

RISING SUN WHPA PLAN
5 YEAR UPDATE
Prepared by Hydrophase, Inc.
Approved by IDEM: January 21, 2026

Content:

IDEM Approval Letter

Five-Year Update Survey

Annual pumping records for 2020-2024. The greatest production was 97.3 million gallons for 2021. The wellfield was modeled in 1999 at 146 million gallons per year, so no new delineation of the WHPA is needed.

Table listing Potential Contaminant Sources (PCSs)

Map showing PCSs keyed to the table

Emergency contacts update.

Letters sent to emergency responders (this includes the PCS information)



INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

100 N. Senate Avenue • Indianapolis, IN 46204
(800) 451-6027 • (317) 232-8603 • Fax (317) 233-6647 • www.idem.IN.gov

Mike Braun
Governor

Clint Woods
Commissioner

January 21, 2026

Mr. Scott Henry
Rising Sun Utilities
200 N Walnut St
Rising Sun, IN 47040

Dear Mr. Henry:

Re: PWSID 5258002
Phase II Wellhead Protection Plan Update
Notice of Decision

This letter is to inform you that the Office of Water Quality has formally reviewed and approved the Phase II Wellhead Protection Plan Five Year Update Survey for Rising Sun Utilities. We found the plan complete, satisfying the requirements outlined in Indiana's Wellhead Protection Rule, 327 IAC 8-4.1, for a Phase II Wellhead Protection Plan Update.

If you wish to become even more involved in ground water protection in your community, consider working towards designation as a Hoosier Water Guardian. Hoosier Water Guardian is a voluntary program that recognizes utilities that go above and beyond the minimum state standards for drinking water and wellhead protection. Please see the enclosed brochure and application for more information.

Please feel free to contact us at GWSection@idem.IN.gov or (317) 234-7477 if you need assistance or if you have any questions about the comprehensive Wellhead Protection Planning Process. Your next Phase II update will be due January 21, 2031. Again, thank you for your commitment to protecting our valuable drinking water resources for future generations.

Sincerely,

Christian Walker
Ground Water Section Chief
Drinking Water Branch
Office of Water Quality

CW: MO
eCC: Scott Henry & James Carr, Hydrophase
Enclosure: Hoosier Water Guardian Application – Form 55411

Visit on.IN.gov/survey or scan the QR code to provide feedback.

We appreciate your input!





**INDIANA WELLHEAD PROTECTION
PHASE II FIVE YEAR UPDATE SURVEY**
State Form 53796 (R 7-4-20)
INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

INSTRUCTIONS: The purpose of the Five (5) Year Updates is to complete updates of the information on a routine basis ensuring so that the Wellhead Protection plan contains current information. Complete all sections of this application. Use the survey below to compile all the information required for Phase II Five Year Update Survey submission per 327 IAC 8-4.1-8 through 8-4.1-11. Submittal instructions are at the end of this form.

GENERAL INFORMATION			
Name of Public Water Supply Rising Sun Municipal Utilities			
PWSID Number 5258002	Population Served 2,400		
Date Submitted (MM/DD/YYYY) 12 / 05 / 2025			
Name of Wellhead Protection Contact Person Scott Henry		Professional Title Water Superintendent	
Mailing Address (number and street) 200 N Walnut			
City Rising Sun	State IN	ZIP Code 47040	
Telephone (with area code) (812) 250-1509			
E-mail Address scotthentry2014@yahoo.com			
Name of Delineation Contact Person James Carr			
Affiliation or Company Hydrophase, Inc			
Mailing Address (number and street) 4314 Fairhope Drive			
City Indianapolis	State IN	ZIP Code 46237	
Telephone Number (with area code) (317) 786-8915			
E-mail Address jcarrhydro@sbcglobal.net			
Include Delineation Contact Person in IDEM Communications? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
Number of Wellfields 1		Total Number of Wells 3	
Does System Use Other Sources of Water (i.e. surface water or purchased water)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If so, What Percentage of Each? Groundwater _____ Surface Water _____ Purchased _____			
SIGNATURE BLOCK			
I swear or affirm, under penalty of perjury as specified by IC 35-44.1-2-1 and other penalties specified by IC 13-30-10, that the statements and representations in this update survey are true, accurate, and complete.			
Signature of Responsible Official or Designated Agent <i>Scott Henry</i>		Date (MM/DD/YYYY) 11/27/2025	
Professional Title <i>Superintendent</i>			
IDEM USE ONLY			
Date Application Received (MM/DD/YYYY) / /			
Do Delineations Overlap Other Community WHPA's? <input type="checkbox"/> Yes <input type="checkbox"/> No			
If Yes, List PWSIDs			

I. Wellhead Protection Area Delineation: 327 IAC 8-4.1-5 through 327 IAC 8-4.1-7; 327 IAC 8-4.1-9(1); 327 IAC 8-4.1-10; and 327 IAC 8-4.1-11(c)

(a) Have you installed or abandoned any wells since your last update?

Yes* No

(b) Have you increased pumping from any of your wells by more than 10% of your delineation rate since your last update? **Attach pumping data summary (average daily rate and/or annual total) from last five (5) years.**

Yes* No

(c) Have any significant water withdrawal wells been installed nearby since your last update?

