	Connecticut Department of	of Public H	Health	Dr	inkir	ng V	Vatei	r Se	ection	
	Water Quality Mon					_				
PWS ID	PWS Name	itoring an	u con	_				_	mor Typo P	rimary Source
CT0820051	POWDER RIDGE SKI LODGE-MAIN BLDG				NTNC	II PO	100	IOW	P P	GW
	where applicable)	Service	Residen			rcial	Industr	·ial	Combined	
99 POWDER HI		Connections		tiai C	2	Clai	muusti	iai	Combined	Agricultural
Towns Served:										
TOWNS SERVEG.		toring Pog	uiromo	ntc						
Water System	Facility: DISTRIBUTION SYSTEM (WSF	itoring Requ	ullellle	1115						
Asbestos (10	,	15. 00000					1 r	outi	ne (RT) ne	r nine years
-	Point (Sampling Point ID)		Monitori	na Pe	riod	Colle	ection Pe			ance Status
	m Inventory of Active Sampling Points		1/1/20 -							
Total Colifor			, , -	, -	<u>, -                                   </u>			1 ro	utine (RT)	per quarter
	Point (Sampling Point ID)		Monitori	ng Pe	riod	Colle	ection Pe			ance Status
	m Inventory of Active Sampling Points		4/1/25 -							mplete
			7/1/25 -	9/30,	/25				Со	mplete
			10/1/25 -	12/3	1/25				Со	mplete
			1/1/26 -	3/31,	/26					
			4/1/26 -	6/30,	/26					
Lead And Co	pper (PBCU)						5 ro	utin	e (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ng Pe	riod	Colle	ection Pe	erioa	l Compli	ance Status
Select from	m Inventory of Active Sampling Points		1/1/24 -	12/31	L/26	(	6/1-9/30	)		
			1/1/27 -	12/31	L/29	(	6/1-9/30	)		
<b>Physical Para</b>	ameters (PPS)							1 ro	utine (RT)	per quarter
	Point (Sampling Point ID)		Monitori			Colle	ection Pe	eriod	l Compli	ance Status
Select from	m Inventory of Active Sampling Points		4/1/25 -							mplete
			7/1/25 -							mplete
			10/1/25 -						Со	mplete
			1/1/26 -							
		-1	4/1/26 -	6/30,	/26					
-	Facility: ENTRY POINT (WSF ID: 00700	0)								
_	emicals (IOCS)					- "				three years
	Point (Sampling Point ID)		Monitori			Colle	ection Pe	eriod		ance Status
ENTRY PO	IN1 (3)		1/1/23 -						Co	mplete
Nituata And	Niteria - (NOV)		1/1/26 -	12/31	1/28					) T)
	Nitrite (NOX) Point (Sampling Point ID)		Monitori	na Po	riod	Colle	ection Pe		<del>-</del>	RT) per year ance Status
ENTRY PO			1/1/24 -			Cone	ction Pe	eriou		mplete
ENTRIPO	iivi (3)		1/1/25 -							mplete
			1/1/26 -		-					Implete
Pesticides H	erbicides and Polychlorinated Biphenyls	(PCRs) (SOCS		12,31	., 20		1 ro	utin	e (RT) ner	three years
	Point (Sampling Point ID)	, (i cbs) (50cs	Monitori	na Pe	riod	Colle	ection Pe			ance Status
ENTRY PO			1/1/23 -			20116	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			mplete
	• ,		1/1/26 -							
Organic Cher	nicals (VOCS)							1	L routine (F	RT) per year
_	Point (Sampling Point ID)		Monitori	ng Pe	riod	Colle	ection Pe		_	ance Status
ENTRY PO	INT (3)		1/1/24 -	12/31	L/24					mplete
Organic Cher	nicals (VOCS)						1 ro	utin	e (RT) per	three years
Sampling	Point (Sampling Point ID)		Monitori	ng Pe	riod	Colle	ection Pe	eriod	l Compli	ance Status

	Connecticut Dep						_		ection		
		ality Monit	coring an								
PWS ID	PWS Name			(	Classifi	cation	Popu	llation Ov	vner Type P	rimary	/ Source
СТ082005	POWDER RIDGE SKI LODGI	E-MAIN BLDG			ITN	NC	1	00	Р	G'	W
Local Add	ress (where applicable)		Service	Residenti	al Co	mmerc	ial Ir	ndustrial	Combined	l Agri	cultura
99 POWD	ER HILL ROAD		Connections			2					
Towns Ser	rved: MIDDLEFIELD										
			oring Requ	iiremen	ts						
•	stem Facility: <b>ENTRY POINT</b>	(WSF ID: 00700)									
•	Chemicals (VOCS)								ne (RT) per		-
	pling Point (Sampling Point ID)			Monitorin			Collect	ion Period	d Compl	iance :	Status
ENTF	RY POINT (3)			1/1/26 - 1		28					
		Other C	ompliance	Schedu	ıles						
Complian	ce Schedule Activity			Di	ue Dat	te		Achieved	d Date		
CROSS CO	NNECTION SURVEY REPORT			3/	/1/202	.6					
	Water	System Facili	ity and Sar	npling F	Point	t Inve	ento	ry			
Water						7	otal	Lead and	d		
System	Water System Facility	Sampling Point		nt			liform				Stage
Facility IE	)	ID	Description		Sta	tus l	Rule	Rule Tie	r Asbestos	WQP	2 DBPF
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	I SYSTEM	Δ	١.	Υ				
		DOWNSTREAM	WITHIN 5 SER	VICE CON	Δ	١.					
		PR-2FHS1	2ND FL HAND	SINK 1	Δ	١	Υ	Ν			
		PR-2FHS2	2ND FL HAND	SINK 2	Δ	١	Υ	N			
		PR-2FM	2ND FLOOR M	1ENS RM	Δ	4	Υ	N			
		PR-2FW	2ND FLOOR W	OMENS R	M A	4	Υ	N			
		PR-BHS1	BAR HAND SI	NK 1	Δ	4	Υ	N			
		PR-HS1	HAND SINK #1	L	Δ	١	Υ	N	Υ		
		PR-HS2	HAND SINK #2	<u> </u>	Δ	١	Υ	Ν	Υ		
		PR-HS3	HAND SINK #3	3	Δ	٨	Υ	Ν	Υ		
		PR-MRL	MENS ROOM	LEFT SINK	Δ	١	Υ	N			
		PR-MRR	MENS ROOM	RIGHT SIN	K A	١	Υ	N			
		PR-POTS	POT SINK		Δ	١	Υ	N			
		PR-PROD	PRODUCE SIN	K	Δ	١	Υ	N			
		PR-WRC	WOMENS RO	OM CENTE	R A	٨	Υ	N			
		PR-WRL	WOMENS RO	OM LEFT SI	IN A	١	Υ	N			
		PR-WRR	WOMENS RO				Y	N			
		UPSTREAM	WITHIN 5 SER		Δ.			- •			
00700	ENTRY POINT	3	ENTRY POINT		Δ						
22989	MAIN LODGE ARTESIAN WELL	2	WELL 1		Α						
			Operator	Informa							
Water Sy	rstem Facility: <b>DISTRIBUTION</b>										
	assification: SMALL WATER SYSTE									Certi	fication
Operator	Name	Operator Typ	e Ce	ertification	(s)					_	iration
RADICCHI	, PAUL J.	CHIEF OPERATO	DR DI	STRIBUTIO	N SYST	EM OF	PERAT	OR - CLAS	S III	6/30	0/2027

WATER TREATMENT PLANT OPERATOR - CLASS II

12/31/2027

Connecticut Department of Public Health	i Drinking	g Water	Section	
Water Quality Monitoring and Con	npliance S	Schedul	le	
PWS Name	Classification	Population	Owner Type	Primary S

PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Sourc
CT0820051 POWDER RIDGE SKI LODGE-MAIN BLDG					NTNC	100	Р	GW
Local Address (v	Service	Resider	ntial	Commercia	al Industri	al Combine	ed Agricultura	
99 POWDER HII	Connections			2				

Towns Served: MIDDLEFIELD

Contact Information									
Name			Job Title						
Mr. Sean Hayes Powdr Ridge Mtn Prk&Resort,LLC							Owner		
Mailing Address Lin	e One		Mailing Address Line Two				City	State	Zip Code
161 Brownstone Av	enue					Portland		СТ	06480
Business Phone Extension Fax				Mobile Phone	Emergency Phone	Email Address			
866-860-0208 860-342-			5017			shayes@	brownston	epark.com	

