

OHA - Drinking Water Program -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas

Month/Year: Sep-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	0.03	0.07	0.08	0.03	0.03	0.03	0.17
2	0.07	0.08	0.03	0.03	0.03	0.04	0.15
3	0.03	0.04	0.08	0.03	0.08	0.03	0.10
4	0.03	0.07	0.03	0.04	0.03	0.05	0.14
5	0.07	0.03	0.06	0.03	0.03	0.06	0.10
6	0.03	0.05	0.08	0.04	0.03	0.07	0.13
7	0.03	0.07	0.08	0.03	0.06	0.08	0.12
8	0.03	0.06	0.08	0.03	0.03	0.08	0.12
9	0.03	0.06	0.08	0.04	0.03	0.04	0.15
10	0.07	0.03	0.06	0.03	0.03	0.06	0.13
11	0.06	0.03	0.07	0.03	0.03	0.05	0.11
12	0.07	0.03	0.04	0.09	0.03	0.04	0.10
13	0.07	0.03	0.06	0.03	0.03	0.05	0.10
14	0.03	0.04	0.08	0.03	0.03	0.08	0.13
15	0.03	0.04	0.03	0.03	0.03	0.07	0.14
16	0.08	0.03	0.05	0.07	0.03	0.03	0.15
17	0.05	0.08	0.03	0.03	0.03	0.03	0.15
18	0.03	0.03	0.07	0.03	0.03	0.07	0.12
19	0.03	0.04	0.08	0.03	0.03	0.05	0.14
20	0.08	0.03	0.03	0.05	0.08	0.03	0.19
21	0.05	0.08	0.03	0.03	0.06	0.11	0.13
22	0.03	0.06	0.08	0.03	0.03	0.10	0.11
23	0.03	0.04	0.08	0.03	0.03	0.08	0.13
24	0.08	0.03	0.04	0.10	0.03	0.04	0.12
25	0.07	0.09	0.03	0.05	0.03	0.03	0.11
26	0.03	0.06	0.08	0.03	0.05	0.04	0.10
27	0.03	0.06	0.08	0.04	0.03	0.03	0.10
28	0.07	0.08	0.03	0.04	0.03	0.04	0.10
29	0.07	0.08	0.03	0.03	0.08	0.03	0.17
30	0.07	0.09	0.03	0.03	0.09	0.03	0.10
31							

Conventional or Direct Filtration	
95% of daily turbidity readings ≤ 0.3 NTU?	Yes / No
All daily turbidity readings ≤ 1 NTU?	Yes / No
All turbidity readings < IFE ² triggers	Yes / No

Monthly Summary (Answer Yes or No)	
CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
Yes / No	Yes / No

Notes:

PRINTED NAME: Gary Trout
 SIGNATURE: 
 PHONE #: (541) 584-2547
 DATE: 10/5/22
 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: Sep 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	1.1	50	55.0	23.0	7.00	8.0	yes	108
2	0.8	50	40.0	22.0	7.00	8.3	yes	107
3	1	50	50.0	23.0	7.00	7.9	yes	108
4	0.8	50	40.0	22.0	7.00	8.3	yes	108
5	0.9	50	45.0	23.0	7.00	7.8	yes	108
6	0.8	50	40.0	21.0	7.00	8.9	yes	108
7	0.7	50	35.0	23.0	7.00	7.7	yes	108
8	1	50	50.0	23.0	7.00	7.9	yes	107
9	0.8	50	40.0	22.0	7.00	8.3	yes	108
10	1.1	50	55.0	23.0	7.00	8.0	yes	107
11	1.1	50	55.0	22.0	7.00	8.6	yes	107
12	1.2	50	60.0	22.0	7.00	8.7	yes	106
13	1	50	50.0	21.0	6.90	8.8	yes	107
14	1.1	50	55.0	21.0	6.90	8.9	yes	107
15	1	50	50.0	21.0	6.90	8.8	yes	107
16	1.1	50	55.0	21.0	6.90	8.9	yes	108
17	1.3	50	65.0	21.0	6.90	9.1	yes	107
18	1	50	50.0	20.0	6.90	9.4	yes	107
19	1.3	50	65.0	19.0	6.90	10.4	yes	107
20	0.9	50	45.0	18.0	6.90	10.6	yes	107
21	1	50	50.0	19.0	6.90	10.0	yes	107
22	1	50	50.0	19.0	6.90	10.0	yes	107
23	0.7	50	35.0	19.0	6.90	9.7	yes	106
24	1	50	50.0	19.0	6.90	10.0	yes	106
25	1	50	50.0	19.0	6.90	10.0	yes	106
26	1	50	50.0	19.0	6.90	10.0	yes	106
27	1.1	50	55.0	20.0	6.90	9.5	yes	106
28	1	50	50.0	19.0	7.00	10.4	yes	106
29	0.9	50	45.0	19.0	7.00	10.3	yes	106
30	0.9	50	45.0	19.0	6.90	9.9	yes	107
31			0.0			4.2		

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