

Town of Chestertown

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March 7, 2022

Ken Kozel
Chief Executive Officer
Maryland Shore Regional Health
219 S. Washington Street
Easton, MD 21601

RE: DRAFT Post-Remedial Pilot Work Plan

Dear Ken:

Thank you for the February 4th response letter to the Town's letter dated January 20, 2022. We appreciate Gannett Fleming's initial response to our questions and concerns as well as the cooperative and transparent approach to the pilot study.

We are also pleased that we have come to agreement regarding the threshold levels and the test procedures to be used for determining exceedances. The final step is to clarify:

- Precisely which wells need to be monitored and sampled with what frequency,
- What specific actions are to be taken whenever thresholds are exceeded, and
- How silica gel tests will be used and the time interval for Mann-Kendall trend analysis.

Monitoring Frequency:

1. All 55 wells to be used in this pilot study should be monitored and sampled at the very beginning to establish a baseline. Failure to do so could easily lead to needless disagreements over what constitutes an increase.
2. All wells shown to have exceeded the thresholds based on the July 21 or October 21 samples should be sampled on a monthly basis. As you know, many of those wells showed an actual increase in TPH-DRO concentrations during that period and we have not yet received an explanation for that increase. These wells were identified by Gannett Fleming in the Q4 2021 Quarterly report as MW-43, MW-54, MW-46, MW-13, MW-45, and MW-20.
3. All the Sentinel and Monitoring Wells along Campus Avenue (S-1, S-2, S-3, MW-18, MW-23, MW-28, and MW-29) should be sampled on a monthly basis. Please note that Figure 2 of the Gannett Fleming Flow Chart already calls for monitoring these wells monthly, but Table 1 failed to do so.
4. Likewise, as noted in Figure 2, those wells located along the South edge (the lower edge) of the hospital parking lot (MW-15, MW-16, MW-17, MW-24, MW-49, and MW-50) should be sampled

on a monthly basis. In addition, MW-25 seems to have been inadvertently omitted from this list and should be included.

5. Any wells that exceed the thresholds at any time during this Pilot study should thereafter be monitored on a monthly basis.

Specific Actions to be Taken When Thresholds are Exceeded:

It is not sufficient to say that “SRH will employ aggressive measures” when thresholds are exceeded. Whenever the exceedance of a threshold has been verified by two samples there needs to be a commitment to notify MDE and the Town and RESTART THE PUMP AND TREATMENT SYSTEM as soon as possible and then proceed with whatever aggressive measures are appropriate.

Although Gannett Fleming does cite a “site investigation workplan” that would allow 30 days to submit such a plan to MDE after an exceedance is confirmed, this approach would be time consuming and would not offer the immediate groundwater protection required. We believe that the basic elements of such a plan should be developed now so that they would be immediately available if needed.

Clarification on use of Silica Gel tests and Mann-Kendall Trend Analysis:

- We have no objection to the use of EPA Method 8015 with and without Silica Gel, provided that there is a clear statement that the Silica Gel Test will not be used for the purpose of demonstrating compliance with the threshold triggers.
- The Pilot’s trend analysis will use two years of Mann-Kendall as a timer interval for reporting and analysis.

Thank you, once again, for the opportunity to review the Hospital’s Draft Pilot Plan. The town looks forward to collaborating with Maryland Shore Regional Health and OCP in finalizing this Pilot Post-Remedial Monitoring Work Plan that will help achieve our mutual three-fold goal of protecting our municipal water supply, restoring public confidence, and reducing the Hospital’s cost of cleanup.

Sincerely,



David Foster, Mayor

cc: Michael Powell
Chris Ralston
Susan Bull
Andrew Miller
Kenneth Guttman
Steve Slatnick
Bill Ingersoll
Bob Sipes