

OHA - Drinking Water Program -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas

Month/Year: Dec-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 ¹ [NTU]
1	OFF	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	0.05	0.05	0.05	0.06	0.10
3	OFF	OFF	OFF	OFF	OFF	OFF	OFF
4	OFF	OFF	OFF	0.08	0.05	0.05	0.09
5	0.05	OFF	OFF	OFF	OFF	OFF	0.07
6	0.05	0.05	0.07	0.05	OFF	OFF	0.16
7	OFF	OFF	OFF	OFF	OFF	0.07	0.07
8	0.05	0.05	0.05	0.05	OFF	OFF	0.11
9	OFF	OFF	OFF	OFF	OFF	0.06	0.06
10	0.05	0.05	0.05	OFF	OFF	OFF	0.05
11	OFF	OFF	OFF	OFF	OFF	0.07	0.07
12	0.05	0.05	0.05	0.05	OFF	OFF	0.09
13	OFF	OFF	OFF	OFF	OFF	0.07	0.07
14	0.05	0.05	0.05	OFF	OFF	OFF	0.09
15	OFF	OFF	OFF	OFF	OFF	0.06	0.06
16	0.05	0.05	0.05	0.05	OFF	OFF	0.10
17	OFF	OFF	OFF	OFF	OFF	0.06	0.06
18	0.05	0.05	0.06	0.05	OFF	OFF	0.10
19	OFF	OFF	OFF	OFF	OFF	0.06	0.06
20	0.05	0.05	0.05	OFF	OFF	OFF	0.06
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF
22	OFF	OFF	0.07	0.05	0.05	0.05	0.11
23	OFF	OFF	OFF	OFF	OFF	0.09	0.09
24	0.07	0.09	0.05	OFF	OFF	OFF	0.17
25	OFF	OFF	OFF	OFF	OFF	0.07	0.07
26	0.05	0.05	0.14	OFF	OFF	OFF	0.16
27	OFF	OFF	OFF	0.05	0.06	OFF	0.06
28	0.05	0.06	0.06	OFF	OFF	OFF	0.18
29	OFF	OFF	OFF	0.14	0.08	0.07	0.18
30	0.07	OFF	OFF	OFF	OFF	OFF	0.12
31	OFF	OFF	OFF	OFF	OFF	0.11	0.11

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 < IFE² triggers Yes No

CT's met everyday? (see back) Yes No

All Cl₂ residual at entry point ≥ 0.2 mg/l? Yes No

Notes:

PRINTED NAME: Harold Burris
 SIGNATURE: *Harold Burris* DATE: 1-10-22
 PHONE #: (541) 836-7301 CERT #:5248 FE

¹ 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. ² IFE = Individ. Filter Effl. (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: Dec-21

Disinfection *Giardia*
Log Inactiv:

1.0

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
2	1.8	115	212.3	11.6	7.09	39.4	Yes	500
3	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
4	1.8	115	211.4	11.3	6.98	38.7	Yes	500
5	1.8	115	210.9	11.4	6.97	38.3	Yes	500
6	1.9	115	214.4	10.9	6.96	39.5	Yes	500
7	1.7	115	201.0	11.7	7.01	37.7	Yes	500
8	1.8	115	212.4	10.9	6.99	39.9	Yes	500
9	1.7	115	194.1	12.1	6.96	35.9	Yes	500
10	1.9	115	213.1	10.4	6.96	40.8	Yes	500
11	1.6	115	188.6	11.9	7.00	36.6	Yes	500
12	1.8	115	212.1	10.1	7.03	42.6	Yes	500
13	1.6	115	186.9	11.5	7.00	37.5	Yes	500
14	1.9	115	215.2	9.4	6.95	43.5	Yes	500
15	1.7	115	199.8	11.0	6.98	39.0	Yes	500
16	1.9	115	216.1	9.0	7.00	45.5	Yes	500
17	1.8	115	204.7	10.0	7.05	42.9	Yes	500
18	1.9	115	215.2	9.0	7.02	45.8	Yes	500
19	1.8	115	205.4	10.0	7.02	42.4	Yes	500
20	1.9	115	216.2	9.0	7.01	45.7	Yes	500
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
22	1.8	115	212.6	9.4	6.99	44.0	Yes	500
23	1.8	115	209.1	9.6	7.00	43.4	Yes	500
24	1.9	115	220.3	9.1	6.98	45.1	Yes	500
25	1.8	115	210.3	9.3	6.97	43.9	Yes	500
26	1.9	115	215.4	8.3	6.96	46.9	Yes	500
27	1.8	115	201.4	8.2	6.99	47.1	Yes	500
28	1.9	115	216.9	7.1	6.98	51.3	Yes	500
29	1.9	115	214.8	7.2	7.05	52.1	Yes	500
30	1.8	115	202.1	7.1	7.08	52.4	Yes	500
31	1.7	115	194.2	7.8	7.06	49.2	Yes	500

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.

Revised February 2012