 2021

FOR FURTHER INFORMATION PLEASE CALL: Bergsma, Eric (250) 902-6071 Port Hardy Office

Operator

Town of Port McNeill
 Box 728
 Port McNeill, BC
 V0N 2R0

(250) 956-3111

Water Sample Range Report

Island Health

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Facility Type: 301-10000 (DWT)
Date Range: Jan 1 2020 to Dec 31 2020
Date Created: Jan 26 2021

Sampling Site	Date Collected	Total Coliform	E. Coli	Fecal Coliform
<u>Port McNeill, Well</u>				
<u>#2, Source site,</u>				
<u>Weekly</u>				
	07-Jan-2020	L1	L1	
	14-Jan-2020	L1	L1	
	21-Jan-2020	L1	L1	
	28-Jan-2020 8:43:00 AM	LT1	LT1	
	04-Feb-2020 11:30:00 AM	LT1	LT1	
	11-Feb-2020 11:55:00 AM	LT1	LT1	
	25-Feb-2020 9:30:00 AM	LT1	LT1	
	03-Mar-2020 11:20:00 AM	LT1	LT1	
	10-Mar-2020 9:30:00 AM	LT1	LT1	
	17-Mar-2020 11:30:00 AM	LT1	LT1	
	24-Mar-2020 9:15:00 AM	LT1	LT1	
	14-Apr-2020 9:35:00 AM	LT1	LT1	
	20-Apr-2020 9:30:00 AM	LT1	LT1	
	27-Apr-2020 9:45:00 AM	LT1	LT1	
	04-May-2020 10:05:00 AM	LT1	LT1	
	11-May-2020 10:25:00 AM	LT1	LT1	
	19-May-2020 9:30:00 AM	LT1	LT1	
	25-May-2020 11:10:00 AM	LT1	LT1	
	01-Jun-2020 10:15:00 AM	LT1	LT1	
	08-Jun-2020 9:50:00 AM	LT1	LT1	
	15-Jun-2020 11:00:00 AM	LT1	LT1	
	22-Jun-2020	LT1	LT1	

11:00:00 AM		
29-Jun-2020 9:00:00 AM	LT1	LT1
06-Jul-2020 11:00:00 AM	LT1	LT1
13-Jul-2020 9:45:00 AM	LT1	LT1
20-Jul-2020 10:50:00 AM	LT1	LT1
04-Aug-2020 11:40:00 AM	LT1	LT1
10-Aug-2020 9:40:00 AM	LT1	LT1
17-Aug-2020 11:10:00 AM	LT1	LT1
24-Aug-2020 10:00:00 AM	LT1	LT1
31-Aug-2020 9:30:00 AM	LT1	LT1
08-Sep-2020 8:55:00 AM	LT1	LT1
21-Sep-2020 10:12:00 AM	LT1	LT1
28-Sep-2020 9:15:00 AM	LT1	LT1
05-Oct-2020 11:00:00 AM	LT1	LT1
13-Oct-2020 9:40:00 AM	LT1	LT1
19-Oct-2020 11:20:00 AM	LT1	LT1
26-Oct-2020 11:00:00 AM	LT1	LT1
02-Nov-2020 9:45:00 AM	LT1	LT1
09-Nov-2020 11:00:00 AM	LT1	LT1
16-Nov-2020 11:00:00 AM	LT1	LT1
23-Nov-2020 8:28:00 AM	LT1	LT1
30-Nov-2020 10:45:00 AM	REJCT DELAY3	REJCT DELAY3
07-Dec-2020 10:51:00 AM	LT1	LT1
14-Dec-2020 11:00:00 AM	<u>LT1</u>	<u>LT1</u>
Total Positive:	0	0

Result Values: **E - estimated** **L - less than** **G - greater than**

Interpreting Sample Reports

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EST Estimated Count

and

A Sample not tested; Too long in transit

C Sample leaked/broken in transit

D Sample not tested; No collection date given

T Sample submitted unsatisfactory. Exceeded 30 hours holding time, please resample.

NS No sample received with requisition

Samples that contain total coliform:	0	0.00% of total
Samples that contain e. coli:	0	0.00% of total
Samples that contain fecal coliform:	0	0.00% of total
Number of positive samples in last 30 days:	0/0	
Total number of samples:	45	

Comments:



Environmental Health Officer
 Jun 2 2021

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Operator

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Island Health

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Date Range: Jan 1 2020 to Dec 31 2020
Date Created: Jan 26 2021

