2025 Annual Drinking Water Quality Report

Port Clyde Water District

Port Clyde, Maine
PWSID ME0091290

We are pleased to present to you our Annual Drinking Water Quality Report, also known as the Consumer Confidence Report. This report, a requirement of the 1996 amendments to the Safe Drinking Water Act, is designed to inform you about the quality of 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.

WATER SOURCE
The Port Clyde Water District maintains 140 connections that service a population of 330. Our water is drawn from three bedrock wells. Well #1, 380 feet in depth, well #2, 445 feet in depth, and well # 3, 452 ft in depth, are all located on the premises. We chlorinate all three wells to protect against bacteriological contaminants. No other treatment is required. Wells #2 and #3 were added in 2004. These upgrades can provide up to 192 gallons per minute, with a normal output of around 75 gallons per minute, ensuring a safe, clean water supply well into the future. On May 12, 2010, we brought our new pressure booster station online, and in 2011, we increased the maximum pressure to supply full normal water pressure to all of our customers. In 2014, we installed a recirculation pump in our standpipe to better mix the water, improve chlorination, and control ice buildup in the winter. In 2015, we upgraded our Chlorination system, and in 2016, we installed an upgraded computer control system for our well pumps and booster station. In April of 2019, we performed Ice pigging to clean our mains and further improve water quality. This is a process of pumping fresh water, converted to the consistency of slush, to scour the mains. The waste is trucked away at the various blow-off locations around town by Interstate Septic. In the fall of 2024, we spent $40,000 to have the interior of the water tower professionally cleaned and inspected. In the fall of 2025, we flushed the water mains. We plan to flush the mains yearly to maintain water quality.

SOURCE WATER ASSESSMENT
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 ordinances to see how likely our drinking water source is to be contaminated by human activities in the future. Assessment results are available at public water suppliers, town offices, and the DWP. For more information about the SWAP, contact the DWP at telephone 207-287-2070.

If you have any questions about this report or concerning the operation of your water system, contact Joshua Wiley by phone at 207-691-2038 or by email at jwileypcwd@proton.me. With financial questions, direct your questions or comments to Justin Edelstein by phone at 207-298-2010 or by email at Justin.Edelstein@Maine Water.com. We want our valued customers to be informed about their water system. If you want to learn more, contact us about meetings, annual and otherwise.

WATER QUALITY
Port Clyde Water District routinely monitors its drinking water for contaminants in accordance with Federal and State laws. The following table shows testing results from our monitoring for the period of January 1 to December 31, 2025.

The sources of drinking water include rivers, lakes, ponds, and wells. As water travels over or through the ground, it dissolves naturally occurring minerals and radioactive material. The water can also pick up substances resulting from human or animal activity. All sources of drinking water are subject to potential contamination by both naturally occurring and man-made substances. Contaminants that may be present in source water include:

Microbial contaminants, such as viruses and bacteria, may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife.
Inorganic contaminants, such as salts and metals, can be naturally occurring or result from urban storm water runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.
Pesticides and herbicides may come from a variety of sources, including agriculture, urban stormwater runoff, and residential uses.
Organic chemical contaminants, including synthetic and volatile organic chemicals, by-products of industrial processes,

and petroleum production. They can also come from gas stations, urban stormwater runoff, and septic systems.
Radioactive contaminants can be naturally occurring or the result of oil and gas production and mining activities.

To ensure that tap water is safe to drink, the U.S. Environmental Protection Agency (EPA) prescribes regulations that limit the amount of certain contaminants in water provided by public water systems. The U.S. Food and Drug Administration (FDA) regulations establish limits on contaminants in bottled water to provide the same public health protection.

The table below lists all drinking water contaminants detected throughout water quality monitoring and testing. The presence of contaminants in the water does not necessarily indicate that the water poses a health risk.

Port Clyde Water District had no violations in 2025

TEST RESULTS
Unless otherwise noted, testing was done in 2025.

