

Subject: Aquifer Contamination Update

Date: July 22, 2026

We have lost a significant part of our only supply of fresh water in the Town of East Hampton. For how long—months, years, decades—we do not know. Without access and confidence in a ready supply of fresh drinking water, how long before people stop coming to East Hampton? What will happen to property valuations? Please read in full (2 pages).

Dear Residents:

The Suffolk County Department of Health Services (SCDHS) released test results for monitoring wells immediately north of public supply wells for the Village of East Hampton less than 2,500 feet downgradient (south) of the East Hampton battery storage facility (destroyed by fire in May 2023). The test results show PFOS and PFOA contamination of 2,774 and 13 parts per trillion (ppt), respectively, exceeding the EPA National Primary Drinking Water Regulation (4 ppt) by 694 times and 3 times, respectively.^[i] See SCDHS Well Maps #1 and #2 (attached). Also, read “High Levels of Toxins in Test Wells” by Mark Harrington, Newsday (July 17, 2026) (attached).

The level of PFOS (2,774 ppt) north of SCWA’s public supply wells is more than double the highest level of PFOS (1,010 ppt) recorded south of East Hampton Airport in Wainscott. See Airport PFAS Satellite Map (attached). The two sources of PFAS contamination, the East Hampton battery facility and the Airport, both converge on Georgica Pond. See PFAS Map (Georgica Pond) (attached).

The levels of PFOS and PFOA, although disturbing, pale in comparison to the recently detected level of ultra-short chain PFPrA of **1,700,000 ppt** (SCDHS Well Map #2, Eurofins BRWF26-1),^[ii] which exceeds the NYS Department of Health’s (preliminary) PFPrA drinking water screening level by 567 times, and the NYS Unspecified Organic Contaminant Maximum Contaminant Level (MCL) by 34 times.^[iii]

We know PFOA and PFOS contaminants in our sole-source aquifer are carcinogenic (PFOA) and possibly carcinogenic (PFOS) to humans,^[iv] among other adverse health effects,^[v] but there is not enough information to confidently project a future MCL for the ultra-short PFPrA. (NB: One should *not* interpret the limited scientific research on PFPrA as evidence of no adverse health effect.) The NYS Department of Health (preliminary) screening level of 3,000 ppt and the extrapolated PFPrA MCL (based on GenX) of 1,000 ppt^[vi] put SCDH’s extremely high detection of **1,700,000 ppt** into perspective.

NB: In response to the excessive levels of contamination, SCWA swiftly took all four wells out of service, reserving the least contaminated (Well No. 4) for last-call emergency use only.

Residents may underappreciate the gravity of the situation. Due to poor decisions that failed to consider verifiable analysis provided to East Hampton Town Supervisor Kathee Burke-Gonzalez and Councilwoman Cate Rogers in January 2024, SCWA was forced to take ~8% of its groundwater capacity for *the South Fork* (SCWA Zone 23), or an estimated 15-20% of its capacity

for the Town of East Hampton,^[vii] out of service due to extremely high concentrations of '*forever chemicals*.'

PFPrA's "overall environmental persistence is high [and] [i]ts mobility in soil and water suggests a potential for widespread contamination of aquatic systems."^[viii] Furthermore, SCWA cannot remove PFPrA using its primary groundwater treatment method, Granulated Activated Carbon. In other words, we have lost a significant part of our *only* supply of fresh water. For how long—months, years, decades—we do not know. Without access and confidence in a ready supply of fresh drinking water, how long before people stop coming to East Hampton? What will happen to property valuations?

Although Supervisor Kathee Burke-Gonzalez is asking residents to conserve water, and we should, she cites *only* a drought as the reason, not the loss of ~15-20% of our groundwater resources south of the battery storage facility to extreme levels of highly mobile and recalcitrant contamination.

Questions remain unanswered.

- Q1. Why will the battery facility in Montauk not go up in flames and contaminate Montauk's sole-source aquifer in the same way the fire at the East Hampton facility did?
- Q2. Will the East Hampton facility catch fire again? If not, why not?
- Q3. Do the facilities have closed-loop submersion water cooling systems to suppress the heat and fire in case of another thermal runaway (chain-reaction fire)?
- Q4. Is there containment of fire extinguishing water in the East Hampton and Montauk facilities sufficient to protect groundwater resources in case of another chain-reaction fire?
- Q5. What toxic substances are stored in the East Hampton and Montauk battery facilities and how much, precisely?
- Q6. Is there an evacuation plan in case of hydrogen fluoride gas emissions, which can be fatal over 170 ppm?
- Q7. Can South Hampton Hospital treat patients suffering from exposure to hydrogen fluoride gas? If not, where is the closest hospital that can, and how do patients get there in an emergency?
- Q7. Have fire and police departments been adequately trained for potential hydrogen fluoride gas emissions?
- Q8. Have private wells at and south of East Hampton Airport in Wainscott been tested for PFPrA?

