

OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: Douglas

Conventional or Direct Filtration

Month/Year: Apr-22

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	0.06	0.16	0.05	0.16
2	0.06	OFF	OFF	OFF	OFF	OFF	0.06
3	OFF	OFF	0.04	0.04	0.07	OFF	0.12
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF
5	OFF	OFF	0.12	0.04	0.04	OFF	0.16
6	OFF	OFF	OFF	0.05	OFF	OFF	0.10
7	OFF	OFF	0.04	0.04	0.06	OFF	0.13
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9	OFF	OFF	0.11	0.04	0.04	OFF	0.16
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11	OFF	OFF	0.04	0.03	0.04	OFF	0.06
12	OFF	OFF	OFF	OFF	OFF	OFF	OFF
13	OFF	OFF	0.07	0.03	0.03	OFF	0.15
14	OFF	OFF	OFF	OFF	OFF	OFF	OFF
15	OFF	OFF	0.03	0.03	0.04	OFF	0.10
16	OFF	OFF	OFF	OFF	OFF	OFF	OFF
17	OFF	OFF	OFF	0.16	0.03	0.04	0.16
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF
19	OFF	OFF	0.05	0.03	0.03	0.09	0.10
20	OFF	OFF	OFF	OFF	OFF	OFF	OFF
21	OFF	OFF	OFF	0.03	0.03	0.04	0.12
22	0.03	OFF	OFF	OFF	OFF	OFF	0.03
23	OFF	OFF	OFF	OFF	0.03	0.09	0.16
24	0.03	OFF	OFF	OFF	OFF	OFF	0.04
25	OFF	OFF	OFF	0.04	0.03	0.03	0.07
26	0.03	OFF	OFF	OFF	OFF	OFF	0.03
27	OFF	OFF	OFF	0.06	0.09	0.03	0.17
28	0.03	OFF	OFF	OFF	OFF	OFF	0.04
29	OFF	OFF	OFF	OFF	0.03	0.06	0.06
30	0.03	OFF	OFF	OFF	OFF	OFF	0.04

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / No
All daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / No		
All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes / No		

Notes:	PRINTED NAME: Harold Burris	
	SIGNATURE: <i>Harold Burris</i>	DATE: 5-9-22
	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 = Indiv. 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: Apr-22

Disinfection *Giardia*
Log Inactiv:

1.0

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.4	145	205.3	13.7	7.49	37.3	YES	400
2	1.3	145	193.1	13.8	7.54	37.4	YES	400
3	1.3	145	190.7	13.4	7.46	37.2	YES	400
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
5	1.2	145	172.4	13.0	7.41	37.0	YES	400
6	1.1	145	161.4	13.4	7.40	35.6	YES	400
7	1.6	145	230.0	13.9	7.46	37.2	YES	400
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9	1.3	145	193.3	14.3	7.42	34.6	YES	400
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11	1.5	145	212.6	13.1	7.42	38.1	YES	400
12	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
13	1.4	145	198.5	12.3	7.40	39.8	YES	400
14	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
15	1.5	145	218.5	12.0	7.37	40.8	YES	400
16	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
17	1.4	145	207.5	12.0	7.36	40.3	YES	400
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
19	1.4	145	207.8	11.9	7.36	40.6	YES	400
20	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
21	1.4	145	197.6	12.4	7.34	38.7	YES	400
22	1.4	145	207.8	12.7	7.36	38.1	YES	400
23	1.5	145	215.8	13.5	7.35	36.2	YES	400
24	1.4	145	202.4	13.6	7.35	35.6	YES	400
25	1.4	145	202.4	14.3	7.35	34.0	YES	400
26	1.4	145	200.0	14.5	7.34	33.4	YES	400
27	1.4	145	201.6	14.2	7.34	34.1	YES	400
28	1.4	145	197.9	14.3	7.35	33.9	YES	400
29	1.4	145	203.0	14.6	7.39	33.8	YES	400
30	1.4	145	202.7	14.7	7.39	33.6	YES	400

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