

Ulysses Drinking Water Survey

The Town of Ulysses Water Source Protection Plan Committee is working with the New York Rural Water Association (NYRWA) to develop a drinking water source protection plan (DWSP2). The plan will help the Town to protect the quality and quantity of source water for residents and businesses, and to plan for future needs and funding opportunities.

A key initial step is to collect information on our water resources and how they are used. The Town has engaged with RCAP Solutions, a nonprofit community development organization, to conduct the survey at no charge to the Town. All individual responses will remain confidential. The data will be presented only in summary form.

We want to hear from all residents to ensure that a final plan best reflects the needs of our entire community.

Responses are requested by January 21st.

We sincerely appreciate your participation in this important community effort!

Click the **Next** button below to begin.

Please Note

Your input will help the Town, with assistance from the advisory Water Source Protection Committee, on determining how best to address water quality issues within the Town. Your answers may be used to produce reports, contribute to the Town's Comprehensive Plan update, and other Town water-related activities.

You are asked for your property location which is considered confidential information. While sanctioned by the Town of Ulysses, this survey is being conducted by a third party—the Rural Communities Assistance Partnership (RCAP Solutions) -- that is bound by contract to keep information confidential, to the extent permissible by law. Likewise, the Town and the Water Source Protection Plan Committee are committed to keeping property location information confidential. While all entities involved in this survey will make every effort to keep property location information confidential, there is always some risk of inadvertent disclosure. By taking this survey, you consent to (a) the risk your property location information may accidentally be disclosed by the Town, the Water Source Protection Committee, and/or the third party assisting with the survey, (b) your answers being subject to the disclosure requirements of the New York State Freedom of Information Law if an exception does not otherwise allow the Town to keep your answers confidential, and (c) your answers being subject to disclosure if ordered by a court of law. You further agree to hold the Town of Ulysses harmless for any disclosure of your property location information that was not caused by the Town's gross negligence.

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Household Information

What is the street address of your property?*

The physical location of your property, not a P.O. Box or mailing address.

1. Do you rent or own the property?

 Own Rent

2a. How many people living at the property are 18 years or more?

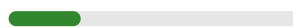
2b. How many people living at the property are under 18 years?

3. Is the property occupied:

 Year-round (6 months or more) Seasonally (5 months or less) Not occupied

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Ulysses Drinking Water Survey

Water Source

4. What is the source of your DRINKING water?*

Where does the water that you normally drink at home come from?
Select all that apply.

<input type="checkbox"/> Well	<input type="checkbox"/> Spring	<input type="checkbox"/> Rain Water
<input type="checkbox"/> Pond	<input type="checkbox"/> Stream	<input type="checkbox"/> Direct from Cayuga Lake
<input type="checkbox"/> Delivered	<input type="checkbox"/> Municipal Water	<input type="checkbox"/> Bottled Water
<input type="checkbox"/> Don't Know		

5. What is the source of your HOUSEHOLD (e.g. bathing, cleaning) water?*

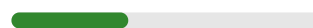
This is the water you use for household needs other than drinking.

Select all that apply.

<input type="checkbox"/> Well	<input type="checkbox"/> Spring	<input type="checkbox"/> Municipal Water
<input type="checkbox"/> Direct from Cayuga Lake	<input type="checkbox"/> Rain Water	<input type="checkbox"/> Pond
<input type="checkbox"/> Stream	<input type="checkbox"/> Delivered	<input type="checkbox"/> Bottled Water
<input type="checkbox"/> Don't Know		

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Ulysses Drinking Water Survey

About the well

If you have a well and you know the following information, please provide actuals or approximates: ▼

6a. How many drilled wells do you have?

Any wells you know of on this property, regardless of whether or not they are in use.



Reset

6b. How many dug wells do you have?

Any wells you know of on this property, regardless of whether or not they are in use.



Reset

7a. What is the depth of the well casing (feet)?

If unknown, enter "Unknown"

7b. What is the depth of your well (feet)?

If unknown, enter "Unknown"

7c. What is the depth to the water in your well (feet)?

If unknown, enter "Unknown"

7d. What year was the well constructed?