In the three years since the fire at the East Hampton battery facility, the Town has not provided answers to these questions concerning our groundwater and health. Why not?

Had there been a full and transparent environmental review *before* the Town approved the two battery storage facilities, we might have avoided losing ~15-20% of the capacity and access to our sole-source aquifer due to extreme levels of contamination.

Will we have an open and transparent environmental review now, where the public can review and comment on the evidence?

A question of accountability— Why did Supervisor Kathee Burke-Gonzalez refuse to test the groundwater after I brought the inevitability of PFAS groundwater contamination from the battery facility fire to her attention in January 2024, when there was an opportunity to mitigate the release of toxic chemicals? Instead, months later, Kathee Burge-Gonzalez, Cate Rogers, and the Chair of the Wainscott Citizens' Advisory Committee, Carolyn Logan-Gluck, successfully lobbied to keep me off the WCAC in an ongoing effort to discredit me for presenting research and facts concerning our environment and health. The WCAC has never told me why, for the first time in its 40-year history, it rejected my application to rejoin the WCAC six years after I was removed from the committee (in 2018) by then-Councilwoman Kathee Burke-Gonzalez, the liaison to the WCAC at the time. The Town and the WCAC should *not* single out *any* resident for making a good faith effort to study and present verifiable factual information in a public meeting. Please read my letter to the WCAC (Dec 12, 2024) (attached).

Sincerely yours,
Si Kinsella

See footnotes (below).

[i] PFOS: Perfluorooctanesulfonic Acid

[ii] PFPrA: Perfluoropropanoic Acid

[iii] In NYS, the extremely high levels of perfluoropropanoic acid (PFPrA) fall within the general drinking water standard (i.e., *non-contaminant-specific*), the Unspecified Organic Contaminant Maximum Contaminant Level of 50 parts per billion (ppb) (50,000 ppt). Since there is no *contaminant-specific* drinking water standard or guidance value for PFPrA, the NYS Department of Health has developed a preliminary PFPrA screening level of 3 ppb (3,000 ppt) in drinking water. NYS and Suffolk County authorities will use the new PFPrA screening level for assessing health risks and actions to address PFPrA in private and public wells during the East Hampton investigation. For further information, see https://health.ny.gov/environmental/investigations/east_hampton/east_hampton.htm.

[iv] The World Health Organization (WHO) International Agency for Research on Cancer (IARC) classifies PFOA as "carcinogenic to humans" (Group 1), meaning there is convincing evidence that PFOA can cause cancer in humans, and classifies PFOS as "possibly carcinogenic to humans" (Group 2B), meaning that there is strong evidence that PFOS can induce key biological changes (like immunosuppression) that are related to cancer development

[v] According to the EPA, studies indicate that exposure to PFOA and PFOS over certain levels may result in adverse health effects, including— Developmental effects to fetuses during pregnancy or to breastfed infants (e.g., low birth weight, accelerated puberty, skeletal variations), Cancer (e.g., testicular, kidney), Liver effects (e.g., tissue damage), Immune effects (e.g., antibody production and immunity), Thyroid effects, and other effects (e.g., cholesterol changes). See EPA PFAS Fact Sheet (800-F-16-003), released May 31, 2016 (although dated November 2016) at— https://www.epa.gov/sites/production/files/2016-06/documents/drinkingwaterhealthadvisories_pfoa_pfos_updated_5.31.16.pdf

[vi] On August 1, 2023, the EPA Office of Research and Development published a human health toxicity value for PFPrA with a calculated non-cancer chronic reference dose (RfD) of 0.0005 mg/kg per day. Using the final chronic RfD for GenX (0.000003 mg/kg bw-day), which is two orders of magnitude lower than that of PFPrA, suggests a much higher potential threshold for a future PFPrA MCL. The MCL for GenX is 10 ppt, and two orders of magnitude would suggest a PRPrA MCL of more than 1,000 ppt (NB: currently these assumptions are only speculation). See Cape Fear Public Utility Authority Overview of PFPrA (attached). Also available online at— www.CFPUA.org/DocumentCenter/View/15390/PFPrA-White-Paper-8-3-23.

[vii] Estimate based on population.

[viii] See BenchChem, Environmental Fate of PFPrA: A Technical Guide (at 8), available online at—
https://pdf.benchchem.com/52/Perfluoropentanoic_Acid_PFPeA_An_In_depth_Technical_Guide_on_its_Role_as_an_Environmental_Contaminant.pdf