# Water System Detail Information

<table>
<thead>
<tr>
<th>Public Water System (PWS) name:</th>
<th>Odd Fellows Sierra Rec. Association</th>
</tr>
</thead>
<tbody>
<tr>
<td>PWS Number:</td>
<td>CA 5510016</td>
</tr>
<tr>
<td>Principal city served:</td>
<td>N/A Home Owners Association</td>
</tr>
<tr>
<td>Mailing Address:</td>
<td>P.O. Box 116 Long Barn, CA 95335-0116</td>
</tr>
<tr>
<td>Physical Location:</td>
<td>25418 Wheeler Road</td>
</tr>
<tr>
<td>Web Site Address:</td>
<td><a href="http://www.varvayanis.com/sp">www.varvayanis.com/sp</a></td>
</tr>
<tr>
<td>Name of the person completing this report:</td>
<td>Gary A. Scarborough</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>Home (209) 586-3676 (Cell (209) 768-2496</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:hmgaryc@goldrush.com">hmgaryc@goldrush.com</a></td>
</tr>
</tbody>
</table>

# Public Water System Contacts

**Manager / Superintendent / Public Works Director** (person who is legally responsible for ensuring that the PWS maintains compliance with the Safe Drinking Water Act, and/or person to which Enforcement Letters and Correspondence would be addressed such as Board of Directors, General Manager, or CEO)

<table>
<thead>
<tr>
<th>Title:</th>
<th>Director of Water OFSRA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name:</td>
<td>Ron Hawke</td>
</tr>
<tr>
<td>Business Phone:</td>
<td>(209) 586-4528</td>
</tr>
<tr>
<td>Cell Phone:</td>
<td></td>
</tr>
<tr>
<td>Fax Number:</td>
<td></td>
</tr>
<tr>
<td>Email Address:</td>
<td>RSHAWKEG.GMAIL.COM</td>
</tr>
</tbody>
</table>

**Primary Contact** (designated Operator-in-Charge)

<table>
<thead>
<tr>
<th>Title:</th>
<th>WATER DISTRIBUTION OPERATOR</th>
</tr>
</thead>
<tbody>
<tr>
<td>Name</td>
<td>GARY A. SCARBOROUGH</td>
</tr>
<tr>
<td>-----------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>Business Phone</td>
<td>(209) 586-3999</td>
</tr>
<tr>
<td>Cell Phone</td>
<td>(209) 768-2496</td>
</tr>
<tr>
<td>Fax Number</td>
<td>(209) 586-3999</td>
</tr>
<tr>
<td>Email Address</td>
<td><a href="mailto:HMGARY@GOLDRUSH.COM">HMGARY@GOLDRUSH.COM</a></td>
</tr>
<tr>
<td>Billing Contact</td>
<td>(person who receives and processes invoices and payments)</td>
</tr>
<tr>
<td>Title</td>
<td>DIRECTOR OF WATER OFSRKA</td>
</tr>
<tr>
<td>Name</td>
<td>RON HAWKE</td>
</tr>
<tr>
<td>Business Phone</td>
<td>(209) 586-4528</td>
</tr>
<tr>
<td>Cell Phone</td>
<td></td>
</tr>
<tr>
<td>Fax Number</td>
<td></td>
</tr>
<tr>
<td>Email Address</td>
<td><a href="mailto:RSHAWKE@GMAIL.COM">RSHAWKE@GMAIL.COM</a></td>
</tr>
<tr>
<td>Mailing address</td>
<td></td>
</tr>
<tr>
<td>Water Quality Contact</td>
<td>(Person responsible for receiving water quality email updates from the Department's Drinking Water Program)</td>
</tr>
<tr>
<td>Title</td>
<td>WATER DISTRIBUTION OPERATOR</td>
</tr>
<tr>
<td>Name</td>
<td>GARY A. SCARBOROUGH</td>
</tr>
<tr>
<td>Business Phone</td>
<td>(209) 586-3999</td>
</tr>
<tr>
<td>Cell Phone</td>
<td>(209) 768-2496</td>
</tr>
<tr>
<td>Fax Number</td>
<td>(209) 586-3999</td>
</tr>
<tr>
<td>Email Address</td>
<td><a href="mailto:HMGARY@GOLDRUSH.COM">HMGARY@GOLDRUSH.COM</a></td>
</tr>
<tr>
<td>Consumer Data</td>
<td>Population (permanent) served by your system: 100 (Est)</td>
</tr>
<tr>
<td></td>
<td>(From the latest US Census Bureau or Department of Finance)</td>
</tr>
</tbody>
</table>
Seasonal Maximum Daily, if applicable:

