

OHA - Drinking Water Program -Turbidity Monitoring Report Form
 Conventional or Direct Filtration

County: Douglas
 Month/Year: Feb-23

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	0.10	0.12	0.09	0.04	0.12	0.08	0.24
2	0.03	0.03	0.07	0.06	0.03	0.04	0.22
3	0.06	0.09	0.10	0.04	0.04	0.07	0.32
4	0.07	0.08	0.09	0.03	0.06	0.08	0.34
5	0.07	0.15	0.11	off	off	off	0.23
6	off	off	off	0.04	0.06	0.06	0.32
7	0.07	0.08	0.03	0.06	0.11	0.12	0.21
8	0.08	0.13	0.15	0.04	0.03	0.05	0.29
9	0.07	0.08	0.09	0.23	0.03	0.06	0.26
10	0.10	0.10	0.10	0.05	0.04	0.08	0.22
11	0.08	0.11	0.04	0.06	0.10	off	0.18
12	off	off	off	off	off	off	off
13	off	off	off	off	0.06	0.05	0.42
14	0.05	0.06	0.08	0.07	0.06	0.06	0.16
15	0.09	0.10	0.10	0.03	0.02	0.04	0.22
16	0.05	0.06	0.02	0.03	0.10	0.05	0.24
17	0.02	0.02	0.05	0.04	0.12	0.03	0.16
18	0.04	0.06	0.07	0.02	0.04	0.06	0.15
19	0.06	0.07	0.08	0.03	0.02	0.06	0.13
20	0.06	0.07	0.07	0.03	0.03	0.06	0.28
21	0.08	0.09	0.07	0.02	0.08	0.05	0.13
22	0.06	0.02	0.03	0.03	0.06	0.02	0.15
23	0.05	0.06	0.08	0.03	0.03	0.03	0.18
24	0.06	0.08	0.09	0.07	0.03	0.03	0.15
25	0.07	0.09	0.02	0.06	0.08	0.08	0.31
26	0.05	0.07	0.08	0.09	0.10	0.06	0.21
27	0.08	0.09	0.11	0.08	0.07	0.10	0.32
28	0.11	0.11	0.05	0.05	0.10	0.08	0.24
29							
30							
31							

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

Notes:	PRINTED NAME: Gary Trout	
	SIGNATURE: 	DATE: 3/8/23
	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

WTP - : **A**

System Name: **Elkton, City of** ID#: **41 00276** Month/Year: **Feb 2023** 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	1.5	50	75.0	5.0	6.90	27.5	yes	105
2	1.9	50	95.0	5.0	6.90	28.8	yes	105
3	1.4	50	70.0	5.0	6.90	27.1	yes	106
4	1.8	50	90.0	6.0	6.90	26.6	yes	106
5	1.4	50	70.0	7.0	6.90	23.7	yes	106
6	1	50	50.0	7.0	6.90	22.7	yes	107
7	1.7	50	85.0	7.0	6.90	24.6	yes	107
8	1.7	50	85.0	7.0	6.90	24.6	yes	106
9	1.2	50	60.0	7.0	6.90	23.2	yes	106
10	1.5	50	75.0	8.0	6.90	22.5	yes	106
11	1.4	50	70.0	9.0	6.90	20.8	yes	106
12	1.3	50	65.0	off	off	4.5	off	off
13	1.2	50	60.0	8.0	6.90	21.7	yes	109
14	1.6	50	80.0	8.0	6.90	22.7	yes	107
15	1.7	50	85.0	8.0	6.90	23.0	yes	107
16	1.7	50	85.0	8.0	6.90	23.0	yes	106
17	1.2	50	60.0	7.0	6.90	23.2	yes	106
18	1.7	50	85.0	8.0	6.90	23.0	yes	106
19	1.6	50	80.0	8.0	6.90	22.7	yes	105
20	1.2	50	60.0	8.0	6.90	21.7	yes	107
21	1.2	50	60.0	8.0	6.90	21.7	yes	106
22	1.4	50	70.0	7.0	6.90	23.7	yes	106
23	1.4	50	70.0	7.0	6.90	23.7	yes	106
24	1.5	50	75.0	6.0	6.90	25.7	yes	106
25	1.5	50	75.0	6.0	6.90	25.7	yes	106
26	1.1	50	55.0	7.0	6.90	22.9	yes	106
27	1	50	50.0	7.0	6.90	22.7	yes	106
28	0.8	50	40.0	7.0	6.90	22.2	yes	106
29			0.0			4.2		
30			0.0			4.2		
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.