If unknown, enter "unknown"

8. How far is your well from the nearest septic system?

Less than 50 feet

50 - 99 feet

100 - 200 feet

Greater than 200 feet

Don't Know

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Ulysses Drinking Water Survey

Drinking Water Quantity

Questions about the amount of drinking water available



9. Do you always have enough drinking water?

Yes

No

11. Has the QUANTITY of your water changed?

Has remained the same

Increased

Decreased

Don't know

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Ulysses Drinking Water Survey

Drinking Water Quality

Questions about the biological, chemical, aesthetic, taste and odor characteristics of your drinking water. ▲
▼

13. Does your untreated water have any of the following problems?

Select all that apply.

<input type="checkbox"/> Iron	<input type="checkbox"/> Salt (chloride)	<input type="checkbox"/> Discoloration
<input type="checkbox"/> Sulfur	<input type="checkbox"/> Hardness	<input type="checkbox"/> Bacteria
<input type="checkbox"/> Sediment	<input type="checkbox"/> Radon	<input type="checkbox"/> Bad taste
<input type="checkbox"/> Odor	<input type="checkbox"/> Zebra mussels	<input type="checkbox"/> Nitrates
<input type="checkbox"/> Methane	<input type="checkbox"/> N/A No problems	
<input type="checkbox"/> Other (feel free to add details)		

14. If you have seasonal problems with water QUALITY in which season do they occur?

Select all that apply.

<input type="checkbox"/> Winter
<input type="checkbox"/> Spring
<input type="checkbox"/> Summer
<input type="checkbox"/> Fall
<input type="checkbox"/> N/A No seasonal problems

15. How would you rate the QUALITY of your untreated drinking water?

- Very poor
- Poor
- Fair
- Good
- Excellent

16. Has the QUALITY of your water changed?

- Remained the same
- Improved
- Worsened
- Don't know

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Ulysses Drinking Water Survey

Water Treatment & Expense

Questions about in-home treatment processes and costs.



18. Have you ever had your water tested?

Yes

No

19. Do you treat your drinking water?

If water is treated before coming to your home (i.e. municipal water, bottled water, bulk purchase) select "No"

Yes

No

20. Do you treat your household water?

This is water used for household needs aside from drinking (bathing, cooking, cleaning)

Yes

No

Saved

21. Does your water system include any of the following treatments for your primary drinking water source?

Select all that apply.

<input type="checkbox"/> Water softener	<input type="checkbox"/> Carbon filter	<input type="checkbox"/> Chlorine
<input type="checkbox"/> UV disinfection	<input type="checkbox"/> Sediment filter	<input type="checkbox"/> Reverse osmosis
<input type="checkbox"/> Zebra mussel protection	<input type="checkbox"/> Not sure	<input type="checkbox"/> No treatment system
<input type="checkbox"/> Other, please describe		

22. What is the approximate annual cost of maintaining your water supply?

Typical annual cost of treatment systems, chemicals, filters, regular maintenance, water purchase, etc.

Exact values are not required, your best estimate is OK.

23a. Have you made any major investments in your water infrastructure in the past 10 years?

For example, constructing a well, rehabilitating a well, installing new water lines, purchase/replace a pump or treatment equipment, or any other major expense related to the water supply at your home.

<input type="radio"/> Yes
<input type="radio"/> No

Ulysses Drinking Water Survey

Additional Information

24. WATER USAGE - Your normal water usage includes:

Select all that apply

Household use

Drinking

Watering garden and/or lawn

Pool

Other outdoor use

Agricultural use

Commercial use

Other

25. MUNICIPAL WATER - How interested are you in changing your water source to a municipal water system, if available?

Very interested

Somewhat interested

Neutral

Uninterested

26. How much would you be willing to pay for municipal water service per year?

<input type="radio"/> Less than \$500	<input type="radio"/> \$500 - \$1,000	<input type="radio"/> \$1,000 - \$1,500
<input type="radio"/> More than \$1,500	<input type="radio"/> Unwilling to pay	<input type="radio"/> Unable to pay

27. CONCERNS ABOUT WATER - Please indicate if you are concerned with any of the following issues affecting your water supply?

Select only the concerns related to your water supply. Do not select issues of general concern or of concern to waterbodies other than your water supply.

<input type="checkbox"/> Oil or gas wells	<input type="checkbox"/> Chemicals or petroleum contamination
<input type="checkbox"/> Manure and fertilizer storage or applications	
<input type="checkbox"/> Contamination from septic systems	<input type="checkbox"/> Pesticide storage or application
<input type="checkbox"/> Salt storage or application	<input type="checkbox"/> Drought and/or flood
<input type="checkbox"/> Lack of water supply due to pumping of adjacent wells	
<input type="checkbox"/> Harmful Algal Blooms	<input type="checkbox"/> N/A No concerns
<input type="checkbox"/> Other	

28. Any additional information related to your water that you'd like to share?

Sign me up to learn more about local activities, actions, and services through the weekly Town of Ulysses Newsletter (optional):

Enter your email to sign up for the Town of Ulysses e-newsletter.

