

OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: Douglas

Conventional or Direct Filtration

Month/Year: Jun-21

System Name: City of Drain

ID#: 41 00260

WTP : TP - A

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	OFF	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	0.04	0.12	0.04	0.04	0.12
3	OFF	OFF	OFF	OFF	OFF	0.05	0.15
4	0.04	0.04	0.04	0.04	OFF	OFF	0.14
5	OFF	OFF	OFF	OFF	OFF	0.04	0.05
6	0.05	0.23	0.06	0.05	OFF	OFF	0.23
7	OFF	OFF	OFF	OFF	OFF	0.06	0.08
8	0.05	0.05	0.05	0.05	OFF	OFF	0.13
9	OFF	OFF	OFF	OFF	OFF	0.08	0.08
10	0.05	0.05	0.05	0.05	OFF	OFF	0.10
11	OFF	OFF	OFF	OFF	0.06	0.05	0.08
12	0.05	0.04	0.04	0.04	OFF	OFF	0.10
13	OFF	OFF	OFF	OFF	OFF	OFF	OFF
14	OFF	OFF	OFF	OFF	0.04	0.04	0.08
15	0.04	0.04	0.04	OFF	OFF	OFF	0.05
16	OFF	OFF	OFF	OFF	OFF	0.04	0.06
17	0.05	0.04	0.04	OFF	OFF	OFF	0.09
18	OFF	OFF	OFF	OFF	OFF	0.09	0.10
19	0.05	0.05	0.04	OFF	OFF	OFF	0.10
20	OFF	OFF	OFF	OFF	OFF	0.05	0.12
21	0.05	0.05	0.05	OFF	OFF	OFF	0.11
22	OFF	OFF	OFF	OFF	OFF	0.05	0.07
23	0.05	0.05	0.05	0.05	OFF	OFF	0.10
24	OFF	OFF	OFF	OFF	OFF	0.05	0.16
25	0.05	0.10	0.04	0.05	OFF	OFF	0.10
26	OFF	OFF	OFF	OFF	OFF	0.10	0.11
27	0.05	0.05	0.04	0.05	OFF	OFF	0.15
28	OFF	OFF	OFF	OFF	0.06	0.06	0.07
29	0.04	0.03	0.03	0.06	0.07	OFF	0.16
30	OFF	OFF	OFF	OFF	OFF	0.05	0.09

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of daily turbidity readings ≤ 0.3 NTU?

Yes / No

All daily turbidity readings ≤ 1 NTU?

Yes / No

All turbidity readings < IFE<sup>2</sup> triggers

Yes / No

CT's met everyday?  
(see back)

Yes / No

All Cl<sub>2</sub> residual at entry point  
≥ 0.2 mg/l?

Yes / No

Notes:

PRINTED NAME: Harold Burris

SIGNATURE: *Harold Burris*

DATE: 7-10-21

PHONE #: ( 541 ) 836-7301

CERT #: 5248 FE

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. <sup>2</sup> IFE = Individ. Filter Eff. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : A

System Name: City of Drain ID#: 41 00260 Month/Year: Jun-21 Disinfection *Giardia* Log Inactiv: 1.0

Jate / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup> [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? <sup>3</sup> Yes / No	Peak Hourly Demand Flow [GPM]
1	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
2	1.5	115	177.4	22.1	8.16	27.7	YES	500
3	1.4	115	166.6	23.3	8.17	25.4	YES	500
4	1.5	115	174.3	22.6	8.13	26.4	YES	500
5	1.4	115	163.3	22.2	8.19	27.5	YES	500
6	1.5	115	168.1	21.4	8.13	28.5	YES	500
7	1.4	115	159.6	20.9	8.14	29.3	YES	500
8	1.5	115	167.8	20.5	8.14	30.3	YES	500
9	1.3	115	151.1	20.6	8.12	29.4	YES	500
10	1.5	115	167.0	20.1	8.20	31.8	YES	500
11	1.4	115	163.0	20.0	8.24	32.4	YES	500
12	1.5	115	166.8	19.8	8.30	33.7	YES	500
13	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
14	1.4	115	163.4	20.7	8.21	30.6	YES	500
15	1.5	115	170.2	20.4	8.27	32.1	YES	500
16	1.4	115	164.6	21.0	8.21	30.0	YES	500
17	1.5	115	168.6	20.9	8.34	31.8	YES	500
18	1.4	115	162.3	22.1	8.29	28.7	YES	500
19	1.4	115	166.3	21.9	8.37	30.1	YES	500
20	1.4	115	157.1	23.1	8.39	27.7	YES	500
21	1.4	115	160.1	23.2	8.50	28.7	YES	500
22	1.3	115	147.9	24.2	8.38	25.4	YES	500
23	1.3	115	154.1	23.7	8.35	26.1	YES	500
24	1.3	115	152.6	24.2	8.33	25.0	YES	500
25	1.4	115	159.9	24.2	8.50	26.9	YES	500
26	1.3	115	154.0	25.5	8.14	21.4	YES	500
27	1.4	115	157.0	25.6	8.29	22.6	YES	500
28	1.3	115	144.8	27.3	8.10	18.5	YES	500
29	1.3	115	151.3	26.4	8.08	19.6	YES	500
30	1.3	115	146.6	26.2	8.03	19.4	YES	500

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.

Revised February 2012