This next section is for non-community water systems with less than 1000 active connections.

Does your system serve 25 or more people per day at least 60 days out of the year?

[ ] Yes  [ ] No

Does your system serve 25 or more of the same people for more than 6 months out of the year?

[ ] Yes  [ ] No

If 'Yes', what was the number of persons served on the 60th highest day of 2009?

How many year-round residents does your system serve, if any?

Does your system operate all year?

[ ] Yes  [ ] No

If 'No', give normal Open and Close dates:

Number of Service Connections as of December 31, 2009

Residential
Number of metered residential service connections:

[ ] 0

Number of flat rate residential service connections:

[ ] 354

Total number of residential service connections:

[ ] 354

Commercial
Number of metered commercial service connections:

[ ] 0

Number of flat rate commercial service connections:

[ ] 0

Total number of commercial service connections:

[ ] 0

Industrial
Number of metered industrial service connections:

[ ] 0

Number of flat rate industrial service connections:

[ ] 0

Total number of industrial service connections:

[ ] 0
Agricultural

Number of metered agricultural service connections:  
Number of flat rate agricultural service connections:  
Total number of agricultural service connections:  

Source Data

Inactive sources are not approved as sources of supply and must be physically disconnected or otherwise isolated so that only an intentional act by an operator can place the source in service.

Groundwater wells

Number of approved active groundwater (GW) wells:  
Number of groundwater wells added in 2009:  
Number of groundwater wells inactivated in 2009:  
Number of groundwater wells abandoned or destroyed in 2009:  

Surface water

Number of approved active raw surface water (SW) sources:  
Number of raw surface water sources added in 2009:  
Number of raw surface water sources inactivated in 2009:  
Number of raw surface water sources abandoned or destroyed in 2009:  

Purchased water connections

Number of active purchased groundwater (GW) connections:  
Number of purchased groundwater connections added in 2009:  
Number of purchased groundwater connections inactivated in 2009:  
Number of purchased groundwater connections abandoned or destroyed in 2009:  

Surface water connections

Number of approved active purchased surface water connections: 
Number of purchased surface water connections added in 2009:  
Number of purchased surface water connections inactivated in 2009:  
Number of purchased surface water connections abandoned or destroyed in 2009:  

**Standby wells**  
Number of approved standby wells:  
Number of standby wells added in 2009:  
Number of standby wells inactivated in 2009:  
Number of standby wells abandoned or destroyed in 2009:  

**Emergency interconnections**  
Number of approved emergency interconnections (interties):  
Number of Emergency Interconnections added in 2009:  
Number of emergency interconnections inactivated in 2009:  
Number of emergency interconnections abandoned or destroyed in 2009:  

For each standby source used in 2009, list (fill out sheet3 if necessary):  

<table>
<thead>
<tr>
<th>Name of source</th>
<th>Number days in operation</th>
<th>Reason for use</th>
<th>Was public notified?</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Finished Water Produced, Purchased, or Sold**

The **Maximum Day** is the day during 2009 with the highest total water usage. Once this day has been identified, complete the section below indicating how much of the water on that day was from each source. Only report **Maximum Day** if it is actually measured or determined from production records. It should not be the average day demand during the maximum month of production.