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Submit





2023 Ulysses Drinking Water Survey

The Town of Ulysses Water Source Protection Plan Committee (WSPPC) is working to develop a drinking water source protection plan (DWSP2). The plan will help the Town to protect the quality and quantity of source water for residents and businesses, and to plan for future needs and funding opportunities. A key initial step is to collect information on our water resources and how they are used. **We want to hear from all residents to ensure that a final plan best reflects the needs of our entire community.** The Town has engaged with RCAP Solutions, a nonprofit community development organization, to conduct the survey at no charge to the Town. All individual responses will remain confidential. The data will be presented only in summary form.

The survey is **for Ulysses residents living outside the Village of Trumansburg** and should take less than 15 minutes to complete. **Please fill out online if you can, at <https://townofulyssesny.gov>** or use the QR code to the right. Paper copies may be obtained from, and returned to, the Town Clerk at town hall, 10 Elm St. Trumansburg, 14886. For more information, contact ulysses.clerk@gmail.com or 607-387-5767 ext 221, or visit <https://townofulyssesny.gov/boards/wsppc-source-water-protection-committee/>



Please return by November 22, 2023

We sincerely appreciate your participation in this important community effort!

Physical address of your property _____

Providing your address (not P.O. Box) is important for determining conditions, trends, and concerns throughout the town. All individual responses will remain confidential. The data will only be presented in summary form.

HOUSEHOLD INFORMATION

1. Do you rent or own the property? Rent ____ Own ____
2. How many people living at the property are:
18 years or more _____, under 18 years _____
3. Is the property occupied:
year-round ____ seasonally (less than 6 mo./yr) ____

WATER SOURCE

4. What is the source of your **DRINKING** water? (Check all that apply)

<input type="checkbox"/> Well	<input type="checkbox"/> Direct from Cayuga Lake
<input type="checkbox"/> Spring	<input type="checkbox"/> Delivered
<input type="checkbox"/> Rainwater	<input type="checkbox"/> Municipal water
<input type="checkbox"/> Pond	<input type="checkbox"/> Bottled Water
<input type="checkbox"/> Stream	<input type="checkbox"/> Don't know
5. What is the water source for the rest of your **HOUSEHOLD WATER** (e.g. bathing, cleaning)?

<input type="checkbox"/> Well	<input type="checkbox"/> Direct from Cayuga Lake
<input type="checkbox"/> Spring	<input type="checkbox"/> Delivered
<input type="checkbox"/> Rainwater	<input type="checkbox"/> Municipal water
<input type="checkbox"/> Pond	<input type="checkbox"/> Bottled Water
<input type="checkbox"/> Stream	<input type="checkbox"/> Don't know
6. If you have any wells, how many of each do you have?
Dug _____ Drilled _____ No well _____
7. If you have a well and know the following information, please provide actuals or approximates:
 - a) What is the depth of the well (feet): _____
 - b) What is the depth to water in the well (feet): _____
 - c) Depth of well casing (feet): _____
 - d) When was the well dug/drilled in (year): _____
8. How far is your well from the nearest septic system?

<input type="checkbox"/> Less than 50 ft
<input type="checkbox"/> 50-99 ft
<input type="checkbox"/> 100 – 200 ft
<input type="checkbox"/> Greater than 200 ft
<input type="checkbox"/> Don't know

DRINKING WATER QUANTITY

9. Do you always have enough water?
 Yes No
10. If not, the source runs dry:

<input type="checkbox"/> Some years
<input type="checkbox"/> Every summer
<input type="checkbox"/> Often during the summer
<input type="checkbox"/> Throughout the year
11. Has the QUANTITY of your water changed?