Yes* No

** If yes, contact IDEM staff to determine if a new delineation is required according to 327 IAC 8-4.1-7, 327 IAC 8-4.1-12, or 327 IAC 8-4.1-13. The new Delineation must be performed by or under the direct supervision of Certified Professional Geologist. Note person who did the most recent delineation above.*

(d) Indicate the type of delineation (or re-delineation) **approved** for your system:

Fixed Radius Method
327 IAC 8-4.1-7(b)

or

Modeled Delineation Approved according to 327 IAC 8-4.1-7(a);
(Check all that apply.)

One (1) year Time of Travel (TOT)

Five (5) year Time of Travel

Ten (10) year Time of Travel

Twenty (20) year Time of Travel

Management Area including all areas identified above

II. Local Planning Team: 327 IAC 8-4.1-4; 327 IAC 8-4.1-8(1); and 327 IAC 8-4.1-11(c)*

(a) How many members do you have on your team? 6

(b) When was the last time you met? (MM/DD/YYYY) 11 / 19 / 2025

(c) How often do you normally meet (i.e. annually, quarterly, etc.)? Annually

(d) Which organizations or agencies are represented on your team (i.e. County Health Department, County Soil and Water Conservation District, Local Emergency Planning Committee, Municipal Storm Water staff, U.S. Department of Agriculture (USDA), Alliance for Indiana Rural Water, Indiana Rural Water Association, the American Water Works Association, etc.)? (Describe below.)

* Not mandatory to be reported, but recommended.

III. Potential Source of Contamination (PSC) Inventory: 327 IAC 8-4.1-8(3); 327 IAC 8-4.1-9(2); 327 IAC 8-4.1-10(a)(2); and 327 IAC 8-4.1-11(c)

(a) When was your PSC inventory last updated? (MM/DD/YYYY) 10 / 21 / 2025

(b) When was your PSC map last updated? (MM/DD/YYYY) 10 / 21 / 2025

(c) What method(s) did you use to update your PCS Inventory? (Check all that apply.)

- | | |
|--|---|
| <input type="checkbox"/> Windshield Survey | <input checked="" type="checkbox"/> Outside Records / Database |
| <input checked="" type="checkbox"/> Local Planning Team Review | <input checked="" type="checkbox"/> Online Mapping Service (i.e. Indiana Map, U.S. EPA DWMAPS, U.S. EPA EnviroMapper, etc.) |
| <input type="checkbox"/> Other: (Describe below.) | |

(d) Were any potential source of contamination added to your inventory?

- Yes No

(e) Were any sites removed from your inventory (i.e. septic tanks removed)?

- Yes No

(f) Have there been any major changes in land-use over the past five (5) years?

- Yes No

(g) Types of potential source of contamination present in your Wellhead Protection Area (WHPA). (Check all that apply.)

- | | | |
|--|--|--|
| <input type="checkbox"/> Superfund Site | <input checked="" type="checkbox"/> Landfill (current or historic) | <input type="checkbox"/> Confined Feeding Operations |
| <input type="checkbox"/> Industrial | <input type="checkbox"/> Fly Ash Ponds | <input type="checkbox"/> Agricultural Cropland |
| <input checked="" type="checkbox"/> Commercial | <input type="checkbox"/> Lagoons or Ponds | <input type="checkbox"/> Golf Courses |
| <input checked="" type="checkbox"/> Underground Storage Tanks (USTs) | <input type="checkbox"/> Sand and Gravel Operations | <input type="checkbox"/> Septic Systems |
| <input checked="" type="checkbox"/> Leaking USTs (LUSTs) | <input type="checkbox"/> Underground Pipelines | <input checked="" type="checkbox"/> Cemetery |
| <input type="checkbox"/> Above Ground Tanks | <input checked="" type="checkbox"/> Transportation Routes | |
| <input checked="" type="checkbox"/> Other: (Describe below.) | | |

Brownfield site, Flood potential, Spill sites

(h) **Attach** a copy of your updated Potential Source of Contamination inventory table and map as required by 327 IAC 8-4.1-9(2) and 327 IAC 8-4.1-10(2)(c).

IV. Management Plan: 327 IAC 8-4.1-8(4); 327 IAC 8-4.1-9(3); 327 IAC 8-4.1-10(a)(3); and 327 IAC 8-4.1-11(c)

(a) Plan to Manage your Sanitary Set-Back Area:

(1) What is the radius of your approved Sanitary Set-Back Area?

200 feet

(2) What actions have you taken to protect your Sanitary Set-Back Area? (Check all that apply.)

- Best Management Practices (BMPs) for Transportation Routes
- Provisions to Secure Wellhead (i.e. fences, detectors, locks, etc.)
- Prohibition of Storage and mixing of chemicals

Briefly describe any updates within the past five (5) years:

(b) Plan to Manage your Wellhead Protection Area:

(1) What actions have you or your water quality partners taken to protect your Wellhead Protection Area? (Check all that apply.)

- Abandoned Wells: Number found ; Number sealed*
- Monitoring / Sentinel Wells Installed: Number installed by water department:
- Cropland Reserve Programs: Number contacts made ; Acres enrolled
- Local Ordinances Passed: Date passed or revised (MM/DD/YYYY) / /
- Household Hazardous Waste (HHW) collection available: HHW facility within twenty (20) miles Yes No
- Other: (Describe below.)

Southeastern Indiana Recycling District, 6556 North Shun Pike Road, Rising Sun, April and August drop off dates, 11 AM - 1 PM.