The **Maximum Month** is the month during 2009 with the highest total water usage. Indicate the month in the section below for each source and the amount that was supplied.
For questions below asking for amounts of water produced, purchased, or sold, please select units of measure:

<table>
<thead>
<tr>
<th>Gallon</th>
<th>Million</th>
<th>Acre-feet</th>
<th>100 cubic ft</th>
</tr>
</thead>
</table>

**Groundwater**

Date in 2009 maximum amount of groundwater was produced: 12/14/2009

Amount of groundwater produced in the Maximum Day: 205,400

Month in 2009 maximum groundwater was produced: July

Amount of groundwater produced in the Maximum Month: 1,271,100

Total amount of groundwater produced in 2009: 8,654,608

**Surface water**

Date in 2009 maximum amount of surface water was produced: N/A

Amount of surface water produced in the Maximum Day: 

Month in 2009 maximum surface water was produced: 

Amount of surface water produced in the Maximum Month: 

Total amount of surface water produced in 2009: 

**Purchased water**

Date in 2009 maximum amount of water was purchased: N/A

Amount of water purchased in the Maximum Day: 

Month in 2009 maximum amount of water was purchased: 

Amount of water purchased in the Maximum Month: 

Total amount of water purchased in 2009: 

**Sold water**

Date in 2009 maximum amount of water was sold: N/A

Amount of water sold in the Maximum Day: 

Month in 2009 maximum amount of water was sold: 

Amount of water sold in the Maximum Month: 

Total amount of water sold in 2009: 
For water purchased or sold in 2009, list (fill out sheet 4 if necessary):

Name of Public Water System

Indication water purchased from, sold to, or both

N/A

N/A

Water Quality

Has your system conducted monitoring for nitrate during 2009 from each source?

☐ Yes  ☐ No

Regulations require a minimum of annual sampling for nitrate. If any nitrate result is greater than or equal to 1/2 the MCL of 45 mg/L (i.e., a result of at least 23 mg/L nitrate), quarterly monitoring must be initiated. If there were any sources that were not monitored because they were offline during 2008, you must contact the CDPH Drinking Water Program to avoid an enforcement action.

☐

When was your bacteriological site sampling plan last updated?

IN PROCESS

The coliform monitoring regulations require that an updated sample-siting plan be submitted at least every 10 years, and at any time the plan no longer ensures representative monitoring of the system (Section 64422 of Title 22, California Code of Regulations). Please attach a copy of this siting plan if it is in electronic format (eg: PDF) and was changed in 2009.

Please note that if there is a system pressure loss to less than 5 psi, special bacteriological samples are required from the affected area. Also, you must notify the CDPH Drinking Water Program immediately.

Is your 2009 Consumer Confidence Report (CCR) on the Internet?

☐ Yes  ☐ No  ☐ N/A

Date 2009 CCR was or will be posted on the Internet:

6-15-2010

If your 2009 CCR has not yet been distributed, indicate the date it will be distributed:

A 2009 Consumer Confidence Report (CCR) must be distributed to your customers by July 1, 2010, reporting the quality of water delivered during the 2009 (Section 116470 of the Health and Safety Code). A copy of the 2009 CCR must be submitted to the CDPH Drinking Water Program by October 1, 2010 (Section 64483(c) of Title 22 California Code of Regulations).
Chemical Additives
Pursuant to Section 64590, Title 22 of the California Code of Regulations, all chemicals or products, including chlorine, added directly to the drinking water as part of a treatment process must meet the ANSI/NSF Standard 60. If you are not sure whether a chemical you are using meets this standard, contact the manufacturer or distributor of the chemical.

Please enter information about each chemical used by your water system including the following information (fill out sheet5 if necessary).

<table>
<thead>
<tr>
<th>Chemical name</th>
<th>Manufacturer's name</th>
<th>Purpose for use of chemical</th>
<th>If chemical meets ANSI/NSF Standard 60</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Cross-connection Control Program
All backflow prevention devices must be tested annually. If any were not tested in 2009, please attach a time schedule stating when the devices will be tested in 2010.