<input type="checkbox"/> Has remained the same
<input type="checkbox"/> Increased
<input type="checkbox"/> Decreased
<input type="checkbox"/> Don't know
12. If the quantity has changed, how many years ago? _____

DRINKING WATER QUALITY

13. Does your untreated water have any of the following problems? (Check all that apply)

<input type="checkbox"/> Iron	<input type="checkbox"/> Bad taste
<input type="checkbox"/> Salt (chloride)	<input type="checkbox"/> Odor
<input type="checkbox"/> Discoloration	<input type="checkbox"/> Zebra mussels
<input type="checkbox"/> Sulfur	<input type="checkbox"/> Nitrates
<input type="checkbox"/> Hardness	<input type="checkbox"/> Methane
<input type="checkbox"/> Bacteria	<input type="checkbox"/> Other (feel free to add details)
<input type="checkbox"/> Sediment	<input type="checkbox"/> N/A
<input type="checkbox"/> Radon	
14. If you have seasonal problems with water QUALITY, in which season do they occur? (Check all that apply)

<input type="checkbox"/> Winter
<input type="checkbox"/> Spring
<input type="checkbox"/> Summer
<input type="checkbox"/> Fall
<input type="checkbox"/> N/A
15. How would you rate the QUALITY of your untreated water?

<input type="checkbox"/> Very poor
<input type="checkbox"/> Poor
<input type="checkbox"/> Fair
<input type="checkbox"/> Good
<input type="checkbox"/> Excellent

16. Has the QUALITY of your water:

- Remained the same
- Improved
- Worsened

17. If the QUALITY has changed, approximately how many years ago? _____

WATER TREATMENTS AND EXPENSE

18. Have you ever had your water tested?

- Yes
- No

19. Do you treat your drinking water?

- Yes
- No

20. Do you treat your household water?

- Yes
- No

21. Does your water system include any of the following treatments for your primary drinking water source?

(Check all that apply)

- Water softener
- Carbon filter
- Chlorine
- UV
- Sediment filter
- Reverse osmosis
- Zebra mussel protection
- Not sure
- No treatment system
- Other

22. What is the approximate annual cost of maintaining your water supply (treatment, maintenance, water delivery)? \$ _____

23. Have you made any major investments in your water infrastructure in the past 10 years (for example, digging a well, rehabilitating a well, installing water lines, purchasing a pump)? If so, what was the approximate cost? \$ _____

WATER USAGE

24. Your normal water usage includes (check all that apply):

- Household use
- Drinking
- Watering garden and / or lawn
- Pool
- Other outdoor uses
- Agricultural

Commercial use

Other _____

INTEREST IN MUNICIPAL WATER

25. How interested are you in changing your water source to a municipal water system if available?

- Very interested
- Somewhat interested
- Neutral
- Uninterested

26. How much would you be willing to pay for municipal water service per year?

- <\$500
- \$500-\$1000
- \$1000-1500
- >\$1500
- Unwilling to pay
- Unable to pay

CONCERNS ABOUT WATER

27. Please indicate if you are concerned with any of the following issues affecting your water supply (check all that apply):

- Oil or gas wells
- Chemicals or petroleum contamination
- Manure and fertilizer storage or applications
- Contamination from septic systems
- Pesticide storage or application
- Salt storage or application
- Drought and / or flood
- Lack of water supply due to pumping of adjacent wells
- Harmful Algal Blooms
- Other Issues:

28. OPTIONAL: Any additional information related to your water that you'd like to share?

THANK YOU FOR YOUR TIME!

Sign me up to learn more about local activities, actions, and services through the weekly Town of Ulysses Newsletter.

Name and Email address: _____

Please note:

Your input will help the Town, with assistance from the advisory Water Source Protection Committee, on determining how best to address water quality issues within the Town. Your answers may be used to produce reports, contribute to the Town's Comprehensive Plan update, and other Town water-related activities.

You are asked for your property location which is considered confidential information. While sanctioned by the Town of Ulysses, this survey is being conducted by a third party—the Rural Communities Assistance Partnership (RCAP Solutions) – that is bound by contract to keep information confidential, to the extent permissible by law. Likewise, the Town and the Water Source Protection Plan Committee are committed to keeping property location information confidential. While all entities involved in this survey will make every effort to keep property location information confidential, there is always some risk of inadvertent disclosure. By taking this survey, you consent to (a) the risk your property location information may accidentally be disclosed by the Town, the Water Source Protection Committee, and/or the third party assisting with the survey, (b) your answers being subject to the disclosure requirements of the New York State Freedom of Information Law if an exception does not otherwise allow the Town to keep your answers confidential, and (c) your answers being subject to disclosure if ordered by a court of law. You further agree to hold the Town of Ulysses harmless for any disclosure of your property location information that was not caused by the Town's gross negligence.



