



The City of Hibbing is issuing the results of monitoring done on its drinking water for the period from January 1 to December 31, 2017. The purpose of this report is to advance consumers' understanding of drinking water and heighten awareness of the need to protect precious water resources.

Source of Water

The City of Hibbing provides drinking water to its residents from a groundwater source: ten wells ranging from 79 to 509 feet deep, that draw water from the Virginia Formation, Biwabik Iron-Formation, Quaternary Buried Artesian aquifer, and the Quaternary Water Table aquifers. Minnesota's primary drinking water sources are groundwater and surface water. Groundwater is the water found in aquifers beneath the surface of the land. Groundwater supplies 75 % of Minnesota's drinking water. Surface water is the water in lakes, rivers and streams above the surface of the land. Surface water supplies 25% of Minnesota's drinking water.

Call Corey Lubovich, Director of Utility Operations at 218-262-7725 or coreyl@hpuc.com if you have questions about the City of Hibbing drinking water or would like information about opportunities for public participation in decisions that may affect the quality of the water.

The U.S. Environmental Protection Agency sets safe drinking water standards. These standards limit the amounts of specific contaminants allowed in drinking water. This ensures that tap water is safe to drink for most people. The U.S. Food and Drug Administration regulates the amount of certain contaminants in bottled water. Bottled water must provide the same public health protection as public tap water.

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline at 1-800-426-4791.

Hibbing Monitoring Results

We work with the Minnesota Department of Health to test drinking water for more than 100 contaminants. It is not unusual to detect contaminants in small amounts. No water supply is ever completely free of contaminants. Drinking water standards protect Minnesotans from substances that may be harmful to their health. Learn more by visiting the Minnesota Department of Health's webpage [Basics of Monitoring and Testing of Drinking Water in Minnesota](http://www.health.state.mn.us/divs/eh/water/factsheet/com/sampling.html) (<http://www.health.state.mn.us/divs/eh/water/factsheet/com/sampling.html>).

The tables below show the contaminants we found last year or the most recent time we sampled for that contaminant. They also show the levels of those contaminants and the Environmental Protection Agency's limits. Substances that we tested for but did not find are not included in the tables.

We sample for some contaminants less than once a year because their levels in water are not expected to change from year to year. If we found any of these contaminants the last time we sampled for them, we included them in the tables below with the detection date. We may have done additional monitoring for contaminants that are not included in the Safe Drinking Water Act. To request a copy of these results, call the Minnesota Department of Health at 651-201-4700 or 1-800-818-9318 between 8:00 a.m. and 4:30 p.m., Monday - Friday.

Key Abbreviations - Definitions

- 90th Percentile Level: This is the value obtained after disregarding 10 percent of the samples taken that had the highest levels. (For example, in a situation in which 10 samples were taken, the 90th percentile level is determined by disregarding the highest result, which represents 10 percent of the samples.) Note: In situations in which only 5 samples are taken, the average of the two with the highest levels is taken to determine the 90th percentile level.
- AL–Action Level: The concentration of a contaminant which, if exceeded, triggers treatment or other requirement which a water system must follow.
- EPA: Environmental Protection Agency.
- Level 1 Assessment: A level 1 assessment is a study of the water system to identify potential problems and determine (if possible) why total coliform bacteria have been found in our water system.
- Level 2 Assessment: A level 2 assessment is a very detailed study of the water system to identify potential problems and determine (if possible) why an E.coli MCL violation has occurred and/or why total coliform bacteria have been found in our water system on multiple occasions.
- MCLG: Maximum Contaminant Level Goal: The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.
- MCL: Maximum Contaminant Level: The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.
- MRDL: Maximum Residual Disinfectant Level.
- MRDLG: Maximum Residual Disinfectant Level Goal.
- N/A: Not Applicable (does not apply).
- Nd: No Detection.
- NTU (Nephelometric Turbidity Units): A measure of the cloudiness of the water (turbidity).
- pCi/l (picocuries per liter): a measure of radioactivity.

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- ppm: Parts per million, which can also be expressed as milligrams per liter (mg/l).
- ppb: Parts per billion, which can also be expressed as micrograms per liter (µg/l).
- PWSID: Public Water System Identification.
- TT (Treatment Technique): A required process intended to reduce the level of a contaminant in drinking water.
- Variances & Exemptions: State or EPA permission not to meet an MCL or a treatment technique under certain conditions.

Contaminant (units)	MCLG	MCL	Level Found		Violation	Typical Source of Contaminant
			Range	Average/Result*		
Arsenic (ppb) (06/12/2013)	0	10.4	N/A	1.07	No	Erosion of natural deposits; Runoff from orchards; Runoff from glass and electronics production wastes.
Fluoride (ppm)	4	4	.52-.77	.66	No	State of Minnesota requires all municipal water systems to add fluoride to the drinking water to promote strong teeth; Erosion of natural deposits; Discharge from fertilizer and aluminum factories.
Total Haloacetic Acids (HAA) (ppb)	N/A	60	.00-33.7	25.5	No	By-product of drinking water disinfection.
TTHM (Total trihalomethanes) (ppb)	N/A	80	11.10-61.90	54	No	By-product of drinking water disinfection.
Tetrachloroethylene (ppb)	0	5	nd-.27	.27	No	Leaching from PVC pipes; Discharge from factories and dry cleaners.
Chlorine (ppm)	4	4	.27	.11-.46	No	Water additive used to control microbes.