Backflow prevention assemblies on service connections at the meter
Total number of backflow prevention assemblies on service connections at the meter:

Number of backflow prevention assemblies on service connections at the meter installed in 2009:

Number of backflow prevention assemblies on service connections at the meter tested in 2009:

Number of backflow prevention assemblies on service connections at the meter failed in 2009:

Number of backflow prevention assemblies on service connections at the meter repaired or replaced in 2009:

Backflow devices on-site in lieu of at the meter
Total number of backflow devices on-site in lieu of at the meter:

Number of backflow devices on-site in lieu of at the meter installed in 2009:

Number of backflow devices on-site in lieu of at the meter tested in 2009:
Number of backflow devices on-site in lieu of at the meter failed in 2009: 0 N/A

Number of backflow devices on-site in lieu of at the meter repaired or replaced in 2009: 0 N/A

**Air gap backflow assemblies**
- Total number of air gap backflow assemblies:
- Number of air gap backflow assemblies installed in 2009:
- Number of air gap backflow assemblies tested in 2009:
- Number of air gap backflow assemblies failed in 2009:
- Number of air gap backflow assemblies repaired or replaced in 2009:

Name of designated Cross-connection Control Program Coordinator:

Certification Number:

Business Phone:

Email Address:

Describe certification or training received:

Date of last cross-connection control survey completed: N/A

Please list any incidents of cross-connection including the following information (fill out sheet 6 if necessary):

<table>
<thead>
<tr>
<th>Description of event</th>
<th>Was the report submitted to the CDPH Drinking Water Program (Yes/No)</th>
</tr>
</thead>
<tbody>
<tr>
<td>N/A</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Please attach non-submitted cross-connection incident reports:

**Recycled Water**
This next section is for **Large Water Systems Only**, which are those systems with 1000 active connections or greater.

**Agricultural sites**
- Total number of approved agricultural irrigation sites: 0
- Number of agricultural irrigation sites approved in 2009: 0
- Number of agricultural irrigation sites proposed for 2010: 0

**Landscape irrigation sites**
- Total number of approved landscape irrigation sites: 0
- Number of landscape irrigation sites approved in 2009: 0
- Number of landscape irrigation sites proposed for 2010: 0

**Industrial sites**
- Total number of approved industrial sites: 0
- Number of industrial sites approved in 2009: 0
- Number of industrial sites proposed for 2010: 0

**Dual-plumbed (In-building) sites**
- Total number of approved dual-plumbed (In-building) sites: 0
- Number of dual-plumbed (In-building) sites approved in 2009: 0
- Number of dual-plumbed (In-building) sites proposed for 2010: 0

**Dual-plumbed (Single-family lot) sites**
- Total number of approved dual-plumbed (Single-family lot) sites: 0
- Number of dual-plumbed (Single-family lot) sites approved in 2009: 0
- Number of dual-plumbed (Single-family lot) sites proposed for 2010: 0

**Cooling towers**
- Total number of approved cooling tower sites: 0
- Number of cooling tower sites approved in 2009: 0
- Number of cooling tower sites proposed for 2010: 0

**Other**
Total number of any other approved sites:

Number of any other sites approved in 2009:

Number of any other sites proposed for 2010:

Please list specific recycled water use sites within your system:

Name of Recycled Water Coordinator:

Title:

Business Phone:

Email Address:

How many inspections of recycled water use sites were conducted in 2009?

How many pressure/shutdown tests were performed in 2009?

Do all of your recycled water uses sites have an on-site supervisor?

How many recycled water use sites do not have an on-site supervisor?

System Operation -Treatment
Please attach any new Groundwater Treatment Plant Operation Plan:

Date of current Groundwater Treatment Plant Operations Plan:

Does your Operations Plan accurately reflect your current operations?