Water Source Protection Plan Committee
Town of Ulysses
10 Elm St.
Trumansburg, NY 14886

Ulysses Online
2023 Drinking Water Survey
Your response is requested!



Ulysses 2023 Drinking Water Survey

What is the quality and quantity of your drinking water? The Town of Ulysses Water Source Protection Plan Committee is working to develop a town-wide drinking water source protection plan. The plan will help the Town protect the quality and quantity of source water for residents and businesses, and plan for future needs and funding opportunities.

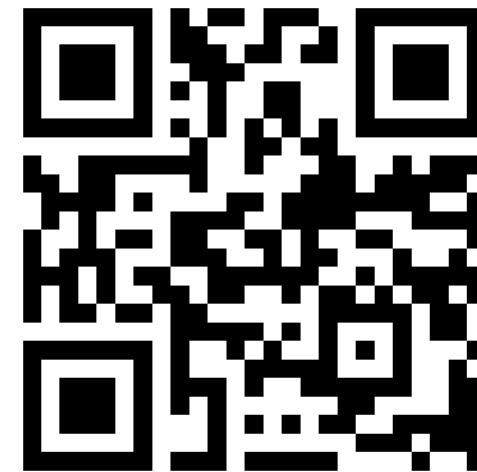
Our first step...collect information. **We want to hear from YOU and all Town residents to ensure that the plan reflects the needs of our entire community.**

The survey is for **Ulysses residents living outside the Village of Trumansburg** and should take less than 10 minutes to complete. **THANK YOU!**

Use this QR code to complete your survey on your cell phone

OR access online at:

<https://arcg.is/1DO1TT0>



Paper copies may be obtained from, and returned to, the Town Clerk at Town Hall, 10 Elm St. Trumansburg, 14886. For more information, contact ulysses.clerk@gmail.com or 607-387-5767 ext. 221



INDIVIDUAL WATER SUPPLY WELLS - FACT SHEET #7

Testing, Operation, and Maintenance of Residential Wells

Background

Over one million homes (and several million residents and visitors) throughout New York State are served by individual (residential) water supply (IWS) wells. While public water supplies are regularly tested for a variety of contaminants, inspected, and maintained, these same activities are left to the homeowner in the case of an IWS. To protect the safety and health of residents and visitors, it is *recommended* that IWS owners:

- Regularly test the well water for contaminants;
- Know how the well system operates and be familiar with the function of each system component; and
- Perform regular maintenance on the well, well system components, and the area surrounding the well.

To help ensure a potable and adequate water supply, this fact sheet and the [Individual Water Supply Wells – Fact Sheet #7 Checklist](#) describe when to perform recommended testing, the components of an IWS, and how an IWS should be maintained. Homeowners should keep records of all maintenance and testing performed on their wells.

This Fact Sheet focuses on testing, operation, and maintenance of a drilled well, which, when properly located and constructed, is the well type recommended for an IWS (see [Appendix 5-B "Standards for Water Wells"](#)). Other types of wells including well points, dug wells, springs and shore wells are more susceptible to drought and contamination from pathogens and chemical spills (see [Fact Sheet 5](#)). Surface water supplies (lakes, streams, etc.) should not be used for residential water use because they are more likely to be contaminated (see [Surface Water Fact Sheet](#)).

Well Water Testing

- **Homeowners should have their water tested whenever a change in color, taste, or odor occurs. Water from a public water supply or NYS certified bottler should be used until test results are obtained.**
- **Recommended testing schedule:** Test for coliform bacteria at least annually. Also test for coliform bacteria whenever a well modification or repair occurs, when any change in gastrointestinal health occurs, or when an aesthetic change in the water occurs. Test for other contaminants every three to five years (see p. 2 of the [Individual Water Supply Wells – Fact Sheet #7 Checklist](#) and [Fact Sheet 3](#) for a list of contaminants). Homeowners should contact their Local Health Department (LHD) to determine whether or not the LHD has its own required testing schedule. LHD contact information can be found at the following link: [LHD contacts](#).
 - **Steps to take when contaminants are found:** If test results confirm the presence of a contaminant above the applicable standard, homeowners should contact their [LHD](#) for further guidance. Corrective actions and/or treatment may be necessary.
 - **How to collect and test samples:** Testing of well water should be conducted at a laboratory certified for testing potable water by the Environmental Laboratory Approval Program (ELAP). A list of labs can be found at: www.wadsworth.org/labcert/elap/comm.html or by contacting your [LHD](#). Sample collection procedures will be outlined by the laboratory. It is recommended not to rely on in-home tests performed by water treatment vendors or test kits purchased at stores because these tests do not meet ELAP standards.