*** Attach copies of well abandonment records.**

(2) Have you notified property owners, leaseholders, mineral right owners, and potential source of contamination that they are located within a WHPA?

Required only if Wellhead Protection Area was re-delineated within the past five (5) years, otherwise skip to IV. (b) (3).

- Yes No

If yes, indicate the date and **attach** documentation. (MM/DD/YYYY) / /

IV. Management Plan: 327 IAC 8-4.1-8(4); 327 IAC 8-4.1-9(3); 327 IAC 8-4.1-10(a)(3); and 327 IAC 8-4.1-11(c) (continued)

(3) Have you conducted public education events or water awareness events (*i.e. school programs, plant tours, community fairs, installed road signs, published newspaper articles, etc.*) within the past five (5) years?

Yes No

If yes, describe below, **attach** additional sheets or documents if necessary:

(4) Have you added or modified any management strategies since your last update?*

Yes No

If yes, describe below and **attach** updated sheets:

** Not mandatory, but recommended.*

V. Contingency Plan: 327 IAC 8-4.1-8(5); 327 IAC 8-4.1-9(4); and 327 IAC 8-4.1-11(c)

(a) When was the last time you updated your contingency plan? (MM/DD/YYYY) 10 / 21 / 2025
Attach updated sheets, if updated since last submittal.

(b) Have you modified your contingency plan concerning your alternate water supply or critical water users?

Yes No

If yes, describe below and **attach** updated sheets:

(c) When was your last emergency responder training session? (MM/DD/YYYY) 11 / 25 / 2025

Please submit this completed application and survey along with any supporting documents to:

E-mail: GWsection@idem.in.gov

Mail: Indiana Department of Environmental Management

Drinking Water Branch – Groundwater Section

100 North Senate Avenue, IGCN 1201

Mail Code 66-33

Indianapolis, IN 46204-2251

Fax: 317-234-7462

We encourage you to learn more about how to protect your water supply at the source by going to our Wellhead Protection Program web page <https://www.in.gov/idem/cleanwater/2456.htm>.

If you have questions please call the Groundwater Section at 317-234-7477.

ANNUAL WATER USE REPORT FORM FOR A
SIGNIFICANT WATER WITHDRAWAL FACILITY
FORM # : 21915R

Please complete items (1) through (7)
Facility Registration Number : 58-02234-PS

INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF WATER
402 WEST WASHINGTON ST., ROOM W264
INDIANAPOLIS, INDIANA 46204
TELEPHONE (317) 232-4160

Water Withdrawal Report for Year Ending December 31, 2020

OWNER OF WATER WITHDRAWAL FACILITY

Rising Sun Water Department
301 South Poplar Street
Contact : Scott Henry
2841 Cass Union Road

Rising Sun IN 47040

Phone no.: (812) 438-2449

Rising Sun IN 47040

Phone no.: (812) 534-3354

WATER WITHDRAWAL RECORD

(1) Units Used in Reporting Amounts Withdrawn (Check One) : Thousand Gallons _____ Million Gallons

(2) Monthly Report for Ground Water Sources

WELL#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
1	3.8	4.6	3.9	3.2	4.2	4.5	4.9	5.9	3.9	5.5	4.0	3.9	52.3
2	0	0	0	0	0	0	0	0	0	0	0	0	0
3	3.7	2.0	3.5	2.8	3.5	3.4	4.3	2.0	4.1	2.2	3.3	3.5	37.3
TOTAL	7.5	6.6	7.4	6	6.7	7.9	9.2	7.9	8	7.7	7.3	7.4	89.6

(3) Monthly Report for Surface Water Sources

INTAKE#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
TOTAL													

METHOD OF MEASUREMENT

(4) Are withdrawal amounts based on flow meter readings? Check one ==> Yes No

If 'No', please check and complete one of the lines:

Hours operated: Hour meter _____ Manual record _____
Acre inches: # of acres _____, # inches _____
NPDES data: Consumptive use _____ %
Other _____

TOTAL YEARLY OPERATION TIME

(5) Complete ONLY one:
No. of Hours _____ -OR- No. of Days 365

STATEMENT OF AFFIRMATION

(6) Is your registration information still correct?
Check one ==> Yes No If 'No', please correct where appropriate.

(7) I hereby affirm under the penalties of perjury, that the information submitted herewith is to the best of my knowledge and belief, true, accurate, and complete.

Owner or Agent

Printed Name Scott Henry

Signature Scott Henry

Date 1-13-21

ANNUAL WATER USE REPORT FORM FOR A
SIGNIFICANT WATER WITHDRAWAL FACILITY
FORM # : 21915R

Please complete items (1) through (7)
Facility Registration Number : 58-02234-PS

INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF WATER
402 WEST WASHINGTON ST., ROOM W264
INDIANAPOLIS, INDIANA 46204
TELEPHONE (317) 232-4160

Water Withdrawal Report for Year Ending December 31, 2021

OWNER OF WATER WITHDRAWAL FACILITY

Rising Sun Water Department
301 South Poplar Street

Contact : Scott Henry
2841 Cass Union Road

Rising Sun IN 47040

Rising Sun IN 47040

Phone no.: (812) 438-2449

Phone no.: (812) 534-3354

WATER WITHDRAWAL RECORD

Thousand Gallons _____ Million Gallons

(1) Units Used in Reporting Amounts Withdrawn (Check One) : Thousand Gallons _____ Million Gallons

