

OHA - Drinking Water Program -Turbidity Monitoring Report Form


County: Douglas

Conventional or Direct Filtration

Month/Year: May-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 <sup>1</sup> [NTU]
1	0.10	0.12	0.13	off	0.07	0.10	0.20
2	0.11	0.13	0.08	0.08	0.15	0.14	0.91
3	0.14	0.14	0.14	0.10	0.08	0.02	0.14
4	0.03	0.05	0.06	0.02	0.02	0.02	0.16
5	0.05	0.06	0.02	0.03	0.06	0.06	0.10
6	0.07	0.02	0.05	0.11	0.02	0.03	0.26
7	0.05	0.07	0.07	0.02	0.02	0.07	0.09
8	0.05	0.07	0.02	0.03	0.07	0.02	0.11
9	0.03	0.06	0.06	0.08	0.02	0.03	0.20
10	0.04	0.06	0.07	0.02	0.04	0.06	0.17
11	0.05	0.02	0.02	0.09	0.02	0.02	0.13
12	0.04	0.06	0.07	0.14	0.04	0.12	0.22
13	0.13	0.12	0.12	0.02	0.02	0.04	0.48
14	0.07	0.02	0.04	0.09	0.02	0.06	0.15
15	0.02	0.04	0.06	0.03	0.02	0.05	0.11
16	0.06	0.02	0.05	0.02	0.02	0.06	0.10
17	0.02	0.02	0.05	0.02	0.02	0.05	0.39
18	0.05	0.02	0.05	0.17	0.02	0.05	0.27
19	0.05	0.02	0.05	0.10	0.02	0.03	0.41
20	0.05	0.02	0.03	0.12	0.02	0.02	0.44
21	0.05	0.07	0.07	0.02	0.02	0.08	0.11
22	0.06	0.08	0.08	0.02	0.02	0.02	0.90
23	0.05	0.07	0.07	0.02	0.04	0.07	0.15
24	0.02	0.04	0.02	0.08	0.02	0.02	0.90
25	0.05	0.07	0.02	0.10	0.02	0.05	0.11
26	0.02	0.02	0.06	0.12	0.02	0.02	0.20
27	0.04	0.06	0.02	0.07	0.02	0.02	0.25
28	0.05	0.02	0.02	0.06	0.02	0.02	0.12
29	0.03	0.06	0.07	0.02	0.02	0.02	0.12
30	0.04	0.06	0.02	0.05	0.02	0.03	0.20
31	0.05	0.06	0.02	0.03	0.02	0.02	0.09

<b>Conventional or Direct Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 0.3 NTU?	Yes / No <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back)	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 1 NTU?	Yes / No <input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
All turbidity readings < IFE <sup>2</sup> triggers	Yes / No <input checked="" type="radio"/> Yes / <input type="radio"/> No		
Notes:		PRINTED NAME: Gary Trout	
		SIGNATURE: 	DATE: 6/8/23
		PHONE #: (541) 584-2547	CERT #: 5316

<sup>1</sup> 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. <sup>2</sup> 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: **May 2023**

Disinfection *Giardia*  
Log Inactiv: 0.5

0.5

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.2	50	60.0	13.0	6.90	15.3	yes	107
2	0.9	50	45.0	13.0	6.80	14.3	yes	107
3	1.3	50	65.0	14.0	6.90	14.5	yes	106
4	1.7	50	85.0	13.0	6.80	15.7	yes	106
5	1.3	50	65.0	13.0	6.90	15.5	yes	106
6	1.5	50	75.0	13.0	6.90	15.9	yes	107
7	1.2	50	60.0	13.0	6.90	15.3	yes	105
8	1.5	50	75.0	13.0	6.90	15.9	yes	104
9	1	50	50.0	13.0	6.90	15.0	yes	107
10	1.4	50	70.0	13.0	6.90	15.7	yes	107
11	1.2	50	60.0	13.0	6.90	15.3	yes	106
12	1.2	50	60.0	14.0	6.90	14.4	yes	106
13	1.3	50	65.0	14.0	6.90	14.5	yes	106
14	1.3	50	65.0	15.0	6.90	13.6	yes	107
15	1.1	50	55.0	18.0	6.90	10.8	yes	107
16	1	50	50.0	18.0	6.90	10.7	yes	107
17	0.9	50	45.0	19.0	6.90	9.9	yes	107
18	1.3	50	65.0	19.0	6.90	10.4	yes	106
19	0.9	50	45.0	18.0	6.90	10.6	yes	106
20	1.3	50	65.0	18.0	6.90	11.1	yes	106
21	0.7	50	35.0	18.0	6.90	10.4	yes	106
22	1.2	50	60.0	18.0	6.90	11.0	yes	106
23	1.1	50	55.0	17.0	6.90	11.6	yes	108
24	1	50	50.0	17.0	6.90	11.5	yes	108
25	1.4	50	70.0	17.0	6.90	12.0	yes	107
26	1.2	50	60.0	17.0	6.90	11.7	yes	107
27	1.2	50	60.0	17.0	6.90	11.7	yes	105
28	1.2	50	60.0	18.0	6.90	11.0	yes	105
29	1	50	50.0	18.0	6.90	10.7	yes	105
30	1.1	50	55.0	19.0	6.90	10.1	yes	106
31	1.1	50	55.0	20.0	6.90	9.5	yes	107

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.