Well Operation

How a well system operates: Typical well systems consist of a well, pump, pressure tank, pressure switch, piping, and sometimes a storage tank containing a few hundred gallons of water. When a water fixture is opened, compressed air in the pressure tank forces water from the tank into the piping to the fixture. When the pressure in the tank drops due to the lowered water level, the pressure switch (located on or near the pressure tank) turns the pump on. The pump forces water from the well through the piping to the pressure tank. When the water level in the tank reaches a pre - set level, the pressure switch shuts the pump off.

Well Maintenance

Do not exceed your experience or knowledge when performing well maintenance tasks. If you are unsure about how to perform a task, contact a well driller, plumber, or electrician.

- **Maintenance of well:** Homeowners should inspect the well casing, well cap, and well area at least annually to make sure that the well is protected from potential sources of contamination (see Figures 1 and 2 and the [Individual Water Supply Wells – Fact Sheet #7 Checklist](#) for descriptions of which items to inspect). Unacceptable well caps should be replaced with an acceptable cap (see Figure 2 below).
- **Maintenance of wellhead area:** Homeowners should avoid mixing, using, storing and disposing of pesticides, fertilizers, manure, herbicides, cleaners, degreasers, fuels and other pollutants near the well. These substances should be stored at least 100 feet from the well casing in original, sealed, labeled containers on an impervious surface such as concrete. Dispose of these substances properly and NEVER dispose of them down a well, or into a sink or toilet leading to the septic system.
- **Maintenance of Well Components:**
 - **Well pump** - submersible pumps require very little maintenance. Jet pumps and suction pumps should be kept in a dry area free from flooding. They also may occasionally have to be primed.
 - **Pressure tank** – pressure tanks maintain pressure inside the household plumbing and prevent the well pump from running every time water is needed. This leads to prolonged pump life. Symptoms of an improperly operating pressure tank include the water pump running more frequently, surging water pressure, and taste and odor issues. If you suspect pressure tank problems contact a plumber or well driller. Keep the area around the tank clear for maintenance.
 - **Pressure switch** – pressure switches ensure that the pressure in the tank remains in a specified range, typically 30 – 50 psi or 40 - 60 psi. Pressure switches normally operate on higher than normal electrical voltage. Contact a well driller or electrician for switch maintenance to avoid the risk of electrical shock.
 - **Pressure gauge** - check to make sure the gauge is operating properly and replace if needed. Normal operating pressure should be between 30 and 60 psi.
 - **Electric shutoff box** – keep dry and keep the surrounding area clear for maintenance.
 - **Additional Treatment Devices** – maintenance should be performed according to the manufacturer.
 - **Shock chlorination of well** - If the well has been flooded or well maintenance has been performed, follow the instructions found at: www.health.ny.gov/environmental/water/drinking/boilwater/. Select the tab, “Disinfecting Water at Home,” and then follow all instructions under “Well Contamination”.



Figure 1: Photo of a properly constructed well.



Figure 2: Photos of acceptable and unacceptable well caps

Copies of this Fact Sheet, Appendix 5-B, and other Fact Sheets can be found at:

<http://www.health.ny.gov/environmental/water/drinking/regulations/>. A list of DEC registered well drillers can be found at: <http://www.dec.ny.gov/lands/33317.html>. For questions contact:

Your Local Health Department
(http://www.health.ny.gov/environmental/water/drinking/doh_pub_contacts_map.htm)

or

Residential Sanitation Section
Bureau of Water Supply Protection
New York State Department of Health
(518) 402-7650
E-mail: bpwsp@health.state.ny.us



INDIVIDUAL WATER SUPPLY WELLS - FACT SHEET #7: CHECKLIST

Checklist for Testing, Operation, and Maintenance of Residential Wells

Click on the following link to open Fact Sheet 7: [Fact Sheet 7](#)

The following are *recommended* items that should be checked regularly to ensure that your private well is adequately protected against contamination and is operating properly. Completed checklists should be kept with other well maintenance and testing records. **Do not exceed your experience or knowledge when performing well maintenance tasks. If you are unsure about how to perform a task, contact a well driller, plumber, or electrician.** Please note that the checklist is continued on the reverse side of this sheet.

