

OHA - Drinking Water Program -Turbidity Monitoring Report Form

County: Douglas

Conventional or Direct Filtration

Month/Year: Jan-24

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	0.04	0.07	0.04	0.04	0.04	0.06	0.16
2	off	off	off	off	off	off	off
3	off	off	off	off	off	0.04	0.05
4	0.04	0.06	0.04	0.04	off	off	0.15
5	off	off	off	0.06	0.04	0.04	0.01
6	off	off	off	off	off	off	off
7	off	off	off	off	off	off	off
8	off	off	off	off	0.14	0.04	0.14
9	0.04	0.08	0.04	off	off	off	0.13
10	off	off	off	off	off	off	off
11	off	off	0.07	0.04	off	off	0.20
12	off	off	off	0.03	0.02	0.06	0.15
13	0.02	0.03	off	off	off	off	0.05
14	off	off	off	off	off	off	off
15	off	off	off	off	0.05	0.14	0.17
16	0.04	0.07	0.04	0.04	off	off	0.15
17	off	off	off	0.11	0.04	0.04	0.19
18	off	0.06	0.05	0.04	off	off	0.16
19	off	off	off	off	off	off	off
20	off	0.06	0.11	0.05	0.04	0.18	0.19
21	0.05	off	off	off	off	off	0.05
22	off	off	off	off	off	off	off
23	off	0.04	0.08	0.05	0.04	0.13	0.18
24	off	0.04	off	off	off	off	0.02
25	off	off	off	off	off	off	off
26	off	0.04	0.05	0.04	0.04	0.05	0.16
27	off	off	off	off	off	off	off
28	off	off	off	off	off	off	off
29	off	0.04	0.04	0.06	0.04	0.04	0.13
30	off	0.04	off	off	off	off	0.12
31	off	off	off	off	0.04	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 <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl ₂ 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: <i>Harold Burris</i> DATE: 2-9-24
	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-24	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	1.3	145	187.1	12.0	8.18	53.0	YES	400
2	off	145	#VALUE!	off	off	#VALUE!	off	off
3	0.7	145	103.0	13.0	8.00	43.6	YES	400
4	0.8	145	116.0	11.0	7.74	45.8	YES	400
5	0.8	145	118.9	12.0	7.77	43.4	YES	400
6	off	145	#VALUE!	off	off	#VALUE!	off	off
7	off	145	#VALUE!	off	off	#VALUE!	off	off
8	0.7	145	104.4	12.0	7.82	43.7	YES	400
9	1.1	145	152.3	11.0	7.79	47.9	YES	400
10	off	145	#VALUE!	off	off	#VALUE!	off	off
11	1.4	145	205.9	10.0	8.00	57.7	YES	400
12	0.9	145	134.9	12.0	7.92	46.3	YES	400
13	1.1	145	165.3	11.0	7.80	48.6	YES	400
14	off	145	#VALUE!	off	off	#VALUE!	off	off
15	0.8	145	121.8	11.0	7.76	46.3	YES	400
16	1.2	145	178.4	9.0	8.17	64.2	YES	400
17	1.3	145	185.6	11.0	8.04	53.8	YES	400
18	1.2	145	172.6	10.0	7.91	54.4	YES	400
19	off	145	#VALUE!	off	off	#VALUE!	off	off
20	1.3	145	187.1	9.0	8.00	60.8	YES	400
21	1.1	145	156.6	11.0	7.83	48.8	YES	400
22	off	145	#VALUE!	off	off	#VALUE!	off	off
23	1.3	145	194.3	10.0	7.94	55.9	YES	400
24	1.3	145	190.0	11.0	8.00	53.2	YES	400
25	off	145	#VALUE!	off	off	#VALUE!	off	off
26	1.4	145	201.6	10.0	8.09	59.4	YES	400
27	off	145	#VALUE!	off	off	#VALUE!	off	off
28	off	145	#VALUE!	off	off	#VALUE!	off	off
29	1.3	145	187.1	11.0	7.79	49.3	YES	400
30	1.1	145	163.9	12.0	8.03	49.3	YES	400
31	0.9	145	124.7	12.0	8.11	49.2	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