Contact Role(s): Administrative Contact, Legal Contact, Owner

## Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department of	f Public F	lealth	D	rinki	ng ˈ	Water	Se	ection	1		
	Water Quality Monit					_			cction			
PWS ID	PWS Name	0011118 0111	0.001				opulation		ner Type	Pri	marv S	ource
CT0820072	THE ROGERS MANUFACTURING COMPANY			0.0	NTNC		100		Р		GW	
	(where applicable)	Service	Resider	ntial	Commo	ercial		al	Combin	ed	Agricu	
72 MAIN STRE		Connections	1									
	: MIDDLEFIELD											
	Monit	oring Requ	ıireme	nto	•							
Water Syster	m Facility: DISTRIBUTION SYSTEM (WSF I											
Asbestos (1	.094)						1 ro	uti	ne (RT)	per	nine v	ears
•	g Point (Sampling Point ID)		Monitor	ing F	Period	Col	lection Per				nce Sto	
	om Inventory of Active Sampling Points		1/1/20 -							-		
Total Colifor							1	. ro	utine (R	T) p	er qua	arter
	g Point (Sampling Point ID)		Monitor	ing F	Period	Col	lection Per		<del>-</del>		nce Sto	
	om Inventory of Active Sampling Points		4/1/25							_	nplete	
			7/1/25	- 9/3	30/25					Con	nplete	
			10/1/25	- 12/	/31/25					Con	nplete	
			1/1/26	- 3/3	31/26						-	
			4/1/26									
Lead And Co	opper (PBCU)						5 rou	ıtin	e (RT) p	er t	hree y	ears
	g Point (Sampling Point ID)		Monitor	ing F	Period	Col	lection Per				nce Sto	
Select fro	om Inventory of Active Sampling Points		1/1/24 -	12/3	31/26		6/1-9/30					
			1/1/27 -	12/3	31/29		6/1-9/30					
Physical Par	ameters (PPS)						1	. ro	utine (R	T) p	er qua	arter
-	g Point (Sampling Point ID)		Monitor	ing F	Period	Col	lection Per		-		nce Sto	
Select fro	om Inventory of Active Sampling Points		4/1/25	- 6/3	0/25					Con	nplete	
			7/1/25	- 9/3	80/25					Con	nplete	
			10/1/25	- 12/	/31/25					Con	nplete	
			1/1/26	- 3/3	31/26							
			4/1/26	- 6/3	30/26							
Water Syster	m Facility: ENTRY POINT (WSF ID: 00700)											
Nitrate (104	40)						1	. ro	utine (R	T) p	er qua	arter
Sampling	Point (Sampling Point ID)		Monitor	ing F	Period	Col	lection Per		<del>-</del>		nce Sto	
ENTRY PO	OINT (3)		4/1/25	- 6/3	30/25					Con	nplete	
			7/1/25	- 9/3	30/25					Con	nplete	
			10/1/25	- 12/	/31/25					Con	nplete	
			1/1/26	- 3/3	31/26							
			4/1/26	- 6/3	30/26							
Nitrite (104	1)							1	routine	(R	T) per	year
•	g Point (Sampling Point ID)		Monitor	ing F	Period	Col	lection Per			-	nce Sto	-
ENTRY PO	OINT (3)		1/1/24 -	12/3	31/24					Con	nplete	
			1/1/25 -	12/3	31/25					Con	nplete	
			1/1/26 -	12/3	31/26							
Inorganic Ch	nemicals (IOCS)						1 rou	ıtin	e (RT) p	er t	hree y	ears
_	g Point (Sampling Point ID)		Monitor	ing F	Period	Col	lection Per				nce Sto	
ENTRY PO	ENTRY POINT (3)				31/26							
			1/1/27 -	12/3	31/29							
Pesticides, H	Herbicides and Polychlorinated Biphenyls (	PCBs) (SOCS	)				1 rou	ıtin	e (RT) p	er t	hree y	ears
- "		, ,									•	

**Monitoring Period** 

**Collection Period** 

Sampling Point (Sampling Point ID)

**Compliance Status** 

	Connecticut D	epartment of	Public H	lealth	Drink	ing W	ater S	ection	
	Water (	Quality Monit	oring an	d Com	plian	ce Sch	edule		
PWS ID	PWS Name				Classificat	tion Pop	ulation Ov	vner Type	Primary Source
СТ0820072	THE ROGERS MANUFA	CTURING COMPANY			NTNC		100	Р	GW
Local Addre	ss (where applicable)		Service	Resident	ial Comn	nercial	ndustrial	Combine	d Agricultura
72 MAIN ST	REET		Connections	1					
Towns Serve	ed: MIDDLEFIELD			1				1	
		Monite	oring Requ	uireme	nts				
Water Syst	em Facility: ENTRY POIN	NT (WSF ID: 00700)							
Pesticides	, Herbicides and Polychlo	rinated Biphenyls (	PCBs) (SOCS	)			1 routir	ne (RT) pe	r three years
Sampli	ng Point (Sampling Point ID	)		Monitori	ng Period	Collec	tion Period	d Comp	liance Status
ENTRY	POINT (3)			1/1/23 - 3	12/31/25				
				1/1/26 - 3	12/31/28				
Organic Cl	nemicals (VOCS)						1 rc	utine (RT	) per quarte
Sampli	ng Point (Sampling Point ID	)		Monitori	ng Period	Collec	tion Period	d Comp	liance Status
ENTRY	POINT (3)		_	4/1/25 -	6/30/25			C	omplete
				7/1/25 -	9/30/25			C	omplete
				10/1/25 -	12/31/25			C	Complete
				1/1/26 -	3/31/26				·
				4/1/26 -					
Organic Cl	nemicals (VOCS)						1 routir	ne (RT) pe	r three years
_	ng Point (Sampling Point ID	)		Monitorii	ng Period	Collec	tion Period		liance Status
_	POINT (3)	•		1/1/23 -		1,	1-3/31	•	Complete
	em Facility: WELL (WSF	ID: 10393)		· ·					•
E. Coli (30	,						1 rc	utine (RT	) per quarte
<del>-</del>	ng Point (Sampling Point ID	)		Monitorii	na Period	Collec	tion Period	· <del>-</del>	liance Status
WELL (		/		4/1/25 -	_	Conce	cioni i criot		Complete
***************************************	<u>-1</u>			7/1/25 -					Complete
		011 0							ompiete
		Otner C	ompliance						
	Schedule Activity			L	Due Date		Achieved	l Date	
CROSS CON	NECTION SURVEY REPORT			3	3/1/2025				
	Wat	er System Facili	ity and Sar	mpling	Point I	nvento	ry		
Water		-	-			Total	Lead and	d	
System V	Vater System Facility	Sampling Point	Sampling Poi	nt		Coliforn			Stage
Facility ID		ID	Description		Status	Rule	Rule Tie	r Asbesto	s WQP 2 DBP
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION	N SYSTEM	Α	Υ			
		5	OFF WR SINK		Α	Υ	2	Υ	Υ
		6	OFF MR SINK		Α	Υ	2	Υ	Υ
		7	PLANT MR SIN	٧K	Α	Υ	2	Υ	Υ
		8	PLANT LMR S	INK	Α	Υ	2		
		9	PLANT RWR S	INK	Α	Υ	2	Υ	Υ
		DOWNSTREAM	WITHIN 5 SER	VICE CON	Α				
		UPSTREAM	WITHIN 5 SER	VICE CON	Α				
00700 E	NTRY POINT	3	ENTRY POINT		Α				
10393 V		2	WELL		Α				
		Certified	Operator	Inform					
		CCILIICU							

Page 5

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name		Cla	ssification	Population	Owner Type	Primary Source				
СТ0820072	THE ROGERS MANUFACTURING COMPANY				NTNC	100	Р	GW			
Local Address	Service	Resider	ntial	Commerci	al Industri	al Combine	ed Agricultural				
72 ΜΔΙΝΙ STRE	FT	Connections	1								

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

# **Certified Operator Information**

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

Facility Classification: SMALL W	/ATER SYSTEM		Certification
Operator Name	Operator Type	Certification(s)	Expiration
HELMING, TRAVIS	CHIEF OPERATOR	WATER TREATMENT PLANT OPERATOR - CLASS III	9/30/2028
		DISTRIBUTION SYSTEM OPERATOR - CLASS III	9/30/2028

