At a meeting on March 29, 2017, which was attended by two members of the Board of Selectmen, the Board of Health reviewed the results of water tests of samples taken from the the Town Hall <u>kitchen</u> and <u>wellhouse</u> as well as samples analyzed in <u>2006</u> and <u>1996</u>. The current samples show – surprise! – high sodium; though there is not a limit, the guideline maximum is 20 mg/L. In addition, chloride, sediment, and total dissolved solids exceed DEP drinking water standards. As a result of these exceedances, the faucets in the kitchen and the three restrooms in Town Hall have been <u>posted</u>. A second bottled water source has been provided in the kitchen for easy access to drinking water on the lower level.

In practice, this changes very little. The water was already known to be only marginally drinkable, and the town has been providing bottled water for drinking for many years now. The kitchen, contrary to what some may think, has not been licensed by the Board of Health for the preparation of food from scratch for at least the last twenty-five years, so this does not change the status of the kitchen. (The kitchen may be used by those working or meeting in Town Hall for refrigeration, reheating, and dishwashing.) Posting the water in Town Hall merely formalizes what has been common knowledge for a long time.

That said, the results that we have seen do not suggest that the water is dangerous if drunk occasionally. There is no bacterial contamination that would make a person sick, and no evidence of contamination from septic systems. An extensive scan of volatile organic compounds indicates no cause for concern.

In the opinion of the Board of Health and our agents, the most likely source of the sodium, chloride, sediment, and dissolved solids in the water is road salt infiltrating the well through some deterioration or break in the well casing. We have not seen high levels of these parameters in other wells in the area about which we have information, suggesting that the problem is in our well itself.

The big question is what to do next. The three options are: do nothing and continue to rely on bottled water; attempt to rehabilitate the existing well; and drill a new well. In our opinion, it is not appropriate for the Board of Health to decide among these options. The costs, the benefits, and the risks of each course of action must be considered. We are turning our problem over to a higher power. For the moment, that higher power is the Board of Selectmen, who will consider this question at their meeting of April 4.

In this context, the question of further testing is on hold. The tests that were envisioned were a first-draw lead test, to determine if there are problems with the

plumbing, and a test for PCBs, which was to be done at the same time as PCB scans of water from the Fire Station and Highway Department (bundling them saves money). If the Town makes the decision to try to repair the well, these tests will of course be necessary.