Please attach a copy of your current GW Treatment Plant Operations Plan if changes were made to the plan in 2009:

Describe any plant problems, process failures, major shutdowns, etc., which were experienced in 2009 and substantially affected the plant performance:
Please attach any new Surface Water Treatment Operations Plan:

Date of current Surface Water Treatment Plant Operations Plan:

Does your SW Treatment Operations Plan accurately reflect your current operations?

☐ Yes  ☐ No

Please upload a copy of your current SW Operations Plan if changes were made to the plan in 2009:

Describe any plant problems, process failures, major shutdowns, etc., which were experienced in 2009 and substantially affected the plant performance:

This section is for **Small Water Systems Only** which are systems with less than 1000 active connections.

Is any water treatment provided?

☐ Yes  ☐ No

If your water system uses chlorination treatment, list the name of each treated water source:

If any other water treatment is provided, list the water source name and the type of treatment:

If your water system uses any type of filtration treatment, list the water source and the type of filters used:

If your water system uses any other type of water treatment, list the water source and the type of treatment:
Watershed Sanitary Survey (Surface Water System only)

Date of last watershed sanitary survey: N/A

Date planned to complete next watershed sanitary survey: 

Emergency Preparation and Response

Date of current Emergency Disinfection Plan (EDP): N/A

Please attach a copy of your current Emergency Disinfection Plan if changes were made to the plan in 2009:

Do you have an Emergency Response Plan (ERP) that addresses the procedures for the restoration of water service for your water system?:  

☐ Yes ☐ No

Date of your current Emergency Response Plan: N/A

For Large Water Systems Only (30,000 connections), date of last review / revision of your Emergency Response Plan:

Public water systems serving at least 30,000 or more persons are required to review and revise their ERP to ensure that the plan is sufficient to address possible disaster scenarios.

For Large Water Systems Only, date ERP was last exercised with a tabletop or activity:

Please attach a copy of your Emergency Response Plan if it was updated in 2009 and has not been already submitted:

Does your water system have backup power for?  

☐ Source ☑ Pumping ☑ Water Treatment

If your system has backup power, how often is it tested? UNKNWN - 0

Can your system maintain system pressure either by backup power or by storage during power outages of two (2) hours or less?:  

☐ Yes ☐ No

Is your backup power system:

☐ Automatic ☐ Manual
Please submit an up-to-date Emergency Notification Plan (Section 116560 of the Health and Safety Code). Make sure to include the emergency notification procedures as directed on the form.

Operations

Please attach a list of State-certified Operators and include the following information:

GARY A. Searls

* Type of Certification T-3 & D-2
* Number and Grade TREATMENT & DISTRIBUTION #27848 #24005 T-3

* Indicate if Treatment Plant or Distribution Operator BOTH

* Certification renewal or expiration date DISTRIBUTION 1-1-2012

* Indicate if Lead or Shift operator ONLY ONE - LEAD

System Planning

Water System Improvements: Identify any major changes, additions, or improvements in the water facilities and/or operation that were completed during 2009 or that are planned for 2010. (Water systems are required to submit an amended permit application for any addition or modification to water sources or treatment facilities pursuant to Section 116550 of the Health and Safety Code).

Completed in 2009:

Planned for 2010:

System Operations - Distribution

Total number of dead-ends in the system:

Number of blow-offs in system:

Number of dead-ends flushed in 2009:

Frequency of dead-end flushing:

Total number of valves in the system:

Size range of valves:

Number of valves exercised in 2009:

Frequency of valve exercise:

System Operations - Storage

Storage Tank / Reservoir Inspection / Cleaning Program: Please attach a list with the following information for each storage tank:

* Tank Name
we currently have 6 storage tanks for our facilities

<table>
<thead>
<tr>
<th></th>
<th>210</th>
<th>043</th>
<th>013</th>
<th>013</th>
<th>013</th>
<th>013</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capacity in MG</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Year installed</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date last cleaned</td>
<td>1998</td>
<td>1998</td>
<td>unknown</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date re-lined (if applicable)</td>
<td>1998</td>
<td>1998</td>
<td>unknown</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**System Operations - Problems**

| Number of service breaks / leak problems experienced in 2009: | 0 |
| Number of service breaks / leak problems investigated in 2009: | 0 |
| Number of service breaks / leak problems reported to the CDPH Drinking Water Program in 2009: | 0 |
| Number of main breaks / leaks experienced in 2009: | 0 |
| Number of main breaks / leaks investigated in 2009: | 0 |
| Number of main breaks / leaks reported to the CDPH Drinking Water Program in 2009: | 0 |
| Number of water outages experienced in 2009: | 1 |
| Number of water outages investigated in 2009: | 1 |
| Number of water outages reported to the CDPH Drinking Water Program in 2009: | 0 |
| Number of Boil Water Notices issued in 2009: | 0 |

Please provide a brief description of the cause and the corrective action taken for each problem identified during 2009 (attach separate sheet if necessary):

**Ran Out of Water due to Gauge Level Indicator Frozen Giving a False Reading - Notified of Water Outage and Restarted Pumps and Filled Tanks Providing Water Again**

**System Complaints**

| Number of water color complaints received in 2009: | 0 |
| Number of water color complaints investigated in 2009: | 0 |
| Number of water color complaints reported to the CDPH Drinking Water Program in 2009: | 0 |
| Number of water turbidity complaints received in 2009: | 0 |
| Number of water turbidity complaints investigated in 2009: | 0 |
Number of water turbidity complaints reported to the CDPH Drinking Water Program in 2009: 0

Number of worm & other organism complaints received in 2009: 0

Number of worm & other organism complaints investigated in 2009: 0

Number of worm & other organism complaints reported to the CDPH Drinking Water Program in 2009: 0

Number of pressure (too high/low) complaints received in 2009: 0

Number of pressure complaints investigated in 2009: 0

Number of pressure complaints reported to the CDPH Drinking Water Program in 2009: 0

Number of waterborne illness complaints received in 2009: 0

Number of waterborne illness complaints Investigated in 2009: 0

Number of waterborne illness complaints reported to the CDPH Drinking Water Program in 2009: 0

Number of all other complaints received in 2009: 1

Number of all other complaints investigated in 2009: 1

Number of all other complaints reported to the CDPH Drinking Water Program in 2009: 0

Please provide a brief description of the cause and the corrective action taken for each complaint identified during 2009:

NO WATER - REFILLED TANKS

Drought Response and Water Conservation

Do you have a drought action plan?

[ ] Yes  [ ] No

If "Yes," when was it last updated?

Did you experience water shortages in the past calendar year?

[ ] Yes  [ ] No
If "Yes," how much was your shortfall (please express units in million gallons (MG) or acre-feet (AF))?

Did drought conditions cause you to activate emergency standby wells this past year?

Do you project water shortages in the upcoming calendar year?

If "Yes," how much of a shortfall do you anticipate (please express units in million gallons (MG) or acre-feet (AF))?

Did you implement any water conservation activity in 2009?

If 'Yes', what was the savings in MG?

What was the percent (%) reduction in demand?

Do you anticipate having to go to mandatory rationing in the upcoming year?

Do you routinely monitor the static and pumping water levels in your wells?

Are the levels recovering or is there a steady decline in these levels?

Please list any other long term actions you are considering or planning:

- Storage Tank Inspection and Cleaning 7/3 & 7/4 2010
- Installing New Fire Hydrant
- Installation of New Water Meter Well House & G
- Update BAC-T Sampling Plan
- Update Emergency Notification Plan
- Implementation of New Record Keeping for Daily Water Pumping & Water Complaint Forms
Again...thank you for your cooperation in completing this reporting form

Thank you Kassy for your help and patience. Should you need anything further please get in touch with me.

Everything on the form is filled out to the best of my knowledge. I came on board in March of 2010 and was given the information second hand.

Thanks Again

[Signature]

Gary L. Scarbrough