Sampling Site	Date Collected	Total Coliform	E. Coli	Fecal Coliform
<u>Port McNeill, Well</u>				
<u>#3, Source site,</u>				
<u>Semi-monthly</u>				
	07-Jan-2020	L1	L1	
	21-Jan-2020	L1	L1	
	11-Feb-2020	LT1	LT1	
	11:25:00 AM			
	03-Mar-2020	LT1	LT1	
	10:55:00 AM			
	17-Mar-2020 9:41:00 AM	LT1	LT1	
	14-Apr-2020 9:00:00 AM	LT1	LT1	
	20-Apr-2020 9:50:00 AM	LT1	LT1	
	11-May-2020	LT1	LT1	
	9:20:00 AM			
	25-May-2020	LT1	LT1	
	10:19:00 AM			
	01-Jun-2020 9:30:00 AM	LT1	LT1	
	15-Jun-2020 9:01:00 AM	LT1	LT1	
	06-Jul-2020 9:45:00 AM	LT1	LT1	
	20-Jul-2020 9:27:00 AM	LT1	LT1	
	04-Aug-2020	LT1	LT1	
	10:40:00 AM			
	17-Aug-2020	LT1	LT1	
	10:30:00 AM			
	21-Sep-2020 9:43:00 AM	LT1	LT1	
	28-Sep-2020 8:45:00 AM	LT1	LT1	
	05-Oct-2020	LT1	LT1	
	10:10:00 AM			
	19-Oct-2020 9:45:00 AM	LT1	LT1	
	02-Nov-2020 9:14:00 AM	LT1	LT1	
	09-Nov-2020 9:47:00 AM	LT1	LT1	

07-Dec-2020 10:00:00 AM	LT1	LT1	
14-Dec-2020 11:10:00 AM	<u>LT1</u>	<u>LT1</u>	
Total Positive:	0	0	0

Result Values: **E - estimated** **L - less than** **G - greater than**

Interpreting Sample Reports

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EST Estimated Count

and

A Sample not tested; Too long in transit

C Sample leaked/broken in transit


D Sample not tested; No collection date given

T Sample submitted unsatisfactory. Exceeded 30 hours holding time, please resample.

NS No sample received with requisition

Samples that contain total coliform:	0	0.00% of total
Samples that contain e. coli:	0	0.00% of total
Samples that contain fecal coliform:	0	0.00% of total
Number of positive samples in last 30 days:	0/0	
Total number of samples:	23	

Comments:


Environmental Health Officer
Jun 2 2021

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Operator

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V0N 2R0

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Island Health

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Date Range: Jan 1 2020 to Dec 31 2020
Date Created: Jan 26 2021

Sampling Site	Date Collected	Total Coliform	E. Coli	Fecal Coliform
<u>Port McNeill, Well</u>				
<u>#5, Source site,</u>				
<u>Semi-monthly</u>				
	07-Jan-2020	L1	L1	
	21-Jan-2020	L1	L1	
	11-Feb-2020	LT1	LT1	
	11:40:00 AM			
	03-Mar-2020	LT1	LT1	
	11:30:00 AM			
	17-Mar-2020	LT1	LT1	
	11:16:00 AM			
	14-Apr-2020 9:25:00 AM	LT1	LT1	
	20-Apr-2020	LT1	LT1	
	10:30:00 AM			
	11-May-2020	LT1	LT1	
	9:45:00 AM			
	25-May-2020	LT1	LT1	
	10:45:00 AM			
	01-Jun-2020	LT1	LT1	
	10:35:00 AM			
	15-Jun-2020	LT1	LT1	
	11:20:00 AM			
	06-Jul-2020	LT1	LT1	
	10:31:00 AM			
	20-Jul-2020	LT1	LT1	
	10:33:00 AM			
	04-Aug-2020	LT1	LT1	
	11:15:00 AM			
	24-Aug-2020 9:30:00 AM	LT1	LT1	
	21-Sep-2020 9:53:00 AM	LT1	LT1	
	28-Sep-2020 9:00:00 AM	LT1	LT1	
	05-Oct-2020	LT1	LT1	
	10:30:00 AM			
	19-Oct-2020	LT1	LT1	
	11:05:00 AM			
	02-Nov-2020 9:30:00 AM	LT1	LT1	
	09-Nov-2020	LT1	LT1	
	10:40:00 AM			

07-Dec-2020 10:35:00 AM	LT1	LT1	
14-Dec-2020 11:45:00 AM	<u>LT1</u>	<u>LT1</u>	
Total Positive:	0	0	0

Result Values: **E - estimated** **L - less than** **G - greater than**

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NS No sample received with requisition

Samples that contain total coliform:	0	0.00% of total
Samples that contain e. coli:	0	0.00% of total
Samples that contain fecal coliform:	0	0.00% of total
Number of positive samples in last 30 days:	0/0	
Total number of samples:	23	

Comments:



Environmental Health Officer
Jun 2 2021

FOR FURTHER INFORMATION PLEASE CALL: Bergsma, Eric (250) 902-6071 Port Hardy Office

Operator

Town of Port McNeill
Box 728
Port McNeill, BC
V0N 2R0

(250) 956-3111



DRINKING WATER SYSTEM ANNUAL REPORT

Reporting Period: January 1st to December 31st, (year) 2020.

Water System The Town of Port McNeill Water System

Water System Owner The town of Port McNeill.

Primary Contact Name (Operator or Manager) Julian, Allen

Phone Number (Operator or Manager) 250.956.3111 / 250.974.8337

E-mail (Operator or Manager) pmworks@portmcneill.ca

DESCRIBE YOUR WATER SUPPLY SYSTEM

What is the Source(s) of Raw Water?