(2) Monthly Report for Ground Water Sources

WELL#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
1	4.7	3.8	5.3	4.2	4.8	8.3	5.7	3.4	3.8	4.9	4.2	3.6	57.2
2	0	0	0	0	0	0	0	0	0	0	0	0	0
3	2.6	3.4	1.9	4.0	4.4	0	3.7	6.7	4.1	2.8	2.9	3.6	40.1

TOTAL 7.3 7.2 7.7 8.2 9.2 8.3 9.4 10.1 7.9 7.7 7.1 7.1 7.2 97.3

(3) Monthly Report for Surface Water Sources

INTAKE#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
TOTAL													

METHOD OF MEASUREMENT

(4) Are withdrawal amounts based on flow meter readings? Check one ==> Yes No

If 'No', please check and complete one of the lines:
Hours operated: Hour meter _____ Manual record _____
Acre inches: # of acres _____, # inches _____
NPDES data: Consumptive use _____ %
Other _____

STATEMENT OF AFFIRMATION

(6) Is your registration information still correct?
Check one ==> Yes No If 'No', please correct where appropriate.

(7) I hereby affirm under the penalties of perjury, that the information submitted herewith is to the best of my knowledge and belief, true, accurate, and complete.

Owner or Agent

Printed Name Scott Henry

Signature Scott Henry Date 1-5-22

TOTAL YEARLY OPERATION TIME

(5) Complete ONLY one:
No. of Hours _____ -OR- No. of Days 365

ANNUAL WATER USE REPORT FORM FOR A
SIGNIFICANT WATER WITHDRAWAL FACILITY
FORM # : 21915R

INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF WATER
402 WEST WASHINGTON ST., ROOM W264
INDIANAPOLIS, INDIANA 46204
TELEPHONE (317) 232-4160

Please complete items (1) through (7)

Facility Registration Number : 58-02234-PS

Water Withdrawal Report for Year Ending December 31, 2022

Rising Sun Water Department
301 South Poplar Street

Contact : Scott Henry
2841 Cass Union Road

Rising Sun IN 47040

Rising Sun IN 47040

Phone no.: (812) 438-2449

Phone no.: (812) 534-3354

WATER WITHDRAWAL RECORD

Million Gallons

Thousand Gallons

WELL#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
1	4.4	7.0	3.6	5.0	4.7	5.0	5.6	5.0	3.8	5.3	3.4	5.4	55.2
2	0	0	0	0	0	0	0	0	0	0	0	0	0
3	2.0	2.6	3.6	2.5	3.9	3.5	3.1	3.1	3.8	1.8	2.6	2.3	36.8
TOTAL	7.4	6.6	7.2	7.5	8.6	8.5	8.7	3.1	7.6	7.1	7.0	7.7	92

(3) Monthly Report for Surface Water Sources

INTAKE#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
TOTAL													

METHOD OF MEASUREMENT

(4) Are withdrawal amounts based on flow meter readings? Check one ==> Yes No
 If 'No', please check and complete one of the lines:
 Hours operated: Hour meter _____ Manual record _____
 Acre inches: # of acres _____ # inches _____
 NPDES data: Consumptive use _____ %
 Other _____

STATEMENT OF AFFIRMATION

(6) Is your registration information still correct? Check one ==> Yes No
 (7) I hereby affirm under the penalties of perjury, that the information submitted herewith is to the best of my knowledge and belief, true, accurate, and complete

Owner or Agent

TOTAL YEARLY OPERATION TIME

(5) Complete ONLY one:
No. of Hours _____ -OR- No. of Days 365

Printed Name Scott Henry

Signature Scott Henry

Date 1-9-23

ANNUAL WATER USE REPORT FORM FOR A
SIGNIFICANT WATER WITHDRAWAL FACILITY
FORM # : 21915R

Please complete items (1) through (7)

Facility Registration Number : 58-02234-PS

INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF WATER
402 WEST WASHINGTON ST., ROOM W264
INDIANAPOLIS, INDIANA 46204
TELEPHONE (317) 232-4160

Water Withdrawal Report for Year Ending December 31, 2023

OWNER OF WATER WITHDRAWAL FACILITY

Rising Sun Water Department
301 South Poplar Street

Contact : Scott Henry

2841 Cass Union Road

Rising Sun IN 47040

Rising Sun IN 47040

Phone no. : (812) 438-2449

Phone no. : (812) 534-3354

WATER WITHDRAWAL RECORD

Units Used in Reporting Amounts Withdrawn (Check One) : Thousand Gallons Million Gallons

(2) Monthly Report for Ground Water Sources

WELL#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
1	4.2	3.2	5.5	4.1	4.8	5.6	4.7	5.1	5.3	4.0	3.2	4.4	54.1
2	0	0	0	0	0	0	0	0	0	0	0	0	0
3	3.1	3.1	2.2	3.6	4.0	2.8	4.0	3.7	2.7	2.9	3.2	1.6	37.4
TOTAL	7.3	6.5	7.7	7.7	8.8	8.4	8.7	8.8	8.0	6.9	6.4	6.0	91.5

(3) Monthly Report for Surface Water Sources

INTAKE#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL

TOTAL

METHOD OF MEASUREMENT

(4) Are withdrawal amounts based on flow meter readings? Check one ==> Yes No

If 'No', please check and complete one of the lines:

Hours operated: Hour meter _____ Manual record _____

Acres: # of acres _____ # inches _____

NPDES data: Consumptive use _____ %

Other _____

STATEMENT OF AFFIRMATION

(6) Is your registration information still correct? Check one ==> Yes No

(7) I hereby affirm under the penalties of perjury, that the information submitted herewith is to the best of my knowledge and belief, true, accurate, and complete.

