

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County:	Douglas
Month/Year:	Jun-24

System Name:	City of Elkton		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	6.00-06	0.08	0.03	0.05	0.07	0.30	
2	0.03	0.06	0.07	0.07	0.03	0.03	0.17	
3	0.06	0.07	0.08	0.05	0.07	0.06	0.15	
4	0.10	0.10	0.10	0.40	0.03	0.03	0.48	
5	0.04	0.07	0.08	0.04	0.03	0.06	0.12	
6	0.07	0.08	0.03	0.03	0.08	0.03	0.33	
7	0.03	0.06	0.08	0.04	0.03	0.03	0.19	
8	0.06	0.08	0.09	0.04	0.03	0.07	0.16	
9	0.08	0.04	0.06	0.10	0.04	0.05	0.26	
10	0.07	0.04	0.06	0.04	0.04	0.08	0.19	
11	0.04	0.07	0.08	0.12	0.04	0.04	0.27	
12	0.06	0.08	0.08	0.04	0.04	0.07	0.37	
13	0.08	0.08	0.04	0.06	0.04	0.06	0.19	
14	0.08	0.04	0.07	0.05	0.04	0.08	0.25	
15	0.08	0.04	0.07	0.09	0.04	0.07	0.25	
16	0.07	0.08	0.08	0.05	0.04	0.07	0.27	
17	0.08	0.09	0.04	0.05	0.04	0.05	0.31	
18	0.08	0.04	0.07	0.06	0.05	0.07	0.19	
19	0.07	0.05	0.06	0.10	0.05	0.04	0.22	
20	0.06	0.08	0.09	0.05	0.04	0.08	0.31	
21	0.08	0.05	0.08	0.05	0.05	0.08	0.37	
22	0.05	0.07	0.08	0.05	0.05	0.08	0.33	
23	0.08	0.05	0.08	0.05	0.05	0.09	0.31	
24	0.05	0.07	0.08	0.05	0.05	0.07	0.31	
25	0.08	0.09	0.05	0.05	0.08	0.09	0.39	
26	0.05	0.08	0.09	0.05	0.05	0.08	0.41	
27	0.09	0.05	0.05	0.07	0.05	0.05	0.27	
28	0.07	0.09	0.05	0.05	0.07	0.05	0.35	
29	0.08	0.09	0.06	0.05	0.09	0.10	0.30	
30	0.05	0.06	0.09	0.13	0.06	0.06	0.29	
31								

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings ≤ 0.3 NTU?

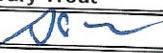
 Yes / NoCT's met everyday?
(see back)All Cl2 residual at entry point
≥ 0.2 mg/l?

All 4-hour turbidity readings ≤ 1 NTU?

 Yes / No Yes / No Yes / NoAll turbidity readings < IFE² triggers Yes / No

Notes:

PRINTED NAME: Gary Trout

SIGNATURE: 

PHONE #: (541)584-2547

7/8 6/40/2024

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)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name:		City of Elkton		ID#: 41 00276	Month/Year:	Jun-24	WTP - : A Disinfection Giardia Log Inactive:	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	1.3	50	65.0	19.0	6.90	10.4	YES	105
2	1.3	50	65.0	18.0	6.90	11.1	YES	105
3	1.1	50	55.0	18.0	6.90	10.8	YES	105
4	0.9	50	45.0	18.0	6.90	10.6	YES	105
5	0.9	50	45.0	19.0	6.90	9.9	YES	105
6	0.8	50	40.0	20.0	6.90	9.2	YES	105
7	0.8	50	40.0	19.0	6.90	9.8	YES	105
8	0.9	50	45.0	20.0	6.90	9.3	YES	105
9	0.8	50	40.0	21.0	6.90	8.6	YES	106
10	0.9	50	45.0	21.0	6.90	8.7	YES	105
11	1.1	50	55.0	21.0	6.90	8.9	YES	105
12	1.1	50	55.0	21.0	6.90	8.9	YES	109
13	0.7	50	35.0	21.0	6.90	8.5	YES	109
14	0.8	50	40.0	21.0	6.90	8.6	YES	109
15	0.9	50	45.0	21.0	6.90	8.7	YES	109
16	0.7	50	35.0	20.0	6.90	9.0	YES	109
17	0.8	50	40.0	19.0	7.00	10.2	YES	109
18	1.1	50	55.0	19.0	7.00	10.5	YES	109
19	1.1	50	55.0	20.0	7.00	9.8	YES	109
20	1	50	50.0	20.0	7.00	9.7	YES	109
21	1	50	50.0	21.0	7.00	9.1	YES	109
22	1.1	50	55.0	21.0	7.00	9.2	YES	109
23	1	50	50.0	22.0	7.00	8.5	YES	109
24	1	50	50.0	21.0	7.00	9.1	YES	109
25	0.8	50	40.0	21.0	7.00	8.9	YES	108
26	0.6	50	30.0	22.0	7.00	8.1	YES	109
27	1	50	50.0	22.0	7.00	8.5	YES	109
28	0.8	50	40.0	22.0	6.90	8.0	YES	109
29	1.1	50	55.0	22.0	6.90	8.3	YES	109
30	1.1	50	55.0	22.0	7.00	8.6	YES	108
31		50						

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

Return by 10th of following month by email, fax, or mail to:
dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350