Contact Information										
Name				Organization			Job Title			
Ms. Elizabeth Bitel				The Rogers N	Nanufacturing Co.		Hr Manager			
Mailing Address Lin	e One		Mailing Add	ess Line Two			City	State	Zip Code	
72 Main St			PO Box 155			Rockfall		СТ	06481	
Business Phone	Extension	Fax	M	obile Phone	Emergency Phone	Email Ad	dress			
860-346-8648						ebitel@r	mc1891.com			

Contact Role(s): Administrative Contact, Legal Contact, Owner

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Department				`			ection	
	Water Quality Mo	nitoring an	d Con	npli	ance	Sched	ule		
PWS ID	PWS Name			Class	ification	Populati	on O	wner Type	Primary Source
CT0820362	MIDDLEFIELD FEDERATED CHURCH			N	ITNC	53		Р	GW
Local Address	(where applicable)	Service	Residen	ntial (	Commerc	ial Indu	strial	Combine	ed Agricultural
390 MAIN STR		Connections			1				
Towns Served:	MIDDLEFIELD				_	_			
Mala Galas		nitoring Requ	iireme	ents					
•	n Facility: DISTRIBUTION SYSTEM (W	SF ID: 00600)						. />-\	•
Asbestos (1	-								er nine years
	Point (Sampling Point ID)		Monitor			Collection	Perio	a Com	pliance Status
	m Inventory of Active Sampling Points		1/1/20 -	12/31	./28			(DT)	
Total Alkalin	Point (Sampling Point ID)		Monitor	ina Do	riod (	2 Collection			er six months pliance Status
	m Inventory of Active Sampling Points		<i>Monitor</i> 7/1/25 -			Juection	reno	u Com	phance status
Jelect II o	in inventory of Active Sampling Forms		1/1/26		•				
<b>Total Colifor</b>	m (3100)						1 rc	outine (R1	Γ) per quarter
Sampling	Point (Sampling Point ID)		Monitor	ing Pe	riod (	Collection	Perio	d Com	pliance Status
Select fro	m Inventory of Active Sampling Points		4/1/25	- 6/30,	/25				Complete
			7/1/25 -	- 9/30,	/25			(	Complete
		:	10/1/25 -	- 12/3	1/25				
			1/1/26 -						
			4/1/26	- 6/30,	/26				
	pper (PBCU)								er six months
	Point (Sampling Point ID)		Monitor			Collection	Perio		pliance Status
Select fro	m Inventory of Active Sampling Points		1/1/25						Complete
			7/1/25 -		-			-	Complete
			1/1/26	- 6/30,	/26				_,
-	ameters (PPS)		0.0	D		- II <b></b>		<del>-</del>	「) per quarter
	Point (Sampling Point ID)		Monitor			Collection	rerio		Complete
select tro	m Inventory of Active Sampling Points		4/1/25						Complete Complete
			7/1/25 - 10/1/25 -						complete
			1/1/26						
			4/1/26						
Water Systen	n Facility: ENTRY POINT (WSF ID: 007	700)	4/1/20	- 0/30/	720				
•	emicals (IOCS)					1	routi	ne (RT) ne	er three years
•	Point (Sampling Point ID)		Monitor	ing Pe	riod (	Collection			pliance Status
ENTRY PC			1/1/24 -						
	- · ·		1/1/27 -						
Nitrate And	Nitrite (NOX)							1 routine	(RT) per year
	Point (Sampling Point ID)		Monitor	ing Pe	riod (	Collection			pliance Status
ENTRY PC	DINT (3)		1/1/24 - 12/31/24		./24				Complete
			1/1/25 -	12/31	./25				Complete
			1/1/26 -	12/31	./26				
	(a. a. a. a.								

**Monitoring Period** 

7/1/25 - 12/31/25

1/1/26 - 6/30/26

Lead And Copper (PBCU)

**ENTRY POINT (3)** 

Sampling Point (Sampling Point ID)

1 routine (RT) per six months

**Compliance Status** 

**Collection Period** 

	Conno	cticut Department of I	Public I	Haalth Drink	ing Water Se	oction
	Comine	*				CCIOII
DIAIC ID	DVA/C NI	Water Quality Monito	n mg an			T D: C
PWS ID	PWS Name					ner Type Primary Source
CT0820362		ELD FEDERATED CHURCH		NTNC	53	P GW
Local Address		-	Service Connections	Residential Comm		Combined Agricultura
390 MAIN STR			Connections		L	
Towns Served:	MIDDLEFIEL					
		Monito	ring Req	uirements		
Water Systen	n Facility:     l	ENTRY POINT (WSF ID: 00700)				
Pesticides, H	lerbicides a	nd PCBs-Phase II (SOC2)			1 routine	e (RT) per three years
Sampling	Point (Samp	oling Point ID)		<b>Monitoring Period</b>	Collection Period	Compliance Status
ENTRY PC	OINT (3)			1/1/23 - 12/31/25		
				1/1/26 - 12/31/28		
Pesticides, H	lerbicides a	nd PCBs-Phase V (SOC5)			1 routine	e (RT) per three years
Sampling	Point (Samp	oling Point ID)		<b>Monitoring Period</b>	Collection Period	Compliance Status
ENTRY PC	OINT (3)			1/1/23 - 12/31/25		
				1/1/26 - 12/31/28		
Organic Che	micals (VO	cs)			1 routine	e (RT) per three years
Sampling	Point (Samp	oling Point ID)		<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY PC	DINT (3)			1/1/25 - 12/31/27		Complete
Water Systen	n Facility:	WELL #1 (WSF ID: 10762)				
E. Coli (3014	4)				1 rou	ıtine (RT) per quarter
•	•	oling Point ID)		<b>Monitoring Period</b>	<b>Collection Period</b>	Compliance Status
WELL #1	(2)			4/1/25 - 6/30/25		Complete
				7/1/25 - 9/30/25		Complete
				10/1/25 - 12/31/25		·
				1/1/26 - 3/31/26		
				4/1/26 - 6/30/26		
	Mor	nthly Water System Facilit	v (WSF)	, , , ,	ing Requireme	nts
Water Systen		ENTRY POINT (WSFID: 00700)	., (113. )		ing requireme	
Analyte		Monitoring Requirement (Summar	v Tvpe)	Operating Limi	t	Samples Req/Month
рН		Entry Point pH Monitoring (PHRD)	7 - 717	Minimum: 7.0		4
•	: 10/1/2016		Compli	ance History:	Operating Limit	Monitoring
000102000	0, -, -0-0		•	ring Period	Compliance Status	
				25 - 7/31/2025	compliance status	
				25 - 8/31/2025		
				25 - 9/30/2025		
				025 - 10/31/2025		
				025 - 11/30/2025		
Analyte		Monitoring Requirement (Summar		Operating Limi	t	Samples Req/Month
pH		Entry Point pH Monitoring (PHRD)	7 - 710 - 7	Maximum: 7.6		4
•	6/1/2025	,	Compli	ance History:		Monitoring
	-, -, -020		-	ring Period	Operating Limit Compliance Status	
				25 - 7/31/2025	Y	
				25 - 8/31/2025	N	
				25 - 9/30/2025	Y	
				025 - 10/31/2025	Υ	
				025 - 10/31/2025	Y	
			11/1/20	723 - 11/30/2023	ī	

