

# ANNUAL REPORT

FOR

## MILLBROOK DRINKING WATER SYSTEM

**PERIOD: January 1, 2023 – December 31, 2023**

TOWNSHIP OF  
**CAVAN MONAGHAN**



*Have it all. Right here.*

  
peterborough

MECP Waterworks # 220000781  
January 12, 2024

<b>Drinking-Water System Number:</b>	220000781
<b>Drinking-Water System Name:</b>	Millbrook Drinking Water System
<b>Drinking-Water System Owner:</b>	Township of Cavan Monaghan
<b>Drinking-Water System Category:</b>	Water Distribution and Supply Class II
<b>Period being reported:</b>	January 1, 2023 to December 31, 2023

<p><b><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></b></p> <p><b>Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [X ]</b></p> <p><b>Is your annual report available to the public at no charge on a web site on the Internet? Yes [X ] No [ ]</b></p> <p><b>Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</b></p> <div style="border: 1px solid black; padding: 5px;"> <p>Township of Cavan Monaghan            988 County Road 10            Millbrook, ON L0A 1G0  <a href="http://www.cavanmonaghan.net">www.cavanmonaghan.net</a></p> </div>	<p><b><u>Complete for all other Categories.</u></b></p> <p><b>Number of Designated Facilities served:</b></p> <div style="border: 1px solid black; padding: 2px; width: fit-content;">N/A</div> <p><b>Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]</b></p> <p><b>Number of Interested Authorities you report to:</b></p> <div style="border: 1px solid black; padding: 2px; width: fit-content;">N/A</div> <p><b>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [ ] No [ ]</b></p>
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**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:**

Drinking Water System Name	Drinking Water System Number
N/A	

**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 [ ] N/A

Indicate how you notified system users that your annual report is available, and is free of charge.

- 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 - Social Media (Twitter Facebook or Instagram)

**Describe your Drinking-Water System**

The Millbrook Drinking Water System and distribution system is operated by The City of Peterborough, Environmental Services Division, under contract with the Township of Cavan Monaghan.

The Millbrook Drinking Water System municipal water system consists of the following:

- Three non-GUDI groundwater wells (Due to recurring turbidity issues Well 3 was taken out of service in August 2022 and was rehabilitated in May 2023.)
- Sodium hypochlorite disinfection feed system with metering pumps
- 71 m of 900 mm oversized contact pipe
- Continuous on-line chlorine analyzers
- Continuous on-line flow meters
- Standpipe with 2,600 m<sup>3</sup> of storage

**List all water treatment chemicals used over this reporting period**

Sodium Hypochlorite (Chlorine)

**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**

Rehabilitation of Well 3 and cleaning of the stand pipe..

**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**

Incident Date	Parameter	Result	Unit of Measure	Corrective Action	Corrective Action Date
None					

**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 RW1	52	0 – 0	0 – 0	52	0 – 32
Raw RW2	52	0 – 0	0 - 0	52	0 – 5
Raw RW3	32	0 – 0	0 - 0	33	0 – 99
Treated	52	0 – 0	0 - 0	52	0 – 5
Distribution	209	0 – 0	0 - 0	208	0 – NDOGHPC

**Operational testing done under Schedule 7, 8 or 9 of Regulation 170/03 during the period covered by this Annual Report.**

	Number of Grab Samples	Range of Results (min #)-(max #)	Unit of Measure
Turbidity	Well 1	52	0.14 – 1.00
	Well 2	52	0.09 – 1.03
	Well 3	34	0.43 – 1.91
Chlorine - Free Treated Water	8760	1.51 – 2.17	mg/L
Chlorine – Free Distribution	208	1.36 – 2.20	mg/L
Fluoride (If the DWS provides fluoridation)			

**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
N/A				

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

Parameter	Sample Date	Result Value	nit of Measure	Exceedance
Antimony	Jan 17	0.6<MDL	µg/L	No
Arsenic	Jan 17	0.6	µg/L	No
Barium	Jan 17	132	µg/L	No
Boron	Jan 17	18	µg/L	No
Cadmium	Jan 17	0.003<MDL	µg/L	No
Chromium	Jan 17	0.16	µg/L	No
Mercury	Jan 17	0.01<MDL	µg/L	No
Selenium	Jan 17	0.14	µg/L	No
Uranium	Jan 17	0.754	µg/L	No