Contaminant	Level Detected	Unit Measurement	MCLG	MCL	Likely Source of Contamination
Microbiological Contaminants					
Coliform (TCR) (9) Total Coliform Bacteria (2025)	**0 positive**	Highest monthly # of positive samples	0 positive	1 pos/mo or 5% (e.coli)	Naturally present in the environment.
Chlorine Residual					
Chlorine Residual	**Average: 0.26** *Range (0.2-0.39)*	ppm	MRDLG = 4 ppm	MRDL =4 ppm	By-product of drinking water chlorination.
Inorganic Contaminants					
Barium (3/24/25)	**0.0029**	ppm	2	2	Discharge of drilling wastes. Discharge from metal refineries. Erosion of natural deposits.
Fluoride (3) (3/24/25)	**0.23**	ppm	4	4	Erosion of natural deposits. Water additive which promotes strong teeth. Discharge from fertilizer and aluminum factories.
Radionuclides					
Combined Radium (-226 & -228) (11/10/25)	**0.39**	pCi/l	0	5	Erosion of natural deposits.
Gross Alpha (4) (3/17/25)	**3.27**	pCi/l	0	15	Erosion of natural deposits.
Radium-228 11/10/25)	**0.39**	pCi/l	0	5	Erosion of natural deposits.
Lead / Copper					
Copper* (1/1/21-12/31/23)	**0.1** *Range (0.022-0.11)*	ppm	1.3	AL=1.3	Corrosion of household plumbing systems.
Number of sampling sites exceeding the action level: 0					

Lead* (1/1/21-12/31/23)	**4.1** *Range (0-5.6)*	ppb	0	AL=15	Corrosion of household plumbing systems.
Number of sampling sites exceeding the action level: 0 - Complete lead tap sampling data are available upon request					
* = Reported results are the 90th percentile value (the value that 90% of all samples are less than).					
Disinfection By-Products					
HAA5 (10) Total Haloacetic Acids (9/19/23)	**8.1**	ppb	0	60	By-product of drinking water chlorination.
TTHM (10) Total Trihalomethanes (9/19/23)	**12**	ppb	0	80	By-product of drinking water chlorination.
* = Reported results are the 90th percentile value (the value that 90% of all samples are less than).					

Note: The state allows us to monitor for some contaminants less than once per year because contaminant concentrations do not change frequently. Not all contaminants are tested every year due to monitoring waivers. Therefore, we must use the most recent sample record. Some of our data is more than one year old; however, it is limited to no older than 5 years.

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. RAA calculation 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 the 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 disinfectants to control microbial contaminants.
Running Annual Average (RAA): A 12-month rolling average of all monthly or quarterly samples at all locations. RAA calculation 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)
ppb = parts per billion or micrograms per liter (µg/L)
pCi/L = picocuries per liter (a measure of radioactivity)
ppt = parts per trillion or nanograms per liter (ng/L)
pos = positive samples.
MFL = million fibers per liter

Notes:

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 an annual average.

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.

Fluoride - For those systems that fluoridate, fluoride levels must be maintained between 0.5 and 1.2 ppm. The optimum level is 0.7 ppm.

Gross Alpha - Action level over 5 pCi/L requires testing for Radium 226 and 228. An action level over 15 pCi/L requires testing for Uranium. Compliance is based on Gross Alpha results minus Uranium results = Net Gross Alpha.

Lead/Copper - Action levels (AL) are measured at the consumer's tap. 90% of the tests must be equal to or below the action level.

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 due to rainfall or agricultural activity. If you are caring for an infant, consult your health provider.

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 is required to determine its full effects on humans.

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.

Total Coliform Bacteria - Reported as the highest monthly number of positive samples, for water systems that take less than 40 samples per month.

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 running an annual average.

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.

IMPORTANT INFORMATION

As you can see from the table, our system had no violations. We're proud that your drinking water meets all Federal and State requirements.

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. However, it 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 in your home plumbing and taking steps to reduce your family's risk. Flush your pipes by running your tap for several minutes before drinking tap water, 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 the report). Our system is making the inventory available at the offices located at 733 Port Clyde Rd., Port Clyde, ME 04855, or by contacting Josh Wiley by email at jwileypcwd@proton.me, or by phone at 207-691-2038.

Waiver Information

We completed all Synthetic Organic Compounds testing in 2025

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.

For most people, the health benefits of drinking plenty of water outweigh any possible health risk from these contaminants. However, 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 from their healthcare providers. The guidelines from the EPA and the Center of Disease Control (CDC) on appropriate means to reduce the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (800-426-4791) or at **https://www.epa.gov/ccr/forms/contact-us-about-consumer-confidence-reports.**

We, at Port Clyde Water District, work hard to provide top-quality water to every tap. We ask that all our customers help us protect and preserve our drinking water resources, which are the heart of our community, our way of life, and our children's future. Contact us with any questions. Thank you for working together for safe drinking water.

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.