	С	onnecticu	•						_		ection	
			er Qua	lity Monit	oring a	na Con						
PWS ID		VS Name						ificatio				rimary Source
CT082036		IDDLEFIELD FED	ERATED CH	URCH		5		TNC		53	Р	GW
		re applicable)			Service Connection	Residen	tial C	omme	ercial I	Industrial	Combined	Agricultural
390 MAIN					Connection	15		1				
Towns Ser	rvea: MIL	DULEFIELD										
				Other Co	omplian	ce Sched	ules	3				
Complian	ce Schedu	ıle Activity					Due D	ate		Achieved	Date	
SAMPLING	G SITE PLA	AN				6	/26/2	025				
SUBMIT LI	EAD CON	SUMER NOTICE	CERTIFICAT	Έ		3	/31/2	026				
CROSS CO	NNECTIO	N EXEMPTION					3/1/20	030				
		V	Water Sy	stem Facili	ity and S	ampling	Poir	nt In	vento	ory		
Water									Total	Lead and	1	
System		ystem Facility		Sampling Point					Coliforn			Stage
Facility ID				ID	Description	1	St	atus	Rule	Rule Her	Aspestos	WQP 2 DBPR
00600	DISTRIB	UTION SYSTEM		10002	KITCHEN			A	Y			
				10003	1ST FL HAN			A	Y			
				10004	1ST FL SMA			A	Y			
				10012		ALL HANDIC		A	Y			
				10013		R SMALL BAT	I H	A	Y			
				20007	1ST FL BOY	_		A	Y			
				20008	1ST FL GIRL			A	Y			
				20010	2ND FL GIR			A	Y			
				20011	2ND FL STA			A	Y Y			
				4 DOWNSTREAM		ON SYSTEM		A A	ĭ			
				UPSTREAM		ERVICE CON		A				
00700	ENTRY P	OINT		3	ENTRY POI			A				
10762	WELL #1			2	WELL #1	N I		A				
46416		FIELD FEDERATE	:D	2	VV LLL #1							
		ENT STATION										
				Certified	Operato	r Inform	atio	n				
Water Sy	stem Fa	cility: DISTRIE	BUTION SY	STEM (WSF II	D: 00600)							
_	_	on: SMALL WAT	ER SYSTEM									Certification
Operator	Name			Operator Type	е	Certificatio	n(s)					Expiration
SEHL, ROE	BERT			CHIEF OPERATO	)R	WATER TRE	ATME	NT PL	ANT OP	ERATOR - C	LASS II	3/31/2026
						DISTRIBUTION	ON SY	STEM	OPERAT	TOR - CLASS	II	3/31/2028
				Con	tact Info	rmation						
Name				Or	rganization						Job Title	
Middlefie	ld Federa	ted Church Inc										
Mailing A	ddress Lir	ie One		Mailing Address	s Line Two				(	City	State	Zip Code
390 Main	St & Rt 1	57			<del>.</del>			Mid	dlefield		СТ	06455
Busines	s Phone	Extension	Fax	Mobi	le Phone	Emergency	Phon					
860-34	9-9881							chu	rch.mfc	@gmail.con	n	
Contact R	ole(s): Le	egal Contact, Ov	wner									

	Connectic	ut Depa	rtment of	f Public	Health	Dri	nking	Water	Sec	tion	
			lity Monit				U				
PWS ID	PWS Name					Classif	fication P	opulation	Owne	r Type F	rimary Source
CT0820362	MIDDLEFIELD FE	DERATED CH	IURCH			N	ΓNC	53	F	)	GW
Local Address (w	here applicable)			Service	Resident	ial Co	ommercial	Industria	al Co	ombined	Agricultural
390 MAIN STREE	Γ			Connection	ns		1				
Towns Served: M	IDDLEFIELD					-		1			<u> </u>
Name			О	rganization					J	ob Title	
Mr. Paul Bergenl	noltz		M	1iddlefield Fe	ederated Chu	ırch		Building A	nd Gro	ounds	
Mailing Address I	ine One		Mailing Addres	s Line Two				City		State	Zip Code
402 Main Street							Middlefi	eld		СТ	06455
Business Phone	e Extension	Fax	Mob	ile Phone	Emergency	Phone	Email Ad	dress			
860-349-9881					860-510-9	9198	bergenh	oltz@sbcgl	obal.n	et	
Contact Role(s):	Administrative	Contact									
Name	1		О	rganization					J	ob Title	
Mr. John Lyman	III		M	1iddlefield Fe	ederated Chu	ırch		Church M	oderat	or	
Mailing Address I	ine One		Mailing Addres	s Line Two				City		State	Zip Code
402 Main Street							Middlefi	eld		СТ	06455
Business Phone	Extension	Fax	Mob	ile Phone	Emergency	Phone	Email Ad	dress			
860-349-9881					860-510-9	9198	church.m	nfc@gmail	.com		
Contact Role(s):	Legal Contact						1				
DI											

# Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Water Quality Monit				U			
PWS ID	PWS Name			Clas	ssification	Population	Owner Type I	Primary Source
CT0820382	THE INDEPENDENT DAY SCHOOL				NTNC	199	Р	GW
Local Address	(where applicable)	Service	Residen	itial	Commercia	Industria	al Combine	d Agricultural

Connecticut Department of Public Health Drinking Water Section

Local Address (Where applicable)	SCIVICC	ricorderreiar	Commicic	maastriai	COMBIN	ca / ignicalitari
115 LAUREL BROOK ROAD	Connections	1				
Towns Served: MIDDLEFIELD	'			'		,
Mo	nitoring Requ	uirement	S			
Water System Facility: DISTRIBUTION SYSTEM (W	/SF ID: 00600)					
Asbestos (1094)				1 rou	tine (RT) <sub>I</sub>	per nine years
Sampling Point (Sampling Point ID)		<b>Monitoring</b>	Period (	Collection Perio	od Com	pliance Status
Select from Inventory of Active Sampling Points		1/1/20 - 12/	31/28			
Total Coliform (3100)				1	routine (F	RT) per month
Sampling Point (Sampling Point ID)		<b>Monitoring</b>	Period (	Collection Perio	od Com	pliance Status
Select from Inventory of Active Sampling Points		7/1/25 - 7/3	31/25			Complete
		8/1/25 - 8/3	31/25			Complete
		9/1/25 - 9/3	30/25			Complete
		10/1/25 - 10,	/31/25			Complete
		11/1/25 - 11,	/30/25			Complete
		12/1/25 - 12,	/31/25			
		1/1/26 - 1/3	31/26			
		2/1/26 - 2/2	28/26		routine (RT) pad Complian  Com  Com  Com  Com  Com  Com  Com  Co	
		3/1/26 - 3/3	31/26			
		4/1/26 - 4/3	30/26			
		5/1/26 - 5/3	31/26			
		6/1/26 - 6/3	30/26			
Total Coliform (3100)				3	3 repeat (F	RP) per period
Sampling Point (Sampling Point ID)		<b>Monitoring</b>	Period (	Collection Perio	od Com	pliance Status
Select from Inventory of Active Sampling Points		7/9/25 - 7/2	L4/25			Complete
Lead And Copper (PBCU)				10 rou	tine (RT) p	er six months
Sampling Point (Sampling Point ID)		<b>Monitoring</b>	Period (	Collection Perio	od Com	pliance Status
Select from Inventory of Active Sampling Points		1/1/25 - 6/3	30/25			Complete
		7/1/25 - 12/	31/25			
		1/1/26 - 6/3	30/26			
Physical Parameters (PPS)				1	routine (F	RT) per month
Sampling Point (Sampling Point ID)		Monitoring	Period (	Collection Perio	od Com	pliance Status
Select from Inventory of Active Sampling Points		7/1/25 - 7/3	31/25			Complete
		8/1/25 - 8/3	31/25			Complete
		9/1/25 - 9/3	30/25			Complete
		10/1/25 - 10,	/31/25			Complete
		11/1/25 - 11,	/30/25			Complete
		12/1/25 - 12,	/31/25			
		1/1/26 - 1/3	31/26			
		2/1/26 - 2/2	28/26			
_		3/1/26 - 3/3	31/26			
		4/1/26 - 4/3	30/26			
		5/1/26 - 5/3	31/26			
I The state of the		6/1/26 - 6/3				

NOTE: This information has been provided to help owners and operators of public water systems maintain compliance with drinking water quality monitoring requirements. Any inaccuracies contained herein will not relieve the owner or operator of the requirement to maintain compliance with the applicable regulations.