Owner or Agent

Printed Name SCOTT HENRY

Signature Scott Henry

Date 1-16-24

TOTAL YEARLY OPERATION TIME

(5) Complete ONLY one:

No. of Hours _____ -OR- No. of Days 365

ANNUAL WATER USE REPORT FORM FOR A
SIGNIFICANT WATER WITHDRAWAL FACILITY
FORM # : 21915R

Please complete items (1) through (7)
Facility Registration Number : 58-02234-PS

INDIANA DEPARTMENT OF NATURAL RESOURCES
DIVISION OF WATER
402 WEST WASHINGTON ST., ROOM W264
INDIANAPOLIS, INDIANA 46204
TELEPHONE (317) 232-4160

Water Withdrawal Report for Year Ending December 31, 2024

OWNER OF WATER WITHDRAWAL FACILITY

Rising Sun Water Department
301 South Poplar Street

Contact : Scott Henry
2841 Cass Union Road

Rising Sun IN 47040
Phone no. : (812) 438-2449

Rising Sun IN 47040
Phone no. : (812) 534-3354

WATER WITHDRAWAL RECORD

Thousand Gallons _____ Million Gallons ✓

WELL#	JAN	FEB	MAR	APR	MAY	JUN	JUL	AUG	SEP	OCT	NOV	DEC	TOTAL
1	2.4	4.8	3.6	3.8	4.7	4.0	4.1	5.6	4.8	5.4	4.0	4.7	57.9
2	0	0	0	0	0	0	0	0	0	0	0	0	0
3	3.3	2.0	3.6	3.7	2.6	3.3	4.1	2.9	3.2	2.2	3.6	4.3	38.8
TOTAL	6.7	6.8	7.2	7.5	7.3	7.3	8.2	8.5	8	7.6	7.6	9	91.7

(3) Monthly Report for Surface Water Sources

TOTAL _____

METHOD OF MEASUREMENT

(4) Are withdrawal amounts based on flow meter readings? Check one ==> Yes No

If 'No', please check and complete one of the lines:

Hours operated: Hour meter _____ Manual record _____
Acre inches: # of acres _____ # inches _____
NPDES data: Consumptive use _____ %
Other _____

STATEMENT OF AFFIRMATION

(6) Is your registration information still correct?
Check one ==> Yes No If 'No', please correct where appropriate.

(7) I hereby affirm under the penalties of perjury, that the information submitted herewith is to the best of my knowledge and belief, true, accurate, and complete.

Owner or Agent

TOTAL YEARLY OPERATION TIME _____

(5) Complete ONLY one:
No. of Hours _____ -OR- No. of Days 366

Printed Name Scott Henry

Signature Scott Henry Date 1-21-25

TABLE 2 - Page 1 of 3
Rising Sun Wellfield
Wellhead Protection Area
Key to Potential Contaminant Source Map
Approved by IDEM January 21, 2026

Map ID # (2025 ERS report numbers in parentheses)	Site Name & Location	Site Description	Environmental Permits, or Program ID #	Types of Potential Contamination	Operation status of Site
1	Fletcher Feed & Supply, 211 Walnut St., under same ownership as #3	Pesticide dealer	N/A	Agrichemicals	Closed
2	Formerly Rising Sun Canning Corp., 5 th Street	Currently used for storage, old building gone, blue corrugated bldg today	NPDES ID: IN0004910	Junk on site, on old concrete platform	Closed, buidling is used for personal storage
3 (4)	Formerly Chipmans Maintenance Contractors, 201 N. Walnut	Currently occupied by office & storage for Fletcher Feed	INR000007917	RCRA non-gen: ignitable materials & lead	Closed
4 (9)	Rising Sun WTP, 301 S. Poplar St.	Water treatment plant, leak in 1994, that tank is out of service	Facility ID # 8321, IN0024431	Granular fluoride & chlorine cylinders, 3 USTs, 1 gasoline, 2 unkn., perm out of serv.	Active
5 (1)	Formerly Riverview Car Clinic, 111 Main St.	Also, formerly Monday Tire Store, former UST site,	Facility ID # 11553	3 USTs perm. out of service, contents unknown	Residential and storage
6 (11)	Rising Sun Shell Station, 519 N. High St.	Fuel station	Facility ID # 11558	USTs: 3 gasoline, 1 kerosene, perm out of serv; 3 gasoline, 1 kerosene, in use	Active
7 (15)	Rising Sun BP Station, 632 N. High St.	Fuel station	Facility ID # 22394	USTs: 2 gasoline, 1 diesel, in use	Active
8	USPS, 111 N. Walnut	Post office	Facility ID # 20408	Unregistered UST (removed?)	Active
9	Formerly United Telephone, 308 Main St.	Currently Sprint Comm. Company	N/A	None known, just an office building currently	Active as Sprint
10	Formerly Bakers Auto & Marine, 217 N. High	Formerly Jasper Engines & Transmissions (closed)	N/A	N/A	Tourism

NFA means no further action required.

