

OHA - Drinking Water Program -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas

Month/Year: Jul-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	0.04	0.04	0.07	0.04	OFF	OFF	0.15
2	OFF	OFF	OFF	OFF	OFF	0.04	0.18
3	0.07	0.04	0.05	0.04	OFF	OFF	0.08
4	OFF	OFF	OFF	OFF	OFF	0.04	0.06
5	0.04	0.04	0.07	0.04	OFF	OFF	0.12
6	OFF	OFF	OFF	OFF	OFF	0.04	0.05
7	0.04	0.04	0.04	0.04	OFF	OFF	0.08
8	OFF	OFF	OFF	OFF	OFF	0.04	0.06
9	0.04	0.04	0.04	OFF	OFF	OFF	0.08
10	OFF	OFF	OFF	OFF	OFF	0.04	0.07
11	0.04	0.04	0.04	0.04	OFF	OFF	0.07
12	OFF	OFF	OFF	OFF	0.04	0.04	0.11
13	OFF	OFF	OFF	0.04	0.04	0.04	0.10
14	0.04	0.03	0.04	0.04	0.04	0.03	0.05
15	0.04	0.04	0.03	0.04	0.04	OFF	0.09
16	OFF	OFF	OFF	OFF	OFF	0.03	0.07
17	0.03	0.04	0.04	0.03	OFF	OFF	0.05
18	OFF	OFF	OFF	OFF	OFF	0.04	0.05
19	0.05	0.04	0.04	0.04	OFF	OFF	0.05
20	OFF	OFF	OFF	OFF	OFF	0.04	0.05
21	0.04	0.04	0.04	OFF	OFF	OFF	0.04
22	OFF	OFF	OFF	OFF	OFF	0.04	0.07
23	0.04	0.04	0.04	0.04	OFF	OFF	0.05
24	OFF	OFF	OFF	OFF	OFF	0.04	0.04
25	0.04	0.04	0.04	0.04	OFF	OFF	0.08
26	OFF	OFF	OFF	OFF	OFF	0.04	0.06
27	0.04	0.04	0.05	0.12	OFF	OFF	0.13
28	OFF	OFF	OFF	OFF	OFF	0.04	0.05
0.037	0.04	0.04	OFF	OFF	OFF	OFF	0.05
30	OFF	OFF	OFF	OFF	OFF	0.04	0.05
31	0.04	0.04	0.04	0.04	OFF	OFF	0.05

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: 8-9-21

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: Jul-21

Disinfection Giardia  
Log Inactiv:

1.0

Gate / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.3	115	146.6	25.5	8.10	20.9	YES	500
2	1.2	115	138.0	25.6	7.96	19.6	YES	500
3	1.4	115	165.6	25.2	8.08	21.6	YES	500
4	1.3	115	152.0	26.3	7.82	17.9	YES	500
5	1.3	115	154.3	25.4	7.95	20.1	YES	500
6	1.3	115	154.6	26.3	7.60	16.5	YES	500
7	1.4	115	158.2	25.4	7.62	17.8	YES	500
8	1.4	115	155.9	25.8	7.67	17.6	YES	500
9	1.4	115	161.0	24.9	7.71	19.1	YES	500
10	1.4	115	156.1	25.7	7.67	17.7	YES	500
11	1.4	115	160.7	25.2	7.72	18.8	YES	500
12	1.3	115	154.0	25.7	7.62	17.4	YES	500
13	1.4	115	160.2	25.7	7.78	18.6	YES	500
14	1.4	115	159.9	25.5	7.79	18.9	YES	500
15	1.5	115	174.0	25.2	7.73	19.1	YES	500
16	1.8	115	204.7	25.7	7.57	17.9	YES	500
17	1.8	115	208.5	25.0	7.50	18.4	YES	500
18	1.8	115	207.6	25.4	7.53	18.1	YES	500
19	1.8	115	212.3	24.7	7.64	19.9	YES	500
20	1.6	115	186.3	25.4	7.50	17.5	YES	500
21	1.6	115	188.0	24.5	7.56	19.1	YES	500
22	1.6	115	183.2	24.6	7.41	17.8	YES	500
23	1.7	115	193.5	23.9	7.49	19.4	YES	500
24	1.6	115	178.7	24.8	7.55	18.4	YES	500
25	1.7	115	190.3	24.5	7.62	19.5	YES	500
26	1.6	115	183.4	25.5	7.52	17.5	YES	500
27	1.6	115	178.3	25.2	7.67	18.8	YES	500
28	1.6	115	186.5	25.7	7.57	17.6	YES	500
29	1.6	115	186.0	25.4	7.68	18.7	YES	500
30	1.6	115	179.1	25.8	7.65	17.9	YES	500
31	1.6	115	185.8	25.4	7.68	18.7	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.