- Deep Well (checked), Shallow Well, Surface Water, Other

If other, specify details:

Does the Drinking Water System have Primary Disinfection?

- Chlorination, Ultraviolet Light, Ozone, Other, Yes, No (checked)

If other, specify details:

Does the Drinking Water System have Secondary Disinfection?

- Chlorination, Other, Yes, No (checked)

If other, specify details:

Does the Drinking Water System have Filtration?

- Yes, No (checked)

Check all boxes that apply

- Cartridge Filter(s), Carbon Filter, Sand Filtration, Reverse Osmosis, Other

If other, specify details:

PUBLIC REPORTING

Emergency Response & Contingency Plan (ERCP)

Is your ERCP up to Date? Yes (checked), No

How do you Inform the System Users of the ERCP?

- Hand Delivered, Bulletin Board, Newspaper, Utility Bill Insert, Website (checked), Other (specify details)

Drinking Water System Annual Report

How do you Inform the System Users of the Annual Report?

- Hand Delivered, Bulletin Board, Newspaper, Utility Bill Insert, Website (checked), Other (specify details)



COMPLIANCE WITH OPERATING PERMIT

List the conditions of your Operating Permit (Contact the DWO for a copy if needed):

1. Maintenance
2. Protection of well head contamination
3. Monitoring.

Are you in compliance with your Operating Permit? Yes No

BACTERIOLOGICAL TESTING AND DRINKING WATER PROTECTION REGULATION WATER QUALITY STANDARDS

How many bacteriological samples were collected during this reporting period? 146

What is the minimum required sampling frequency for this system? (#samples/month) Semi monthly

Additional sampling details: #2 well site moved to weekly sampling.

Was the minimum required sampling frequency achieved? Yes No

Comments:

Bacteriological summary attached to this report? Yes No

If no, how do the users of the system view the results?

WATER QUALITY STANDARDS FOR POTABLE WATER

Parameter:	Standard:	Did this system meet standard?	
Escherichia coli (for all samples)	No detectable <i>Escherichia coli</i> per 100ml	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No
Total Coliform Bacteria (if only 1 sample collected in a 30 day period)	No detectable total coliform bacteria per 100ml	<input type="checkbox"/> Yes	<input type="checkbox"/> No
Total Coliform Bacteria (if more than 1 sample collected in a 30 day period)	No more than 10% of samples contain total coliform bacteria, and No sample has more than 10 total coliform bacteria per 100ml	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No

If the system did not meet any of above Drinking Water Protection Regulation standards, record the results in the table below; attach additional sheets if necessary.

Date	TC/100ml	E.coli/100ml	Reason	Corrective Action
<u>The system met with quality standards.</u>				



CHEMICAL SAMPLING COMPLETED DURING THIS REPORTING PERIOD

Was any chemical sampling conducted during reporting period? Yes No

If no, when were the last chemical samples conducted for this system? (date) 10/02/2018 Don't know

If yes, attach a list of the chemical results

If any water samples did not meet the Guidelines for Canadian Drinking Water Quality, record the results in the table below; attach additional sheets if necessary.

Next scheduled full chemical test (date) 2021

Parameter	Result	Corrective Action / Treatment / Comments

ADDITIONAL TESTING

Does the system have analyzers for continuous monitoring? Yes No

If yes, check all boxes that apply:

Chlorine Turbidity Other (details)

Are the results available on request?

If any additional testing or sampling was conducted, record results in the table below; attach additional sheets if necessary.

Additional Testing & Reason for Sampling	Corrective Action Taken

WATER QUALITY COMPLAINTS

Were there any water quality complaints in this reporting period? (e.g. taste, odour, colour etc.) Yes No

If yes, complete the table below; attach additional sheets if necessary.

Date	Water Quality Complaint	Corrective Action / Treatment

OPERATIONAL PROBLEMS

Were there any operational problems during this reporting period? (e.g. insufficient water supply, malfunction of disinfection equipment, line breaks, elevated turbidity etc.). Yes No

If yes, complete the table below; attach additional sheets if necessary.

Incident Date	Type of Operational Problem	Corrective Action Taken

MAJOR UPGRADES/REPAIRS & EXPENSES

Were there any major upgrades/repairs or any major costs incurred during this reporting period? Yes No

If yes, complete the table below; attach additional sheets if necessary.

Major Upgrades/Expenses	Details
Improvements required by DWO	
Additions/changes to system	
Purchase or install new equipment	
Equipment repair or replacement	
Annual maintenance of system	Fixe hydrant servicing.
Specialist report	
Other	

FUTURE IMPROVEMENTS

Are there any plans for future improvements? Yes No

If yes, complete the table below; attach additional sheets if necessary.

Future Upgrades or Improvements	Estimated Date of Completion
Installation of a seal at the Airport well	July 2022
Hydraulic modelling of entire water system	October 2021

Click here to enter a date. DATE COMPLETED:	COMPLETED BY: 
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