TABLE 2 - Page 2 of 3
Rising Sun Wellfield
Wellhead Protection Area
Key to Potential Contaminant Source Map
Approved by IDEM January 21, 2026

Map ID #	Site Name & Location	Site Description	Environmental Permits, or Program ID #	Types of Potential Contamination	Operation status of Site
11	Formerly Brown Tool & Manufacturing, 116 N. Walnut	Currently "Combustion Systems"	N/A	"Paint finishing equipment and powder paint disposal bags"	Active as "Combustion Systems"
12	Cedar Hedge Cemetery, S. Downey St.	Cemetery	N/A	Lawn chemicals and others	Active
13	Montgomery Sons Trucking, 421 Barnes	Truck storage & maintenance bay	N/A	Auto fluids and petroleum products	Currently a parking lot
14	Russell Thayer, 728 4 th St.	Home auto & truck repair	N/A	Auto fluids and petroleum products	Closed
15 (7)	Rising Sun-Ohio Co. Comm. Schools, 210 S. Henrietta St.	Parking for schools buses	N/A	3 USTs: 2 gasoline, 1 diesel, perm out of service, pesticides & fertilizers	Active as parking area for buses
16	Formerly B&B Cycle, 100 S. Walnut	Former bicycle repair shop, empty bldg now	N/A	N/A	Vacant
17 (6)	Former Ohio Co. Highway Dept., 515 2 nd St.	Former Maintenance facility	Facility ID: 24813, Leaking UST site (2005), 4 USTs, gasoline, perm. out of serv., soil only, NFA*	Formerly ASTs on site, a lot of abandoned-looking vehicles and junk now	Parking lot currently
18	Formerly Napa Auto Parts, 200 Main St.	Formerly-retail auto parts, now a vacant bldg w/ one apartment unit	N/A	Formerly automotive products	Demolished
19	Ohio River, w/in 500 feet of PW and plant	Major river	N/A	Possible spills and floodwater-borne contamination	Active
20	State Route 56 (Main St.)	Major transportation route	N/A	Possible spills	Active

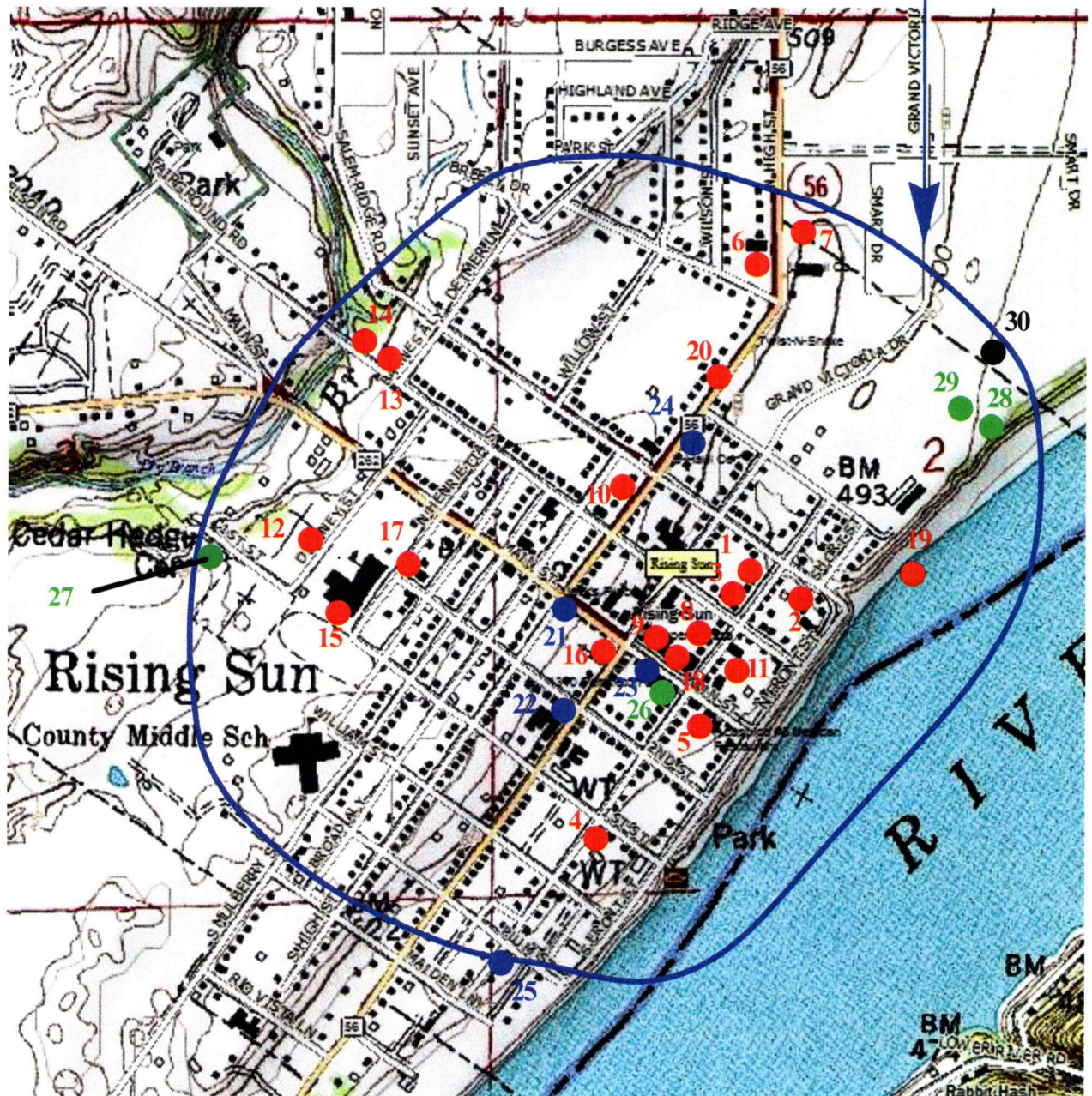
NFA means no further action required.