Conno	acticut Danantmant of	Dublia II	[aal+h]	Duinl	lring I	Motor Co	ation	
Comile	ecticut Department of						ection	
	Water Quality Monito	oring and	d Com	plian				
PWS ID PWS Nam	ie		(	Classifica		-	ner Type Pr	rimary Source
	PENDENT DAY SCHOOL	T		NTN		199	Р	GW
Local Address (where appl	· · · · · · · · · · · · · · · · · · ·	Service	Residenti	al Com	nmercial	Industrial	Combined	Agricultural
115 LAUREL BROOK ROAD		Connections	1					
Towns Served: MIDDLEFIE	LD							
	Monito	oring Requ	iremen	ts				
Water System Facility:	ENTRY POINT (WSF ID: 00700)							
Inorganic Chemicals (Id	ocs)					1 routine	e (RT) per	three years
Sampling Point (Sam	pling Point ID)		Monitorin	g Period	d Colle	ection Period	Compli	ance Status
ENTRY POINT (3)			1/1/23 - 1	2/31/25	5			
			1/1/26 - 1	2/31/28	3			
Nitrate And Nitrite (NO	OX)					1	routine (R	T) per year
Sampling Point (Sam	pling Point ID)		Monitorin	g Period	d Colle	ection Period	Compli	ance Status
ENTRY POINT (3)			1/1/24 - 1					mplete
			1/1/25 - 1				Со	mplete
			1/1/26 - 1	2/31/26	5			
<u>-</u>	and PCBs-Phase II (SOC2)							three years
Sampling Point (Sam	pling Point ID)		Monitorin	_		ection Period		ance Status
ENTRY POINT (3)			1/1/23 - 1				Со	mplete
			1/1/26 - 1	2/31/28	3		<i>i</i>	
-	and PCBs-Phase V (SOC5)						· · · · ·	three years
Sampling Point (Sam	pling Point ID)		Monitorin			ection Period	-	ance Status
ENTRY POINT (3)			1/1/23 - 1				Со	mplete
			1/1/26 - 1	2/31/28	3		(5-5)	_
Organic Chemicals (VO	-			a Davis	- C-II			per quarter
ENTRY POINT (3)	pling Point ID)		Monitorin	_		ection Period	-	ance Status
ENTRY POINT (5)			4/1/25 - 6 7/1/25 - 9					mplete
			7/1/25 - 3 10/1/25 - 1					mplete mplete
		•	1/1/26 - 3				CO	Inplete
			4/1/26 - 6					
Water System Facility:	WELL (WSE ID: 1020E)		4/1/20-0	0/30/20				
E. Coli (3014)	WELL (W3F ID. 10333)					1 tria	garad (TG)	per period
Sampling Point (Sam	nling Point ID)		Monitorin	a Derina	d Colle	ung: ection Period		ance Status
WELL (2)			7/8/25 - 7			ection remou		mplete
· ,	nthly Water System Facili	+v /\\/SE\ I				aduirama		Inpiete
	ENTRY POINT (WSFID: 00700)	ty (vvoi / t	-cvci ivi	Omto	illig iv	equilenie	1103	
Analyte	Monitoring Requirement (Summa	umu Tumol	Onore	ating Lin	nit.		Samples Re	na /Manth
Orthophosphate	Entry Point Phosphate Monitoring		-	_	0 MG/L		2	-
Start Date: 9/1/2022	Entry Fourt Phosphate Monitoring		nce Histor			At		
July 2022		-	ing Period	-	-	ating Limit Diance Status	Monitor Complia	nce Status:
			5 - 7/31/20		Comp	N		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,
			5 - 8/31/20			N		
			5 - 9/30/20			N		
			25 - 10/31/			Υ		
			25 - 11/30/					
			, ,					

	Conne	ecticut De	epartment of	Public H	ealth	Drinl	king	Wate	er Se	ection		
			uality Monit									
PWS ID	PWS Nam		dancy Monic	oring and	a Con					ner Type	Drimary	Source
CT082038		PENDENT DAY	SCHOO!			NTN		199	on Ow	P P	GV	
	Iress (where appl		SCHOOL	Service	Residen		mercial	T	trial	Combine	_	cultural
	EL BROOK ROAD	-		Connections	1	tiai Com	IIIEICIAI	illuus	uiai	Combine	u Agiii	cuitui ai
	rved: MIDDLEFIE				1							
			(WSFID: 00700)									
Analy	•		equirement (Summa	ary Type)	Ope	rating Lin	nit			Samples	Req/Mo	onth
_	phosphate	<spaces> ( )</spaces>				imum: 3.				•	2	
	Date: 9/1/2022	. , ,		Complia			-	rating Li	mit	Monito	oring	
				Monitori	ng Perio	d		pliance			iance St	atus:
				7/1/2025								
				8/1/2025	5 - 8/31/2	2025						
				9/1/2025	5 - 9/30/2	2025						
				10/1/202	25 - 10/3	1/2025						
				11/1/202	25 - 11/30	0/2025						
Analy	te	Monitoring R	equirement (Summa	ary Type)	Ope	rating Lin	nit			Samples	Req/Mo	onth
pH Entry Point pH Monitoring (PHRD) Minimum: 7.0 PH 4												
Start [	Date: 9/1/2022			Complia	nce Histo	ory:	Ope	rating Li	mit	Monito	oring	
				Monitori	ng Perio	d		pliance			iance St	atus:
				7/1/2025	5 - 7/31/2	2025		Υ				
				8/1/2025	5 - 8/31/2	2025		Υ				
				9/1/2025	5 - 9/30/2	2025		Υ				
				10/1/202	25 - 10/3	1/2025		Υ				
				11/1/202	25 - 11/30	0/2025		Υ				
			Other Co	ompliance	Sched	lules						
Complian	ce Schedule Acti	vity				Due Date		Ach	nieved	Date		
CROSS CO	ONNECTION SURV	/EY REPORT			:	3/1/2026						
		Wate	r System Facili	ity and San	npling	Point	Inven	tory				
Water							Tot	al Lea	ıd and	'		
System		Facility	Sampling Point		nt		Colife		pper			Stage
Facility IE	D		ID	Description		Statu	<sub>IS</sub> Ru	le Ru	le Tier	Asbesto	s WQP	2 DBPF
00600	DISTRIBUTION	SYSTEM	4	DISTRIBUTION	SYSTEM	l A	Υ	•				
			A-11	A-11 FACULTY		Α	Υ		2	Υ	Υ	
			A-18	A-18 SCIENCE		Α	Υ		2	Υ	Υ	
			A-28	A-28 BOYS RM		Α	Υ		2	Υ	Υ	
			A-32	A-32 PHYS ED		Α	Υ		2	Υ	Υ	
			A-3B	A-3B BATHRO	OM	Α	Υ		N	Υ	Υ	
			B-2	B-2 BOYS RM		Α	Υ		N	Υ	Υ	
			B-22	B-22 HAND SII	٧K	Α	Υ	•	N	Υ	Υ	

B-8 ART RM

DOWNSTREAM WITHIN 5 SERVICE CON

C-1 STAGE SINK

C-6 JANITOR SINK

WITHIN 5 SERVICE CON

WATER FILL STATION 1

WATER FILL STATION 2

WATER FOUNTAIN 1

B-8

C-1

C-6

**UPSTREAM** 

WF-1

WFS-1

WFS-2

Υ

Υ

Ν

Ν

2

2

2

Α

Α

Α

Α

	Co	nnoctic	ut Dono	rtmont o	of Dublic	L Loolth	י חי	rinkin	~ <b>I</b> A	Intor	Co	ction	
	CC		•	rtment o lity Moni					_			Ction	
PWS ID	D\A	'S Name	ter Qua	iity Moiii	toring	illu Col	-		_			er Type [	Primary Source
CT0820382		E INDEPENDE	NT DAV SCH	201			Cia	NTNC		199	OWI	P P	GW
		e applicable)		JOL	Service	Resider	ntial	Commerc		Industri	اد	Combined	_
115 LAURE					Connectio		Itiai	Commerc	Jai	muustii	aı	Combined	Agricultural
Towns Serv						1							
TOWNS SELV	red. WIIDL	DELITEED	Water Sv	stem Faci	lity and S	Sampling	Po	int Inv	ento	orv			
Water					noy and		,		otal	Lead	and		
	Water Sy	stem Facility		Sampling Poin	t Sampling	Point			liforn				Stage
Facility ID		•		ID	Descriptio				Rule			Asbestos	WQP 2 DBPR
				WFS-3	WATER FIL	L STATION 3		A		N			
				WFS-4	WATER FIL	L STATION 4	4	Α		N			
00700	ENTRY PO	DINT		3	ENTRY PO	INT		Α					
	WELL			2	WELL			Α					
		NT PLANT											
0200				Certified	d Operato	or Inform	nati	ion					
Water Svs	tem Fac	ility: DISTR	IBUTION SY	STEM (WSF	<u> </u>	31 11110111							
Facility Cla					,								Certification
Operator N	lame			Operator Ty	ре	Certification	on(s)	)					Expiration
ROWLEY, B	RENDAN			CHIEF OPERAT	OR	DISTRIBUTI	ION S	SYSTEM O	PERA	TOR - CL	ASS I		12/31/2025
						WATER TRI	EATN	/IENT PLAN	NT OP	ERATOR	R - CL	ASS II	12/31/2025
Water Sys	tem Fac	ility: TREA	TMENT PLA	NT (WSF ID:	62556)								
Facility Cla	ssificatio	n: CLASS 1 TF	REATMENT P	LANT									Certification
Operator N	lame			Operator Ty	ре	Certification	on(s)	)					Expiration
ROWLEY, B	RENDAN			CHIEF OPERAT	OR	DISTRIBUTI	ION S	SYSTEM O	PERA	TOR - CL	ASS I		12/31/2025
						WATER TRI	EATN	IENT PLAN	NT OP	ERATOR	R - CL	ASS II	12/31/2025
				Co	ntact Info	ormation	1						
Name				(	Organization							Job Title	
Dr. Rochell	le Reodic	a		٦	The Independ	dent Day Sch	nool		Не	ead of So	choo	I	
Mailing Ad	dress Line	e One		Mailing Addre	ss Line Two				(	City		State	Zip Code
115 Laurel	Brook Rd							Middl	efield			СТ	06455
Business	Phone	Extension	Fax	Mol	oile Phone	Emergency	y Pho	one Email	Addr	ess			
860-347	-7235							reodic	ar@i	ndepen	dent	dayschool	.org
Contact Ro	le(s): <b>Le</b>	gal Contact	1	l		1		1					
Name	1			(	Organization							Job Title	
Mr. John W	Vhitney			7	The Independ	dent Day Sch	nool		Fa	cilities N	Mana	iger	
Mailing Ad	dress Line	e One		Mailing Addre	ss Line Two				(	City		State	Zip Code
115 Laurel	Brook							Middl	efield			СТ	06455
Business	Phone	Extension	Fax	Mol	oile Phone	Emergency	y Pho	one Email	Addr	ess		,	
860-347	'-7235							Whitn	eyJ@	indeper	nden	tdayschoc	ol.org

