

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Douglas

Conventional or Direct Filtration

Month/Year: Apr-25

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	0.07	0.07	0.08	0.09	0.05	0.08	0.32
2	0.08	0.10	0.03	0.05	0.11	0.02	0.15
3	0.03	0.06	0.08	0.09	0.05	0.05	0.56
4	0.08	0.09	0.03	0.03	0.09	0.08	0.13
5	0.07	0.03	0.05	0.13	0.10	0.10	0.18
6	0.11	0.08	0.10	0.02	0.03	0.14	0.23
7	0.15	0.14	0.14	0.16	0.35	0.02	0.35
8	0.06	0.08	0.09	0.02	0.06	0.08	0.13
9	0.06	0.06	0.02	0.04	0.02	0.02	0.95
10	0.05	0.07	0.07	0.02	0.02	0.06	0.21
11	0.05	0.02	0.03	0.04	0.09	0.02	0.15
12	0.02	0.06	0.07	0.02	0.02	0.07	0.14
13	0.06	0.08	0.07	0.02	0.06	0.04	0.13
14	0.06	0.02	0.02	0.08	0.02	0.03	0.14
15	0.05	0.02	0.02	0.02	0.02	0.02	0.13
16	0.05	0.06	0.02	0.02	0.07	0.07	0.07
17	0.06	0.02	0.04	0.02	0.02	0.04	0.16
18	0.05	0.06	0.07	0.02	0.02	0.05	0.11
19	0.02	0.02	0.05	0.08	0.02	0.05	0.13
20	0.05	0.02	0.04	0.03	0.07	0.02	0.22
21	0.03	0.05	0.06	0.02	0.06	0.02	0.10
22	0.03	0.05	0.06	0.07	0.02	0.04	0.20
23	0.05	0.02	0.02	0.02	0.02	0.04	0.14
24	0.05	0.02	0.03	0.05	0.06	0.02	0.13
25	0.03	0.04	0.05	0.08	0.02	0.05	0.15
26	0.05	0.02	0.02	0.04	0.06	0.02	0.12
27	0.02	0.05	0.06	0.07	0.02	0.02	0.18
28	0.03	0.05	0.06	0.09	0.02	0.03	0.25
29	0.05	0.05	0.06	0.02	0.05	0.02	0.10
30	0.02	0.05	0.06	0.15	0.02	0.05	0.17
31							

Conventional or Direct Filtration

95% of 4-hour turbidity readings $\leq$ 0.3 NTU?

Yes / No

All 4-hour turbidity readings $\leq$ 1 NTU?

Yes / No

All turbidity readings < IFE² triggers

Yes / No

Monthly Summary (Answer Yes or No)

CT's met everyday?
(see back)

Yes / No

All Cl₂ residual at entry point
 $\geq$ 0.2 mg/l?

Yes / No

Notes:

PRINTED NAME: Gary Trout

SIGNATURE:

PHONE #: (541)584-2547

5/7/25 4/6/2026

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:

Apr 25
Mar 25

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	1.4	50	70.0	10.0	6.90	19.5	YES	105
2	1.5	50	75.0	10.0	6.90	19.7	YES	105
3	1.4	50	70.0	10.0	6.90	19.5	YES	105
4	1.3	50	65.0	10.0	6.90	19.3	YES	104
5	1.1	50	55.0	10.0	6.90	18.8	YES	105
6	1.4	50	70.0	11.0	6.90	18.3	YES	105
7	1.5	50	75.0	11.0	6.90	18.5	YES	105
8	1.3	50	65.0	12.0	6.90	16.9	YES	105
9	1.4	50	70.0	12.0	6.90	17.1	YES	105
10	1.2	50	60.0	13.0	6.90	15.3	YES	105
11	1.3	50	65.0	12.0	6.90	16.9	YES	105
12	1.6	50	80.0	13.0	6.90	16.1	YES	105
13	0.9	50	45.0	12.0	6.90	16.2	YES	105
14	1.5	50	75.0	13.0	6.90	15.9	YES	105
15	1.5	50	75.0	13.0	6.90	15.9	YES	105
16	1.5	50	75.0	14.0	6.90	14.9	YES	104
17	1.1	50	55.0	13.0	6.90	15.2	YES	105
18	1.3	50	65.0	14.0	6.90	14.5	YES	104
19	1.5	50	75.0	14.0	6.90	14.9	YES	105
20	1.3	50	65.0	13.0	6.90	15.5	YES	105
21	1.5	50	75.0	13.0	6.90	15.9	YES	104
22	1.4	50	70.0	13.0	6.90	15.7	YES	105
23	1.3	50	65.0	14.0	6.90	14.5	YES	105
24	1.4	50	70.0	14.0	7.00	15.2	YES	105
25	1.4	50	70.0	14.0	7.00	15.2	YES	105
26	1.3	50	65.0	13.0	7.00	16.1	YES	105
27	1.2	50	60.0	14.0	7.00	14.9	YES	104
28	1	50	50.0	14.0	7.00	14.6	YES	105
29	1.3	50	65.0	14.0	7.00	15.1	YES	104
30	1.1	50	55.0	15.0	7.00	13.8	YES	105
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