TABLE 2 - Page 3 of 3
Rising Sun Wellfield
Wellhead Protection Area
Key to Potential Contaminant Source Map
Approved by IDEM January 21, 2026

Map ID #	Site Name & Location	Site Description	Environmental Permits, or Program ID #	Types of Potential Contamination	Operation status of Site
21(2)	Formerly Tony's Automotive, 401 Main St.	Currently occupied by Friendship Bank	Former fuel station, Facility ID: 17432	3 gasoline USTs, perm out of service	Active as bank branch
22 (3)	Former Rising Sun Sunoco, 200 S. Walnut	Bldg has been demolished	Facility ID: 18209, 1998 docs indicated soil samples were non-detect for TPH	4 USTs, 3 gasoline, 1 kerosene, perm. out of service	Parking lot currently
23 (5)	Formerly Gibson Hardware Bldg, 201-3 Main St.	Art gallery currently	Brownfield, Facility ID: 4990058	Formerly a junkyard, 1950-2001	Active as an art gallery
24 (8)	Former Rising Sun Oil, Inc., 400 N. High St.	Former Fuel station, building is gone	Facility ID: 13843	8 USTs, 4 gasoline, 3 kerosene, 1 diesel, all perm. out of service	Currently a grassy field, part of the casino
25 (A2, A3,13)	Fryman Auto Parts property, 517 S. Poplar St.	Auto salvage, 1959-2001	Brownfield, ERC, Facility ID: 4020008	"Inorganic, non-metalic"	Grassy lot, boat ramp & parking lot currently
26	Poplar St., Block 100 south	Spill location, commercial area	Spill report 199408170	"Solvent-like material", 3 gal	Spill site
27 (10, A1)	Rising Sun compost / (formerly the Hastings Dump), 320 Downey	Disposal area	Compost: 58-01C MSW: 58-UP-02	Compost: active; Municipal solid waste: closed	Active / Closed
28	Rising Star Casino, 777 Rising Star Dr.	Casino	Database: ERNS-US	Spill – motor oil, 0.5 gal	Site is Active
29 (14)	Grand Victoria Casino, 600 Grand Victoria Drive	Casino	Spills – IN 200005075 200208218 200210194 200709142 200909065 2015	2000 – 1 gal engine oil 2002 – alleged paint thinner 2002 - 1 gal diesel 2007-"Hydrochloric" 2015-"1000 gal diesel"	Site is Active
30	Rising Star Golf Course, 777 Rising Star Dr.	Golf course	N/A	Lawn chemicals	Active

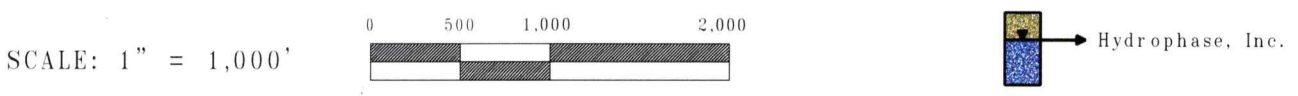


WHPA Boundary



- 20 Potential contaminant source (Phase I)
- 22 Potential contaminant source (added in 2012)
- 26 Potential contaminant source (added in 2020)
- 30 Potential contaminant source (added in 2025)

Figure 2. Wellhead Protection Area, showing potential contaminant sources Updated October, 2025



of contaminants. Nevertheless, any spill or other contaminant incident that impacts the clay overburden should be addressed as though it has the potential to migrate downward to the aquifer. Removal or treatment of impacted soils should be immediately initiated.

8.2.4 Well Contamination

In the event of a contaminated well, an engineering/environmental professional will be called immediately. The wellfield will be shut down until it can be analyzed by the professional. Depending on the type, concentration, and location of the contaminant in the system, the options will be evaluated as to how to restore operation and provide safe drinking water to our customers.

8.3 Information for Local Responders

This information must include:

- The location of the WHPA boundary. The boundary is shown on Figure 1 (Appendix B) of this document. This information has been provided to the Ohio County EMA and the Rising Sun Fire Department.
- The names of community public water suppliers to contact in the event of an emergency: Rising Sun Water Superintendent, Mr. Scott Henry, (812) 438-3616, Cell: (812) 290-1509.
- 24 hour phone numbers for:
 - a) IDEM Office of Emergency Response (888) 233-7745
 - b) State and local city/county police and fire/hazmat team
 - Emergency Response: 911
 - Rising Sun Fire Department: 911
 - Ohio County Sheriff: 911
 - State Police: (800) 566-6704 (Versailles District)
 - c) Ohio County EMA Director, Laura Walston: (812) 438-2883 (office)
 - d) Water supply owner's representative (see above)
 - e) Nearest Hospital.
 - Dearborn County Hospital: (812) 496-7000
 - (Lawrenceburg)