Schedule Generation Date: 12/12/2025

Contact Role(s): Administrative Contact

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

		_							,	
PWS ID	PWS Name					Cla	ssification	Population	Owner Type	Primary Source
CT0820382	THE INDEPENDENT DA	Y SCHC	OOL				NTNC	199	Р	GW
Local Address (v	vhere applicable)			Service	Residen	itial	Commerci	al Industri	al Combine	ed Agricultural
115 LAUREL BRO	OOK ROAD			Connections	1					
	41001 551510									

Towns Served: MIDDLEFIELD

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Departme	ent of Public	c Healt	h D	rinking	g Water	Se	ection	
	Water Quality N	Monitoring a	and Co	mpl	liance	Schedu	le		
PWS ID	PWS Name	<u> </u>		_		1	T	ner Type Pr	imary Source
CT0829013	JOHN LYMAN SCHOOL				NTNC	285		L	GW
Local Address (	where applicable)	Service	Resid	ential	Commerc	ial Industri	ial	Combined	Agricultural
106 WAY ROAD	)	Connection	ons 1	_					
Towns Served:	MIDDLEFIELD	1	-		II.				1
	1	Monitoring Re	equirem	ents	•				
Water System	Facility: DISTRIBUTION SYSTEM	(WSF ID: 00600)							
Asbestos (10	994)					1 rc	outi	ne (RT) per	nine years
Sampling	Point (Sampling Point ID)		Monite	oring F	Period (	Collection Pe	riod	Complic	ance Status
Select fror	m Inventory of Active Sampling Points		1/1/20	- 12/3	31/28				
Total Coliforn	•							utine (RT) բ	•
	Point (Sampling Point ID)		Monito			Collection Pe	riod		ance Status
Select fror	m Inventory of Active Sampling Points		4/1/2	5 - 6/3	0/25			Cor	mplete
			7/1/2						mplete
			10/1/2					Cor	mplete
			1/1/2						
			4/1/2	5 - 6/3	0/26				_
Lead And Cop	, , , , ,					- " - " -		routine (R	
	Point (Sampling Point ID)		1/1/24 12/21/24			Collection Pe			ance Status
Select fror	m Inventory of Active Sampling Points		1/1/24 - 12/31/24 1/1/25 - 12/31/25			6/1-9/30			mplete
				-		6/1-9/30		Cor	mplete
	. (556)		1/1/26	- 12/:	31/26	6/1-9/30		(5=1	
-	nmeters (PPS)		Monito	suima F	Daviad (			utine (RT) p	•
	Point (Sampling Point ID)		<u>Monito</u> 4/1/2			Collection Pe	rioa		ance Status
Select Iroi	m Inventory of Active Sampling Points			-					mplete
			7/1/2 10/1/2						mplete mplete
			1/1/2					COI	iipiete
			4/1/2						
Water System	Facility: ENTRY POINT - WELLS 1	& 3 (WSF ID: 00		3 - 0/3	0/20				
•	emicals (IOCS)	. a 5 (113) 15:00	700,			1 ro	utin	e (RT) per t	hree vears
_	Point (Sampling Point ID)		Monito	orina F	Period (	Collection Pe			ance Status
ENTRY PO			1/1/23			.oncotton r c	7704		mplete
	(0)		1/1/26						
Nitrate And I	Nitrite (NOX)		, ,		•		1	routine (R	T) per vear
	Point (Sampling Point ID)		Monite	oring F	Period C	Collection Pe		=	ance Status
ENTRY PO			1/1/24						mplete
			1/1/25		•				mplete
			1/1/26		-				
Pesticides, H	erbicides and Polychlorinated Bipl	nenyls (PCBs) (SC	OCS)			1 ro	utin	e (RT) per t	three years
	Point (Sampling Point ID)		Monito	oring F	Period C	Collection Pe			ance Status
ENTRY PO	INT (3)		1/1/23	- 12/3	31/25			Cor	mplete
			1/1/26	- 12/3	31/28				
									_

**Monitoring Period** 

1/1/24 - 12/31/24

1/1/25 - 12/31/25

**Organic Chemicals (VOCS)** 

**ENTRY POINT (3)** 

Sampling Point (Sampling Point ID)

1 routine (RT) per year

**Collection Period** 

**Compliance Status** 

Complete

Complete

	Connecticut Dej	oartment of	f Public He	ealth	n Dr	inkin	g W	ater	Se	ction		
		iality Monit					_					
PWS ID	PWS Name		0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0 0		_	sification				er Type P	rimary	Source
CT0829013	JOHN LYMAN SCHOOL				ı	NTNC	2	85		L	G۱	N
ocal Address	s (where applicable)		Service	Residen	ntial	Commer	cial II	ndustria	al (	Combined	Agri	cultura
LO6 WAY ROA	AD		Connections	1								
owns Serve	d: MIDDLEFIELD				,		,		,		,	
		Monito	oring Requi	reme	nts							
Water Syste	em Facility: ENTRY POINT	- WELLS 1 & 3 (V	VSF ID: 00700)									
Organic Ch	emicals (VOCS)								1 r	outine (	RT) pe	r year
Sampling Point (Sampling Point ID)  Monitoring Period Collection Period Compli									iance S	Status		
			1	/1/26 -	12/3	1/26						
		Other C	ompliance s	Sched	dule	S						
Compliance S	Schedule Activity				Due L	Date		Achie	ved D	Date		
ROSS CONN	IECTION SURVEY REPORT				3/1/2	2026						
	Water	System Facili	ity and Sam	pling	Poi	int Inv	ento	ry				
Water							Total	Lead	and			
•	ater System Facility	Sampling Point				Co	oliform					Stage
Facility ID		ID	Description			Status	Rule	Rule	Tier	Asbestos	WQP	2 DBP
00600 DI	STRIBUTION SYSTEM	4	GENERIC DISTR			Α	Υ					
		DOWNSTREAM	WITHIN 5 SERV	ICE COI	N	Α						
		JOHNLY001	KITCHEN SINK			Α	Υ	N	l	Υ		
		JOHNLY002	BOYS BATHROO	MC		Α	Υ	N		Υ		
		JOHNLY003	GIRLS BATHRO	MC		Α	Υ	N		Υ		
		JOHNLY004	ART ROOM			Α	Υ	N	l	Υ		
		JOHNLY005	NURSES OFFICE			Α	Υ	N	l	Υ		
		JOHNLY006	MEDIA HALLWA	ΔY		Α	Υ	N	l			
		JOHNLY007	ROOM 2B			Α	Υ	N	l			
		JOHNLY008	MEDIA BOYS			Α	Υ	N	l			
		JOHNLY009	PORTABLE #1			Α	Υ	N	I			
		JOHNLY010	PORTABLE #4			Α	Υ	N	l			
		JOHNLY011	ROOM 16			Α	Υ	Ν				
		JOHNLY012	ROOM 23			Α		N	l			
		JOHNLY013	STAFF LOUNGE			Α	Υ	N	l			
		UPSTREAM	WITHIN 5 SERV	ICE COI	N	Α						

