

OHA - Drinking Water Program -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas

Month/Year: Jan-22

System Name: Elkton, City of ID#: 41 00276

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	0.09	0.05	0.05	0.58
2	0.06	0.07	0.08	0.04	0.06	0.14	0.35
3	0.14	0.14	0.16	0.08	off	off	0.20
4	off	off	off	off	off	off	off
5	off	off	0.11	0.17	0.14	off	0.20
6	off	off	0.15	0.06	0.05	0.06	0.53
7	0.08	0.09	0.09	0.14	0.07	0.06	0.44
8	0.09	0.10	0.06	off	off	off	0.49
9	off	off	0.13	0.11	0.07	0.07	0.78
10	0.19	off	off	0.09	0.06	0.06	0.80
11	0.09	0.10	0.07	0.13	0.06	0.09	0.61
12	0.11	0.06	0.10	0.18	0.06	0.07	0.51
13	0.07	0.09	0.09	0.05	0.10	0.10	0.96
14	0.10	0.08	0.11	0.08	0.13	0.05	0.33
15	0.06	0.08	0.08	0.19	0.05	0.08	0.59
16	0.09	0.10	0.10	0.06	0.13	0.12	0.61
17	0.13	0.06	0.24	0.07	0.14	0.06	0.59
18	0.06	0.08	0.08	0.06	0.07	0.08	0.23
19	0.10	0.10	0.06	0.04	0.05	0.08	0.28
20	0.09	0.03	0.05	0.05	0.08	0.08	0.15
21	0.04	0.04	0.06	0.06	0.09	0.03	0.24
22	0.08	0.12	0.13	0.05	0.04	0.07	0.31
23	0.06	0.07	0.08	0.08	0.10	0.20	0.59
24	0.15	0.16	0.05	0.05	0.08	0.08	0.18
25	0.08	0.08	0.11	0.06	0.11	0.10	0.43
26	0.05	0.07	0.08	0.06	0.11	0.05	0.23
27	0.06	0.07	0.08	0.04	0.05	0.05	0.33
28	0.06	0.04	0.10	0.04	0.10	0.04	0.42
29	0.05	0.05	0.06	0.07	0.12	0.05	0.47
30	0.08	0.08	0.09	0.05	0.05	0.05	0.28
31	0.05	0.07	0.07	0.06	0.05	0.08	0.37

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: Gary Trout

SIGNATURE: *[Signature]*

DATE: 2/7/22

PHONE #: (541) 584-2547

CERT #: 5316

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

System Name:

Elkton, City of

ID#: 41 00276

Month/Year: Jan 2022

WTP -: A

Disinfection Giardia
Log Inactiv:

0.5

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	1.2	50	60.0	7.0	6.80	22.4	yes	105
2	0.8	50	40.0	7.0	6.80	21.4	yes	103
3	0.9	50	45.0	7.0	6.80	21.7	yes	103
4	1.7	50	85.0	off	off	4.7	-	off
5	1	50	50.0	7.0	6.80	21.9	yes	104
6	1.5	50	75.0	9.0	6.90	21.0	yes	104
7	1.3	50	65.0	9.0	6.90	20.6	yes	104
8	1.6	50	80.0	9.0	6.90	21.3	yes	104
9	1.8	50	90.0	8.0	6.90	23.2	yes	104
10	1.2	50	60.0	9.0	6.90	20.3	yes	104
11	1.7	50	85.0	9.0	6.90	21.5	yes	101
12	1.9	50	95.0	9.0	6.90	22.0	yes	103
13	1.8	50	90.0	9.0	7.00	22.5	yes	103
14	1.1	50	55.0	9.0	6.90	20.1	yes	103
15	1.7	50	85.0	9.0	6.90	21.5	yes	103
16	1.7	50	85.0	9.0	6.90	21.5	yes	103
17	1.1	50	55.0	9.0	6.90	20.1	yes	104
18	0.6	50	30.0	8.0	6.90	20.3	yes	104
19	1.8	50	90.0	8.0	7.00	24.1	yes	103
20	1.6	50	80.0	9.0	7.00	22.0	yes	104
21	1.7	50	85.0	8.0	7.00	23.8	yes	102
22	1.7	50	85.0	0.0	7.00	41.0	yes	103
23	1.4	50	70.0	9.0	7.00	21.5	yes	103
24	1.5	50	75.0	9.0	7.00	21.8	yes	104
25	1.6	50	80.0	9.0	7.00	22.0	yes	104
26	1.8	50	90.0	8.0	7.00	24.1	yes	103
27	1.8	50	90.0	7.0	7.00	25.8	yes	103
28	1.4	50	70.0	7.0	7.00	24.6	yes	103
29	1.7	50	85.0	7.0	7.00	25.5	yes	103
30	1.1	50	55.0	7.0	7.00	23.8	yes	104
31	1.3	50	65.0	7.0	7.10	25.2	yes	104

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