- Other important phone numbers:
 - f) National Response Center (Toxic Chemical & Oil Spills) 800-424-8802
 - g) CHEMTREC (Chemical Transportation Emergency) 800-262-8200
 - h) Ohio Co. Health Department: (812) 438-2551
 - i) Reynolds, Inc., of Louisville: (502) 585-1241

Cleanup Companies:

- j) Indiana Spill Response, Anderson, IN (844-774-5533)
- k) Advanced Vacuum Services, Greensburg (800-797-8789)
- l) Midwest Environmental Services, Inc., Charlestown (877-999-7745)
- m) Clean Harbors Environmental, Cincinnati, (800-645-8265)
- n) Environmental Enterprises, Inc., Cincinnati, OH (800-722-2818)

Contingency Cards that contain the names and phone numbers of the Emergency Management Committee should be placed in all fire department and police department vehicles. Contingency Cards will enable fire and police personnel to quickly and efficiently communicate with the EMC. Phone numbers in the plan will be checked for updates annually.

8.4 Potential Alternate Sources of Drinking Water

As there are no water main connections with nearby public water supply systems, the only method of transporting potable water to Rising Sun is by tanker truck. Under these circumstances, the short term source of water would be Aberdeen Pate Water Company (contact: Mr. Doug Henry at 812-438-3428, cell: 812-584-5360)

In the event of an emergency interruption of the water supply, the County EMA office (812-438-2883) can be contacted to coordinate water supplies hauled by tanker trucks.

For long term drinking water resources, economic considerations require that these supplies be developed in the Ohio River aquifer, at locations near the existing infrastructure, preferably on relatively undeveloped parcels.

8.5 Notifying Critical Water Users in an Emergency

Critical water users are facilities that require a continuous supply of water to sustain their operations. Examples include hospitals, schools, medical centers, nursing homes, and industry. Rising Sun has developed a completed list of telephone numbers for critical waste users in the



Hydrophase, Inc.

4314 Fairhope Drive

Indianapolis, IN 46237

Phone: (317) 786-8915 / Cell: (317) 640-3266 / email: jcarrhydro@sbcglobal.net

Laura Walston, Director
Ohio County EMA
121 S. High St.
Rising Sun, IN 47040

November 25, 2025

Dear Director Walston:

We called your office earlier today and left a message. We are writing to let you know that we are working on updating the wellhead protection plan for Rising Sun Municipal Utilities (RSMU). The update is due to IDEM in December of this year.

We are enclosing a map of the RSMU wellhead protection area (WHPA), with this letter. We are also providing this map to the Rising Sun Fire Department and requesting that they notify your office to relay reportable spill information within the WHPA to the water superintendent, Scott Henry. He can be reached at 812-290-1509 (cell), or (812) 438-3616 during normal business hours.

We are also soliciting any new information on facilities that handle hazardous materials, other potential contaminant sources, or improperly abandoned wells within the WHPA that you may become aware of. Our potential contaminant source inventory is included, and those sites are indicated on the WHPA map.

We sincerely appreciate your sharing any such relevant information with us. If you have any questions, please contact me at the above phone number.

Sincerely,
HYDROPHASE, INC.

James E. Carr, LPG
President

cc: Scott Henry, RSMU Superintendent



Hydrophase, Inc.

4314 Fairhope Drive

Indianapolis, IN 46237

Phone: (317) 786-8915 / Cell: (317) 640-3266 / email: jcarrhydro@sbcglobal.net

Kevin Armstrong, Rising Sun Fire Chief
Rising Sun Fire Department
121 S, High St.
Rising Sun, IN 47040

November 25, 2025

Dear Chief Armstrong:

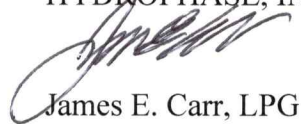
We contacted your office earlier today and left a message. We are writing to let you know that we are working on updating the wellhead protection plan for the Rising Sun Municipal Utilities (RSMU). Public water utilities are required by the Indiana Department of Environmental Management (IDEM) to prepare a Wellhead Protection Plan for their wellfields. The plan involves sharing information with local residents and government, mapping of the area where underground water is captured by the wells (the wellhead protection area, or "WHPA"), and identifying potential sources of contamination. This information will be used to help protect underground drinking water supply by managing the area to prevent contamination, and by having a contingency plan in case of a spill or release.

IDEM requires water utilities to communicate WHPA information with emergency responders. We believe the best way to approach this is to ask the County EMA Director to relay reportable spill information to the water utilities. Although you may typically forward reportable spill information to the EMA, we are requesting that you notify the EMA if the spill has occurred within the WHPA, so that the owner of the water utility can also be notified.

To assist with this, we are sending you a copy of the WHPA map and the well locations as part of this letter. It is of course critical in the event of a spill to make every effort to prevent contaminant runoff from flowing toward wells and prevent downward seepage of spills into the aquifer anywhere in the WHPA. The Water Department Superintendent, Scott Henry, can be reached at 812-290-1509 (cell), or (812) 438-3616 during normal business hours.

We are also soliciting any new information on facilities that handle hazardous materials, other potential contaminant sources, or improperly abandoned wells within the WHPA that you become aware of. Our potential contaminant source inventory is included, and those sites are numbered on the WHPA map. We sincerely appreciate your sharing any such relevant information with us. If you have any questions, please contact me at the above phone number.

Sincerely,
HYDROPHASE, INC.



James E. Carr, LPG
President

cc: Scott Henry, Scott Henry, RSMU Superintendent