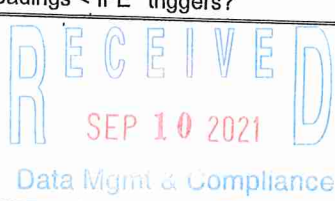
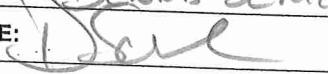


OHA - Drinking Water Services - Turbidity Monitoring Report
 Conventional or Direct Filtration

County: Polk

Name: City of Dallas OR ID #41: 00248 WTP-: Month/Year: Aug. 2021

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1	OFF	.075	.075	.081	.081	.076	.081
2	.076	.071	.070	.076	.072	.072	.076
3	.071	.071	.071	.076	.076	.086	.086
4	.071	.076	.076	.081	.076	.076	.081
5	.076	.076	.076	.061	.056	.052	.076
6	.061	.064	.061	.061	.060	.061	.062
7	.050	.056	.056	.061	.061	.061	.065
8	.061	.061	.061	.061	.060	.060	.061
9	.061	.070	.061	.061	.061	.061	.070
10	.060	.060	.065	.061	.061	.071	.071
11	.061	.061	.061	.061	.056	.056	.061
12	.056	.055	.060	.057	.058	.063	.063
13	.055	.061	.056	.057	.056	.053	.057
14	.061	.061	.061	.056	.067	.061	.062
15	.055	.055	.055	.051	.056	.056	.056
16	.055	.055	.056	.055	.062	.062	.062
17	.062	.062	.060	.061	.081	.061	.062
18	.056	.055	.055	.061	.060	.061	.061
19	.056	.061	.060	.056	.056	.056	.061
20	.056	.061	.060	.061	OFF	.062	.062
21	.056	.061	.060	.055	.056	.071	.071
22	.061	.061	.061	.057	.061	.061	.061
23	.060	.062	.071	.060	.062	.060	.071
24	.060	.062	.061	.060	.061	.071	.071
25	.060	.072	.060	.060	.060	.060	.072
26	.061	.087	.062	.061	.071	.072	.087
27	.070	.061	.061	.061	.061	.072	.072
28	.062	.076	.071	.061	.070	.071	.076
29	.061	.061	.072	.071	.061	.072	.072
30	.062	.061	.060	.061	.061	.061	.062
31	.061	.061	.071	.061	.072	.071	.072

Conventional or Direct Filtration Monthly Summary 95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All turbidity readings < IFE ² triggers? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
Notes: 		PRINTED NAME: Dennis Schlegel SIGNATURE:  DATE: 9/01/21 PHONE #: (503) 623-2175 CERT #: 7023	

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (OAR 333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form - Giardia Inactivation

Name: City of Dallas

ID #41:

00248

WTP: Month/Year:

Aug, 2021

Log Requirement (Circle One): 0.5 (1.0)

Date/Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/0820	1.01	112	113	21.7	7.30	22	yes	3007.0
2/0815	.86	112	96	22.1	7.15	22	yes	2950.7
3/0810	.97	112	108	22.3	7.37	22	yes	3005.5
4/0750	.97	112	108	22.1	7.23	22	yes	2976.5
5/0740	.97	112	108	22.3	7.33	22	yes	2576.1
6/0830	.91	112	101	20.9	7.20	22	yes	2821.9
7/0815	1.01	112	113	19.9	7.34	31	yes	2805.9
8/0930	1.18	112	132	20.4	7.32	23	yes	2814.0
9/0755	1.03	112	115	20.0	7.21	22	yes	2877.4
10/0810	1.10	112	123	20.5	7.23	23	yes	2927.2
11/0900	1.03	112	115	21.8	7.18	22	yes	3293.0
12/0805	1.04	112	116	22.9	7.18	22	yes	3284.1
13/0830	.77	112	86	23.0	7.15	22	yes	3188.2
14/0825	.86	112	96	23.0	7.15	22	yes	3178.5
15/0755	.86	112	96	22.4	7.18	22	yes	3011.5
16/0745	1.01	112	113	21.8	7.17	22	yes	2908.5
17/0805	1.23	112	137	21.4	7.19	23	yes	2867.9
18/0745	1.09	112	122	19.6	7.24	30	yes	2562.1
19/0735	1.12	112	125	19.5	7.21	31	yes	2602.5
20/0830	1.14	112	127	19.7	7.22	31	yes	2578.4
21/0900	1.08	112	120	19.4	7.23	30	yes	2530.5
22/0930	1.12	112	125	18.8	7.27	30	yes	2615.5
23/0815	1.26	112	141	16.9	7.77	31	yes	2822.3
24/0820	1.33	112	148	16.8	7.77	31	yes	2730.9
25/0820	1.24	112	138	17.8	7.77	31	yes	2709.5
26/0755	1.23	112	137	18.4	7.25	31	yes	2701.2
27/0855	1.12	112	125	18.6	7.24	31	yes	2407.6
28/1030	1.30	112	146	19.9	7.10	31	yes	2395.7
29/1130	1.05	112	118	19.2	7.34	30	yes	2395.7
30/0750	.97	112	108	18.8	7.17	30	yes	2449.6
31/0800	1.04	112	116	18.0	7.33	30	yes	2457.6

³If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours.

RECEIVED
SEP 10 2021
Data Mgmt & Reporting
Drinking Water Program