

OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: Douglas

Conventional or Direct Filtration

Month/Year: Jan-23

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	0.07	0.06	0.07	0.07	0.25
3	OFF	OFF	OFF	OFF	OFF	OFF	OFF
4	OFF	OFF	OFF	OFF	OFF	OFF	0.15
5	0.05	OFF	OFF	OFF	OFF	OFF	0.08
6	OFF	OFF	0.07	OFF	0.08	0.11	0.20
7	0.13	0.17	0.08	OFF	OFF	OFF	0.20
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9	OFF	OFF	OFF	0.16	0.28	0.05	0.28
10	0.10	0.06	0.08	0.05	0.07	0.06	0.30
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12	OFF	OFF	0.14	0.04	OFF	OFF	0.26
13	OFF	OFF	OFF	0.12	0.04	0.12	0.25
14	0.05	0.10	0.05	0.13	0.05	OFF	0.26
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF
16	OFF	OFF	0.05	0.22	OFF	OFF	0.00
17	OFF	OFF	OFF	0.04	0.05	OFF	0.28
18	OFF	OFF	0.05	0.15	OFF	OFF	0.28
19	OFF	OFF	OFF	0.15	0.11	0.06	0.28
20	0.13	0.04	0.12	0.13	OFF	OFF	0.24
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF
22	OFF	OFF	0.10	0.05	0.07	0.05	0.20
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF
24	OFF	OFF	0.16	0.04	0.06	0.08	0.26
25	0.05	OFF	OFF	OFF	OFF	OFF	0.07
26	OFF	OFF	0.20	0.19	0.05	0.05	0.24
27	OFF	OFF	0.24	OFF	OFF	OFF	0.24
28	OFF	OFF	0.05	0.21	0.04	0.06	0.26
29	OFF	OFF	OFF	OFF	OFF	OFF	OFF
30	OFF	OFF	0.17	0.04	0.13	0.06	0.29
31	0.05	OFF	OFF	OFF	OFF	OFF	0.07

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

Notes:

PRINTED NAME: Harold Burris

SIGNATURE: *Harold Burris* DATE: 2-2-23

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: Jan-23	Disinfection <i>Giardia</i> Log Inactiv: 1.0
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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	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
2	1.5	145	217.1	8.0	6.09	33.9	YES	400
3	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
4	1.5	145	215.8	7.5	7.60	59.6	YES	400
5	1.5	145	211.6	7.8	7.52	56.5	YES	400
6	1.4	145	207.1	7.9	7.44	54.4	YES	400
7	1.4	145	207.8	7.3	6.07	35.0	YES	400
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
9	1.4	145	203.7	7.9	7.52	55.8	YES	400
10	1.4	145	208.9	7.4	7.46	56.7	YES	400
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12	1.4	145	207.1	7.6	7.21	51.1	YES	400
13	1.4	145	208.4	7.8	7.18	49.9	YES	400
14	1.4	145	208.9	7.8	7.20	50.3	YES	400
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
16	1.4	145	203.6	8.4	7.22	48.5	YES	400
17	1.4	145	206.2	8.3	7.24	49.2	YES	400
18	1.5	145	211.7	8.2	7.23	49.6	YES	400
19	1.4	145	205.2	8.0	7.98	65.5	YES	400
20	1.4	145	208.1	7.7	8.17	71.9	YES	400
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
22	1.3	145	193.3	7.6	7.53	56.7	YES	400
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
24	1.3	145	193.7	7.4	7.73	61.8	YES	400
25	1.3	145	186.8	7.1	7.54	58.5	YES	400
26	1.3	145	192.6	7.3	7.67	60.8	YES	400
27	1.4	145	197.8	7.4	7.90	65.9	YES	400
28	1.4	145	201.0	7.2	7.55	59.0	YES	400
29	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
30	1.4	145	201.6	6.4	7.90	70.8	YES	400
31	1.4	145	195.9	6.0	7.99	74.9	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