# **Certified Operator Information**

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2

Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 00600)

00700 ENTRY POINT - WELLS 1 & 3

ATMOSPHERIC TANK 1

ATMOSPHERIC TANK 2

WELL #1

58022 PUMP STATION

58015 WELL #3

10397

ST01

ST02

Facility Classification:SMALL WATER SYSTEMCertificationOperator NameOperator TypeCertification(s)ExpirationKORNATZ, CHRISTOPHERCHIEF OPERATORDISTRIBUTION SYSTEM OPERATOR - CLASS III6/30/2028WATER TREATMENT PLANT OPERATOR - CLASS III3/31/2027

**ENTRY POINT** 

WELL 1

WELL 3

Α

Α

Α

	Water Quality Monitoring and Compliance Schedule										
PWS ID	PWS Name			Cla	ssification	Population	Owner Type	Primary Source			
СТ0829013	JOHN LYMAN SCHOOL				NTNC	285	L	GW			
Local Address (	where applicable)	Service	Residen	ntial	Commerci	al Industri	al Combine	ed Agricultural			
106 WAY ROAD	)	Connections	1								

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

			Co	ontact Inf	ormation				
Name		Organization	1	Job Title					
Mrs. Patricia Smith		Regional Sch	ool District 13		Operations	Manager			
Mailing Address Line One Mailing Addr			ress Line Two			City	State	Zip Code	
135A Pickett Lane						Durham		СТ	06422
Business Phone	Extension	Fax	Мо	bile Phone	Emergency Phone	Email Address			
860-349-7238						psmith@	rsd13.org		

Contact Role(s): Administrative Contact, Legal Contact

#### Please note the following:

- 1. The residual disinfectant concentration must be measured at the same location and time as each total coliform sample.
- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
- 3. Depending on results, additional monitoring may be required (i.e. repeat or confirmation samples). This schedule is subject to change, and any related correspondence sent by the DWS on or after the generation date of this schedule will have precedence over what is contained in this schedule.

If you have any questions, please contact the Drinking Water Section at (860) 509-7333.

http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	Connecticut Departm	ent of Public H	lealth	D	rinking	g V	Vater	Se	ction	
	Water Quality	Monitoring an	d Con	าต	liance	Sc	hedul	e		
PWS ID	PWS Name	<u> </u>		_		_			ner Type Pri	imary Sourc
CT0829023	LYMAN ORCHARD COUNTRY FARM	1S COMPLEX			NTNC		84		P	GW
ocal Addres	s (where applicable)	Service	Residen	itial	Commerc	ial	Industria	al	Combined	Agricultura
32 REEDS GA	P ROAD	Connections	6							4
Towns Serve	d: MIDDLEFIELD	1				1				
		<b>Monitoring Requ</b>	iireme	nts	5					
Water Syste	em Facility: DISTRIBUTION SYSTEM	1 (WSF ID: 00600)								
Asbestos (	1094)						1 ro	utin	e (RT) per	nine years
Samplin	ng Point (Sampling Point ID)		Monitori	ing I	Period (	Colle	ection Per	iod	Complia	ınce Status
Select from Inventory of Active Sampling Points				12/	31/28					
Total Colifo	orm (3100)						1	rou	tine (RT) p	er quarter
Sampling Point (Sampling Point ID)			Monitori	ing I	Period (	Colle	ection Per	iod	Complia	ınce Status
Select from Inventory of Active Sampling Points		5	4/1/25 - 6/30/25						Cor	nplete
			7/1/25 - 9/30/25						Cor	nplete
			10/1/25 -	- 12/	/31/25				Cor	nplete
			1/1/26 -	- 3/3	31/26					
			4/1/26 -	- 6/3	30/26					
Lead And C	Copper (PBCU)							5	routine (R <sup>.</sup>	T) per yea
Samplin	ng Point (Sampling Point ID)		<b>Monitoring Period</b>			Colle	ection Per	iod	Complia	ınce Status
Select fr	rom Inventory of Active Sampling Points	5	1/1/24 -	12/	31/24	(	6/1-9/30		Cor	nplete
			1/1/25 -	12/	31/25	(	6/1-9/30		Cor	nplete
			1/1/26 -	12/	31/26	(	6/1-9/30			
Physical Pa	rameters (PPS)						1	rou	tine (RT) p	er quarte
Samplin	ng Point (Sampling Point ID)		Monitori	ing l	Period (	Colle	ection Per	iod	Complia	ınce Status
Select fr	rom Inventory of Active Sampling Points	5	4/1/25 -	- 6/3	30/25				Cor	nplete
			7/1/25 -	- 9/3	30/25				Cor	nplete
			10/1/25 -	- 12/	/31/25				Cor	nplete
			1/1/26 -	- 3/3	31/26					
			4/1/26 -	- 6/3	30/26					
Water Syste	em Facility: ENTRY POINT (WSF ID	: 00700)								
Inorganic C	Chemicals (IOCS)						1 rou	tine	(RT) per t	hree vears

	4/1/20 - 0/30/20		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/25 - 12/31/27		
Nitrate And Nitrite (NOX)		1 r	outine (RT) per year
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
Pesticides, Herbicides and PCBs-Phase II (SOC2)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		
Pesticides, Herbicides and PCBs-Phase V (SOC5)		1 routine	(RT) per three years
Sampling Point (Sampling Point ID)	<b>Monitoring Period</b>	<b>Collection Period</b>	<b>Compliance Status</b>
ENTRY POINT (3)	1/1/23 - 12/31/25		Complete
	1/1/26 - 12/31/28		

_								_			
	cut Depai								ection		
W	ater Qual	ity Monit	oring an	d Con	npl	ianc	e Sch	edule			
PWS ID PWS Name					Clas	sificati	on Pop	ulation O	wner Type	Primary	Source
CT0829023 LYMAN ORCH	ARD COUNTRY	FARMS COMPL	EX			NTNC		84	Р	GV	V
Local Address (where applicable	e)		Service	Residen	ntial	Comm	ercial I	ndustrial	Combine	d Agric	cultural
32 REEDS GAP ROAD			Connections	6							4
Towns Served: MIDDLEFIELD											
		Monito	oring Requ	ireme	nts						
Water System Facility: <b>ENT</b>	RY POINT (W	SF ID: 00700)									
Organic Chemicals (VOCS)									1 routine	RT) pe	r <b>year</b>
Sampling Point (Sampling	Point ID)			Monitor			Collec	tion Perio		liance S	
ENTRY POINT (3)				1/1/24 -	12/3	1/24			C	omplete	<u> </u>
				1/1/25 -					C	omplete	<u> </u>
				1/1/26 -	12/3	1/26					
		Other Co	ompliance	Sched	dule	es					
Compliance Schedule Activity				Due	Date		Achieve	d Date			
CROSS CONNECTION SURVEY RI	EPORT				3/1/2	2028					
	Water Sy	stem Facili	ty and Sar	npling	Po	int In	vento	ry			
Water	_						Total	Lead an			
System Water System Facility	ty S	ampling Point		nt			Coliform				Stage
Facility ID		ID	Description	L CVCTEN		Status	Rule	Rule Tie	er Asbesto	WQP	2 DBPK
00600 DISTRIBUTION SYSTE		4	DISTRIBUTION			A	Υ				
	L	DOWNSTREAM		VICE COI	N	A	V				
		MW001 MW002	MENS ROOM			A	Y Y	2			
			LADIES ROOM			A	-	2			
		MW004 MW004-B	PRODUCE SIN BAKERY SINK	K		A	Y Y	า			
		МW004-Б	DELI SINK			A A	Υ	2 2			
		MW004-PRO		K		A	Y	2			
		MW01	MENS ROOM	IX.		A	Y	2	Υ		
		UPSTREAM	WITHIN 5 SER	VICE COI	N	Α		-	'		
00700 ENTRY POINT		3	ENTRY POINT		-	A					
10398 WELL #4 (GOLF MAIN BLDG)	NTENANCE	2	WELL #4			Α					
10399 WELL #3 (SOUTH WE	ELL)	2	WELL #3			Α					
10763 WELL #5 (CLUB HOU	SE)	2	WELL #5			Α					
59360 HYDROPNEUMATIC (SOUTH WELL)	TANK										
59362 HYDROPNEUMATIC MAINTENANCE)	TANK (GOLF										
		Certified	Operator	Inform	nati	on					
Water System Facility: <b>DIST</b>	RIBUTION SYS	STEM (WSF II	D: 00600)								

**Operator Type** 

**CHIEF OPERATOR** 

Certification(s)

WATER TREATMENT PLANT OPERATOR - CLASS I

Certification

**Expiration** 

12/31/2025

Facility Classification: SMALL WATER SYSTEM

**Operator Name** 

BRAIG, SUSAN R.