Item to Check	Check <u>Annually</u>	Date Checked/By Whom	Notes
Water Quality	Test water sample for coliform bacteria; sample sent to ELAP certified lab: www.wadsworth.org/labcert/elap/comm.html (or contact your LHD)		
Well Casing	Well casing is free of holes and cracks		
	Well casing extends at least 12" above the surrounding land surface		
Well Cap	Well cap is free of holes and cracks		
	Well cap is securely attached, is bolted on top of the cap, and the vent is screened (use a mirror to check for screened vent under the cap)		
	The next time the well cap is removed or replaced, check to ensure the cap is sealed with an O-ring or gasket. Do NOT remove the well cap unless performing maintenance activities (such as shock chlorination of well)		
Pressure Tanks	Pressure gauges checked to ensure they are operating properly, showing pressure in the tank remains in a specified range (typically between 30 – 60 psi)		
	Pressure tank has been flushed (if necessary)		
	Valves have been exercised to ensure they are operating properly and can be fully opened and closed		
Surrounding Ground	Ground surrounding well casing slopes away from the casing		
	Ground surrounding well casing is free of pooled water and debris (leaves, branches, etc.)		
Property	No household hazardous materials or animal wastes located/stored within 100 feet of well casing		
	Any household hazardous materials present on property are stored in original, sealed, labeled containers and on an impervious surface (not on the lawn)		
	Aboveground oil tanks on property are in good condition and at low risk for leakage. When refilling oil tanks, someone watches to ensure overflow does not occur		
Septic	Septic system visually inspected to check for breakouts, failures, etc.		

Checklist Continued on Other Side



Item to Check	Check – <u>Every Three to Five Years</u>	Date Checked/By Whom	Notes
Water Quality	Well water tested for lead, nitrates/nitrites, turbidity, arsenic, iron, manganese, iron plus manganese, hardness, alkalinity, pH, and sodium (see Fact Sheet 3)		
Septic	Septic tank pumped out/inspected every 2-3 years by a NYSDEC permitted Waste Transporter to avoid failure of septic system and potential contamination of well		
Item to Check	Check - As Specified for Your Equipment	Date Checked/By Whom	Notes
Water Softener	If water softener present, exhausted resin has been replaced or regenerated (if needed)		
Filter	Cartridge filter (if present) checked and replaced if necessary		
Tank	Aeration system storage tank (if present) has been flushed and cleaned		
UV	Lamp in the UV disinfection system (if present) has been replaced (if needed)		
	Housing and lamp in the UV disinfection system (if present) have been cleaned		
Other	Other treatment units maintained on schedule		



INDIVIDUAL WATER SUPPLY WELLS - FACT SHEET #5

SUSCEPTIBLE WATER SOURCES

(Well Points, Dug Wells, Springs and Shore Wells)

Individual (residential) water supplies (IWS) need to provide adequate quantities of water fit for consumption and intended uses. A drilled well, located and constructed in accordance with 10NYCRR Appendix 5-B “Standards for Water Wells”, should routinely be the water supply option selected. Well points, dug wells, springs and shore wells are susceptible to contamination from pathogens, spills, etc. and the effects from drought. These water sources may be considered only as a last resort with proper protective measures and, in most cases, will require approval by County or State health department officials through issuance of a specific waiver pursuant to Part 75 of the State Health Department’s Administrative Rules and Regulations or via a county sanitary code waiver provision.

SPECIFIC INFORMATION FOR SUSCEPTIBLE WATER SOURCE TYPES

The following types of water sources typically utilize surface water bodies or shallow groundwater sources. Surface waters can contain bacteria, parasites, viruses and possibly other contaminants and shallow groundwater sources are also at significant risk of contamination. These water sources typically have distinguishing construction characteristics which do not comply with Appendix 5-B requirements and would therefore require a specific waiver or other county approval if utilized.

Well Points

A well point (or “driven point”) is a special type of well installed using a drive point with a built-in screen fastened to the end of a small diameter pipe (usually 1-1/4 to 2 inches) and without a protective outer casing. Well points are installed by pounding, driving or excavating down to the water table. These wells are usually constructed in shallow aquifers with sandy soils, within 10 to 30 feet of the ground surface and use a suction pump to draw water. Single pipe driven point wells under suction are not in compliance with Appendix 5-B and should be avoided.

