

PWS ID **4318094** PWS Name **WELLFLEET MUNICIPAL WATER SYSTEM** Town: **WELLFLEET** Class: **COM**

**BACTERIA SAMPLING**  
 Apr - Sep: 1 per MONTH Season Start Date: 01/01  
 Oct - Mar 1 per MONTH Season End Date: 12/31  
 Refer to your DEP Coliform Sampling Plan for approved coliform sample locations. Systems open before or beyond the start/end dates must collect samples during these extra months.

Loc ID #	SAMPLE LOCATION	2017				2018				2019			
		MULT/SIN	R/F	D/S	WAIVER	QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4

**GROSS ALPHA PARTICLE ACTIVITY**

10003	WELL #1, WELL #2, WELL #3	M	F	S									
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												

[Next Sampling due in 2022]

**INORGANICS**

10003	WELL #1, WELL #2, WELL #3	M	F	S	Y								
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												
10004	BOY SCOUT CAMP WELLS #4 & #5	M	F	S	N								
4318094-04G	WELL #4												
4318094-05G	WELL #5												

[Source Waiver Granted: refer to your waiver determination for details]

**LEAD AND COPPER RULE**

10 APPROVED TAPS

**MANGANESE**

10003	WELL #1, WELL #2, WELL #3	M	F	S									
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												
10004	BOY SCOUT CAMP WELLS #4 & #5	M	F	S									
4318094-04G	WELL #4												
4318094-05G	WELL #5												

**NITRATE**

10003	WELL #1, WELL #2, WELL #3	M	F	S								X	
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												
10004	BOY SCOUT CAMP WELLS #4 & #5	M	F	S								X	
4318094-04G	WELL #4												
4318094-05G	WELL #5												

**NITRITE**

R/F = RAW OR FINISHED WATER; D/S = DISTRIBUTION OR SOURCE SAMPLE Waiver: (Y)es, or (N)o MULT/SIN: (MULT)iple sources or a (SIN)gle source

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		MULT/SIN	R/F	D/S	WAIVER	QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4

**NITRITE**

10003	WELL # 1, WELL #2, WELL # 3	M	F	S		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												
10004	BOY SCOUT CAMP WELLS #4 & #5	M	F	S		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4318094-04G	WELL # 4												
4318094-05G	WELL # 5												

**PERCHLORATE**

10003	WELL # 1, WELL #2, WELL # 3	M	F	S	Y	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												
10004	BOY SCOUT CAMP WELLS #4 & #5	M	F	S	N	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
4318094-04G	WELL # 4												
4318094-05G	WELL # 5												

**RADIUM 226 & RADIUM 228**

10003	WELL # 1, WELL #2, WELL # 3	M	F	S									
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												

[Next Sampling due in 2022]

**SECONDARY CONTAMINANTS**

10003	WELL # 1, WELL #2, WELL # 3	M	F	S									
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												
10004	BOY SCOUT CAMP WELLS #4 & #5	M	F	S									
4318094-04G	WELL # 4												
4318094-05G	WELL # 5												

[DEP recommends annual testing]

[DEP recommends annual testing]

**SODIUM**

10003	WELL # 1, WELL #2, WELL # 3	M	F	S		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
4318094-01G	WELL 1												
4318094-02G	WELL 2												
4318094-03G	WELL 3												

R/F = RAW OR FINISHED WATER;

D/S = DISTRIBUTION OR SOURCE SAMPLE

Waiver: (Y)es, or (N)o

MULT/SIN: (MULT)iple sources or a (SIN)gle source

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		MULT/SIN	R/F	D/S	WAIVER Y/N	QTR1	QTR2	QTR3	QTR4	QTR1	QTR2

**SYNTHETIC ORGANIC COMPOUNDS**

10003 WELL #1, WELL #2, WELL #3 M F S Y [Source Waiver Granted: refer to your waiver determination for details]

4318094-01G WELL 1  
 4318094-02G WELL 2  
 4318094-03G WELL 3  
 10004 BOY SCOUT CAMP WELLS #4 & #5 M F S Y [Source Waiver Granted: refer to your waiver determination for details]

**VOLATILE ORGANIC COMPOUNDS**

10003 WELL #1, WELL #2, WELL #3 M F S Y

4318094-01G WELL 1  
 4318094-02G WELL 2  
 4318094-03G WELL 3  
 10004 BOY SCOUT CAMP WELLS #4 & #5 M F S Y