LVAAAN ODCHADD COUNTDY FADRAC COMBLEY	NITNIC	0.4	<b>D</b>	CW
PWS Name	Classification	Population	Owner Type	Primary Sou
Water Quality Monitoring and Con	npliance S	Schedul	e	
Connecticut Department of Fublic Health	אווואווועוו	g water	Section	

_							- /1	
CT0829023	LYMAN ORCHARD COUNTRY FARMS COMPLE	X			NTNC	84	Р	GW
Local Address (w	here applicable)	Service	Residen	tial	Commercial	Industria	al Combine	ed Agricultural
32 REEDS GAP RO	OAD	Connections	6					4

Connecticut Department of Public Health Drinking Water Section

Towns Served: MIDDLEFIELD

**PWS ID** 

				Contact Info	ormation				
Name Organization								Job Title	
Mr. John Lyman									
Mailing Address Line One			Mailing Address Line Two				City	State	Zip Code
PO Box 453						Middlefi	eld	СТ	06455
<b>Business Phone</b>	Extension	Fax		Mobile Phone	Emergency Phone	Email Address			
860-349-1793	6001	203-349-1	L424			JLYMAN3@LYMANORCHARDS.COM			M

Contact Role(s): Administrative Contact, Legal Contact, Owner

## Please note the following:

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- 2. If a Collection Period is specified, all water quality samples must be collected during the specified period.
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http://www.ct.gov/dph/publicdrinkingwater

End of schedule

	11 11 1.		
Connecticut Department of P	ublic Health Drinki	ng Water Se	ection
Water Quality Monitor	ing and Complianc	e Schedule	
PWS ID PWS Name	Classification	on Population Own	ner Type Primary Source
CT0829084 6 WAY ROAD	NTNC	78	P GW
Local Address (where applicable)	rvice Residential Commo	ercial Industrial	Combined Agricultural
6 WAY ROAD	onnections 1 1		
Towns Served: MIDDLEFIELD			·
Monitori	ng Requirements		
Water System Facility: DISTRIBUTION SYSTEM (WSF ID: 0	00600)		
Asbestos (1094)			ne (RT) per nine years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/20 - 12/31/28		
Total Coliform (3100)			utine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/25 - 6/30/25		Complete
	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Lead And Copper (PBCU)		5	routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	1/1/24 - 12/31/24	6/1-9/30	Complete
	1/1/25 - 12/31/25	6/1-9/30	Complete
	1/1/26 - 12/31/26	6/1-9/30	
Physical Parameters (PPS)		1 rou	utine (RT) per quarter
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
Select from Inventory of Active Sampling Points	4/1/25 - 6/30/25		Complete
	7/1/25 - 9/30/25		Complete
	10/1/25 - 12/31/25		Complete
	1/1/26 - 3/31/26		
	4/1/26 - 6/30/26		
Water System Facility: ENTRY POINT (WSF ID: 00700)			
Inorganic Chemicals (IOCS)		1 routine	e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/24 - 12/31/26		
	1/1/27 - 12/31/29		
Nitrate And Nitrite (NOX)		1	routine (RT) per year
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/24 - 12/31/24		Complete
	1/1/25 - 12/31/25		Complete
	1/1/26 - 12/31/26		
Pesticides, Herbicides and Polychlorinated Biphenyls (PCI	Bs) (SOCS)	1	(RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	<b>Collection Period</b>	Compliance Status
ENTRY POINT (3)	1/1/23 - 12/31/25	1/1-12/31	Waiver
Pesticides, Herbicides and Polychlorinated Biphenyls (PCI	Bs) (SOCS)		e (RT) per three years
Sampling Point (Sampling Point ID)	Monitoring Period	Collection Period	Compliance Status
ENTRY POINT (3)	1/1/26 - 12/31/28		

**Monitoring Period** 

**Organic Chemicals (VOCS)** 

Sampling Point (Sampling Point ID)

1 routine (RT) per year

**Compliance Status** 

**Collection Period** 

	Connecticut D	epartment o	f Public	Health	Dri	nkin	g W	ater	Sec	ction	
	Water (	Quality Monit	toring a	nd Con	nplia	ance	Sch	edul	e		
PWS ID	PWS Name				_					er Type P	rimary Source
CT0829084	4 6 WAY ROAD					TNC		78		P	GW
Local Addr	ess (where applicable)		Service	Residen	tial Co	ommer	cial II	ndustria	al (	Combined	Agricultural
6 WAY RO	AD		Connection	1		1					
Towns Serv	ved: MIDDLEFIELD			,	·		·		'		·
		Monit	oring Red	quireme	nts						
Water Sys	stem Facility: ENTRY POIN	IT (WSF ID: 00700)									
Organic (	Chemicals (VOCS)								1 r	outine (I	RT) per year
Samp	ling Point (Sampling Point ID)	)		Monitori	ng Per	riod	Collect	tion Per		_	iance Status
ENTR'	Y POINT (3)			1/1/24 -	12/31/	/24				Co	mplete
				1/1/25 -	12/31/	/25				Co	mplete
				1/1/26 -	12/31/	/26					
		Other C	ompliand	ce Sched	lules						
Compliand	e Schedule Activity				Due Do	ate		Achiev	ved D	Date	
SUBMIT LE	AD CONSUMER NOTICE CERTI	FICATE		12	2/29/2	025					
CROSS COI	NNECTION SURVEY REPORT			;	3/1/20	26					
	Wate	er System Facil	ity and S	ampling	Poin	nt Inv	ento	ry			
Water						1	Total	Lead o	and		
-	Water System Facility	Sampling Point					oliform				Stage
Facility ID		ID	Description		St	atus	Rule	Rule	Tier	Asbestos	WQP 2 DBPR
00600	DISTRIBUTION SYSTEM	4	DISTRIBUTION			Α					
		4-1	BATHROOM	1		Α		1			
		4-2	LAUNDRY			Α		1			
		4-3	OUTSIDE_S	OUTH		Α		1			
		4-4	ENTRANCE			Α		1			
		4-5	KITCHEN_SI			Α		1			
		DOWNSTREAM				Α					
		UPSTREAM				Α					
	ENTRY POINT	3	ENTRY POIN	JT		Α					
59452	WELL 1	2	WELL 1			A					
			Operato	r Inform	atio	n					
	stem Facility: DISTRIBUTIO		D: 00600)								
_	assification: SMALL WATER SY			0 110 11	( )						Certification
Operator I		Operator Typ		Certificatio							Expiration
COSSETTE,	EVAN J	CHIEF OPERATO		WATER TRE			_	_	_		6/30/2027
				DISTRIBUTIO							6/30/2027
				DISTRIBUTION	ON SYS	STEM O	PERAT	OR - CLA	ASS II		9/30/2027
			ntact Info	rmation							
Name			rganization							Job Title	
	el Eddinger		Way Road LL	.C				ner			
	dress Line One	Mailing Addres	s Line Two					ity		State	Zip Code
17 Louis Ro						Middl				СТ	06455
Business			ile Phone	Emergency	Phone						
860-254	1-7343 860	-254-7343				sam@	ironcl	adpm.c	om		

Contact Role(s): Administrative Contact, Legal Contact, Owner

Connecticut Department of Public Health Drinking Water Section
Water Quality Monitoring and Compliance Schedule

PWS ID	PWS Name			Clas	ssification	Population	Owner Type	<b>Primary Source</b>
CT0829084	6 WAY ROAD				NTNC	78	Р	GW
Local Address (w	here applicable)	Service	Residen	ntial	Commercia	al Industri	al Combine	ed Agricultural
6 WAY ROAD		Connections	1		1			

Towns Served: MIDDLEFIELD

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http://www.ct.gov/dph/publicdrinkingwater

End of schedule