Dug Wells

A dug well is constructed by making a large diameter excavation into a shallow aquifer, by hand digging or backhoe and shoring the excavation with large diameter concrete rings. (Shoring constructed with stone or brick are not in compliance with Appendix 5-B and should be avoided.) Dug wells are typically less than 15 feet deep and usually use a suction pump to draw water.

Springs

Springs occur where an aquifer discharges naturally at or near the ground surface, and are broadly classified as either rock or earth springs. It is often difficult to determine the true source of a spring (that is, whether it truly has the natural protection against contamination that a groundwater aquifer typically has.) Even if the source is a good aquifer, it is difficult to develop a collection device (e.g., “spring box”) that reliably protects against entry of contaminants under all weather conditions. (The term “spring box” varies, and, depending on its construction, would be equivalent to, and treated the same, as either a spring, well point or shore well.) Increased yield and turbidity during rain events are indications of the source being under the direct influence of surface water.

Shore Wells

“Shore wells” (also known as “infiltration galleries” or “cassion wells”) are shallow wells influenced by surface water and are installed near a waterbody in a shallow aquifer that is directly connected to surface water. Shore wells can also be shallow subsurface devices adjacent to a water body, installed to collect water through a covered stone-filled trench or similar arrangement that drains surface water to a “storage” well or tank. Soils surrounding shore wells provide minimal filtration. The risk of contamination of these water sources can be similar to those of surface water sources.

ADDITIONAL CONSIDERATIONS AND RECOMMENDATIONS

The use of susceptible sources as described above is discouraged. A properly installed drilled well should be considered first before considering the use of a susceptible source. As a last resort, when the use of a susceptible source is considered, the following is recommended:

Well Points, Dug Wells and Springs

Where shallow ground water aquifers exist, well points, dug wells and springs can be allowed if they are installed by a certified New York State Department of Environmental Conservation (NYS DEC) registered water well contractor and, in most cases, require issuance of a specific waiver by the LHD or county sanitary code approval as needed. For these sources, installation of appropriate treatment should be considered (e.g., continuous disinfection). For springs, an engineering report, which may include a hydrogeologic study, should also be provided to assure that the water source is satisfactory.

Shore Wells

In cases where satisfactory groundwater cannot be developed according to Appendix 5-B standards, a specific waiver or approvals via county sanitary code can be requested for development of a shore well. All such requests should demonstrate unsatisfactory availability of groundwater via an engineering report or other evidence (such as a hydrogeologic study) deemed acceptable by the approval authority. Since shore wells provide minimal natural filtration of surface water, all requests should include proposed design, treatment (including filtration and continuous disinfection) and an operation, maintenance and monitoring plan developed by a professional engineer. After health department approval, the shore well needs to be installed by a certified NYS DEC registered water well contractor. Inclusion of a deed amendment as a condition on the specific waiver approval should also be considered. A professional engineer should certify that the construction and installation of treatment has been provided according to plans.

WATER QUALITY TESTING

Water quality testing is important for all drinking water wells to identify water characteristics and determine treatment needs. See NYS DOH Fact Sheet #3, "Recommended Residential Water Quality Testing" for a recommended minimum list of parameters to test for. It is recommended to test for coliform bacteria every year and to periodically re-test water quality; this is particularly important for water supplies susceptible to contamination.

COUNTY OR STATE HEALTH DEPARTMENT APPROVAL PROCESS REQUIRING A SPECIFIC WAIVER FROM PART 75 OR A COUNTY SANITARY CODE PROVISION

The local health official (see below) for the geographic area where the property that will utilize the water source is located should be contacted for information about how to apply for a specific waiver or other county sanitary code approval. **It is recommended that, before an application for a waiver or other approval is submitted, the local health official be contacted regarding conceptual acceptability of the proposal.** A specific waiver or other approval **IS NOT** intended as a device for routinely approving individual water sources that do not meet state standards. It is intended to provide administrative flexibility to address rare cases when hardships exist and/or other circumstances that make it impractical to meet Appendix 5-B standards.

ADDITIONAL INFORMATION:

Appendix 5-B can be found at:

<http://www.health.state.ny.us/environmental/water/drinking/part5/appendix5b.htm>

NYSDEC registered well drillers can be found at: <http://www.dec.ny.gov/cfm/xtapps/WaterWell/index.cfm>

For a copy of Appendix 5-B or other Fact Sheets or questions concerning this Fact Sheet:

Contact Your Local Health Department:
https://www.health.ny.gov/environmental/water/drinking/doh_public_contacts_map.htm

or

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