*This is the value used to determine compliance with federal standards. It sometimes is the highest value detected and sometimes is an average of all the detected values. If it is an average, it may contain sampling results from the previous year.

***Highest and Lowest Monthly Average.

****Highest Quarterly Average.

Contaminant (units)	MCLG	AL	90% Level	# sites over AL	Violation	Typical Source of Contaminant
Copper (ppm) 7/25/17	1.3	1.3	0.92	2 out of 60	No	Corrosion of household plumbing systems; Erosion of natural deposits.
Lead (ppb) 7/25/17	0	15	8.3	2 out of 60	No	Corrosion of household plumbing systems; Erosion of natural deposits.

Fluoride: Fluoride is nature's cavity fighter, with small amounts present naturally in many drinking water sources. There is an overwhelming weight of credible, peer-reviewed, scientific evidence that fluoridation reduces tooth decay and cavities in children and adults, even when there is availability of fluoride from other sources, such as fluoride toothpaste and mouth rinses. Since studies show that optimal fluoride levels in drinking water benefit public health, municipal community water systems adjust the level of fluoride in the water to a concentration between 0.5 to 1.5 parts per million (ppm), with an optimal fluoridation goal between 0.7 and 1.2 ppm to protect your teeth. Fluoride levels below 2.0 ppm are not expected to increase the risk of a cosmetic condition known as enamel fluorosis.

During the year, we failed to take a sample and/or submit information on Inorganic Contaminants during the required testing period(s) of 07/01/17 to 12/31/17. Because we did not monitor or failed to monitor completely during the compliance period(s), we did not know whether Lead or Copper was present in your drinking water, and we are unable to tell you whether your health was at risk during that time. We collected samples in January 2018. During the year, we failed to provide lead/copper results to persons served at the sites that were tested as required by the Lead and Copper Rule during the timeframe allowed. Results were provided to persons served at the sites that were tested late.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA/CDC guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbial contaminants are available from the Safe Drinking Water Hotline at 1-800-426-4791.

The Minnesota Department of Health provides information about your drinking water source(s) in a source water assessment, including:

- How Hibbing is protecting your drinking water source(s).
- Nearby threats to your drinking water sources.



- How easily water and pollution can move from the surface of the land into drinking water sources, based on natural geology and the way wells are constructed.

Find your source water assessment at [Source Water Assessments](http://www.health.state.mn.us/divs/eh/water/swp/swa/) (www.health.state.mn.us/divs/eh/water/swp/swa/) or call 651-201-4700 or 1-800-818-9318 from 8:00 a.m. to 4:30 p.m., Monday - Friday.

You may be in contact with lead through paint, water, dust, soil, food, hobbies, or your job. Coming in contact with lead can cause serious health problems for everyone. There is no safe level of lead. Babies, children under six years, and pregnant women are at the highest risk. Lead is rarely in a drinking water source, but it can get in your drinking water as it passes through lead service lines and your household plumbing system. Hibbing provides high quality drinking water, but it cannot control the plumbing materials used in private buildings. Read below to learn how you can protect yourself from lead in drinking water.

- Let the water run** for 30-60 seconds before using it for drinking or cooking if the water has not been turned on in over six hours. If you have a lead service line, you may need to let the water run longer. A service line is the underground pipe that brings water from the main water pipe under the street to your home.
 - You can find out if you have a lead service line by contacting your public water system, or you can check by following the steps at: [Are your pipes made of lead? Here's a quick way to find out](https://www.mprnews.org/story/2016/06/24/npr-find-lead-pipes-in-your-home) (https://www.mprnews.org/story/2016/06/24/npr-find-lead-pipes-in-your-home).
 - The only way to know if lead has been reduced by letting it run is to check with a test. If letting the water run does not reduce lead, consider other options to reduce your exposure.
- Use cold water** for drinking, making food, and making baby formula. Hot water releases more lead from pipes than cold water.
- Test your water.** In most cases, letting the water run and using cold water for drinking and cooking should keep lead levels low in your drinking water. If you are still concerned about lead, arrange with a laboratory to test your tap water. Testing your water is important if young children or pregnant women drink your tap water.
 - Contact a Minnesota Department of Health accredited laboratory to get a sample container and instructions on how to submit a sample: [Environmental Laboratory Accreditation Program](https://apps.health.state.mn.us/eldo/public/accreditedlabs/labsearch.seam) (https://apps.health.state.mn.us/eldo/public/accreditedlabs/labsearch.seam) The Minnesota Department of Health can help you understand your test results.
- Treat your water** if a test shows your water has high levels of lead after you let the water run.
 - Read about water treatment units: [Point-of-Use Water Treatment Units for Lead Reduction](http://www.health.state.mn.us/divs/eh/water/factsheet/com/poulead.html) (http://www.health.state.mn.us/divs/eh/water/factsheet/com/poulead.html)

Learn more:

- Visit [Lead in Drinking Water](http://www.health.state.mn.us/divs/eh/water/contaminants/lead.html#Protect) (http://www.health.state.mn.us/divs/eh/water/contaminants/lead.html#Protect)
- Visit [Basic Information about Lead in Drinking Water](http://www.epa.gov/safewater/lead) (http://www.epa.gov/safewater/lead)
- Call the EPA Safe Drinking Water Hotline at 1-800-426-4791. To learn about how to reduce your contact with lead from sources other than your drinking water, visit [Lead Poisoning Prevention: Common Sources](http://www.health.state.mn.us/divs/eh/lead/sources.html) (http://www.health.state.mn.us/divs/eh/lead/sources.html).