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Fluoride	May 9	0.1	mg/L	No
Nitrite	Jan 10	0.05<MDL	mg/L	No
	April 11	0.05<MDL		
	July 11	0.05<MDL		
	October 10	0.05<MDL		
Nitrate	Jan 10	1.33	mg/L	No
	April 11	1.03		
	July 11	1.63		
	October 10	1.62		

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

Location Type	Number of Samples	Range of Lead Results (min#) – (max #)	Unit of Measure	Number of Exceedances
Plumbing	0	0	µg/L	0
Distribution	2	0.5<MDL	µg/L	0

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Alachlor	Jan 17	0.02<MDL	µg/L	No
Atrazine + N-dealkylated metabolites	Jan 17	0.01<MDL	µg/L	No
Atrazine	Jan 17	0.01<MDL	µg/L	No
Azinphos-methyl	Jan 17	0.05<MDL	µg/L	No
Benzene	Jan 17	0.32<MDL	µg/L	No
Benzo(a)pyrene	Jan 17	0.004<MDL	µg/L	No
Bromoxynil	Jan 17	0.33<MDL	µg/L	No
Carbaryl	Jan 17	0.05<MDL	µg/L	No
Carbofuran	Jan 17	0.01<MDL	µg/L	No
Carbon Tetrachloride	Jan 17	0.17<MDL	µg/L	No
Chlorpyrifos	Jan 17	0.02<MDL	µg/L	No
Diazinon	Jan 17	0.02<MDL	µg/L	No
Dicamba	Jan 17	0.20<MDL	µg/L	No
1,2-Dichlorobenzene	Jan 17	0.41<MDL	µg/L	No
1,4-Dichlorobenzene	Jan 17	0.36<MDL	µg/L	No
1,2-Dichloroethane	Jan 17	0.35<MDL	µg/L	No
Dichloromethane	Jan 17	0.35<MDL	µg/L	No
2,4-Dichlorophenol	Jan 17	0.15<MDL	µg/L	No
2,4-Dichlorophenoxy acetic acid (2,4-D)	Jan 17	0.19<MDL	µg/L	No
Diclofop-methyl	Jan 17	0.40<MDL	µg/L	No
Dimethoate	Jan 17	0.06<MDL	µg/L	No
Diquat	Jan 17	1<MDL	µg/L	No
Diuron	Jan 17	0.03<MDL	µg/L	No
Glyphosate	Jan 17	1<MDL	µg/L	No

Parameter	Sample Date	Results Value	Unit of Measure	Exceedance
HAA (NOTE: show latest annual average)	Average	5.3<MDL	µg/L	No
Malathion	Jan 17	0.02<MDL	µg/L	No
Metolachlor	Jan 17	0.01<MDL	µg/L	No
Metribuzin	Jan 17	0.02<MDL	µg/L	No
Monochlorobenzene	Jan 17	0.30<MDL	µg/L	No
Paraquat	Jan 17	1<MDL	µg/L	No
Pentachlorophenol	Jan 17	0.15<MDL	µg/L	No
Phorate	Jan 17	0.01<MDL	µg/L	No
Picloram	Jan 17	1<MDL	µg/L	No
Polychlorinated Biphenyls(PCB)	Jan 17	0.04<MDL	µg/L	No
Prometryne	Jan 17	0.03<MDL	µg/L	No
Simazine	Jan 17	0.01<MDL	µg/L	No
THM (NOTE: show latest annual average)	Average	4.63	µg/L	No
Terbufos	Jan 17	0.01<MDL	µg/L	No
Tetrachloroethylene	Jan 17	0.35<MDL	µg/L	No
2,3,4,6-Tetrachlorophenol	Jan 17	0.20<MDL	µg/L	No
Triallate	Jan 17	0.01<MDL	µg/L	No
Trichloroethylene	Jan 17	0.44<MDL	µg/L	No
2,4,6-Trichlorophenol	Jan 17	0.25<MDL	µg/L	No
Trifluralin	Jan 17	0.02<MDL	µg/L	No
Vinyl Chloride	Jan 17	0.17<MDL	µg/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
None			