OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas

Month/Year: Sep-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	0.04	0.04	0.04	0.05	0.06	0.04	0.10
2	0.04	0.06	0.07	0.05	0.04	0.04	0.21
3	0.04	0.05	0.07	0.20	0.04	0.04	0.20
4	0.06	0.07	0.04	0.12	0.04	0.05	0.20
5	0.07	0.08	0.04	0.06	0.12	0.04	0.16
6	0.05	0.08	0.04	0.05	0.09	0.09	0.15
7	0.09	0.09	0.09	0.09	0.04	0.04	0.09
8	0.09	0.09	0.09	0.04	0.03	0.06	0.23
9	0.03	0.06	0.08	0.03	0.04	0.07	0.13
10	0.03	0.05	0.07	0.03	0.08	0.08	0.12
11	0.03	0.03	0.06	0.10	0.03	0.05	0.17
12	0.07	0.03	0.06	0.03	0.04	0.07	0.11
13	0.03	0.05	0.07	0.07	0.03	0.03	0.15
14	0.06	0.08	0.03	0.04	0.04	0.07	0.10
15	0.03	0.04	0.07	0.08	0.03	0.03	0.17
16	0.06	0.08	0.04	0.05	0.05	0.04	0.20
17	0.04	0.07	0.08	0.03	0.11	0.07	0.18
18	0.07	0.03	0.05	0.05	0.03	0.05	0.18
19	0.07	0.04	0.03	0.06	0.03	0.03	0.18
20	0.05	0.07	0.08	0.03	0.03	0.06	0.14
21	0.07	0.08	0.03	0.04	0.09	0.08	0.14
22	0.08	0.09	0.08	0.04	0.03	0.03	0.17
23	0.04	0.07	0.03	0.03	0.08	0.03	0.21
24	0.04	0.07	0.03	0.03	0.09	0.03	0.13
25	0.05	0.07	0.03	0.03	0.08	0.03	0.13
26	0.03	0.06	0.03	0.04	0.09	0.03	0.15
27	0.05	0.08	0.03	0.03	0.09	0.03	0.14
28	0.03	0.05	0.07	0.03	0.07	0.08	0.13
29	0.03	0.06	0.08	0.07	0.03	0.06	0.12
30	0.07	0.03	0.04	0.03	0.04	0.07	0.13
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Conventional or Direct Filtration

95% of 4-hour turbidity readings ≤ 0.3 NTU? **Yes / No**

All 4-hour 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) **Yes / No**

All Cl2 residual at entry point ≥ 0.2 mg/l? **Yes / No**

Notes:

PRINTED NAME: Gary Trout

SIGNATURE: [signature] **10/9/2025**

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)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : A	
Disinfection *Giardia* Log Inactive:	0.5

System Name: City of Elkton **ID#: 41 00276** **Month/Year:** Sep-25

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	0.5	50	25.0	23.0	7.00	7.5	YES	107
2	0.7	50	35.0	23.0	7.00	7.7	YES	107
3	0.7	50	35.0	23.0	7.00	7.7	YES	108
4	1	50	50.0	21.0	7.00	9.1	YES	108
5	0.8	50	40.0	21.0	7.00	8.9	YES	107
6	0.8	50	40.0	21.0	7.00	8.9	YES	108
7	0.8	50	40.0	21.0	7.00	8.9	YES	108
8	0.7	50	35.0	21.0	7.00	8.8	YES	108
9	0.5	50	25.0	21.0	7.00	8.6	YES	108
10	0.8	50	40.0	21.0	7.00	8.9	YES	108
11	0.7	50	35.0	21.0	7.00	8.8	YES	108
12	0.7	50	35.0	21.0	7.00	8.8	YES	107
13	0.5	50	25.0	21.0	7.00	8.6	YES	107
14	0.5	50	25.0	20.0	7.00	9.2	YES	108
15	1	50	50.0	20.0	7.00	9.7	YES	108
16	0.7	50	35.0	20.0	7.00	9.4	YES	108
17	0.8	50	40.0	21.0	7.00	8.9	YES	108
18	0.6	50	30.0	21.0	7.00	8.7	YES	107
19	0.7	50	35.0	20.0	7.00	9.4	YES	107
20	0.6	50	30.0	20.0	7.00	9.3	YES	108
21	0.5	50	25.0	19.0	7.00	9.8	YES	108
22	1	50	50.0	19.0	7.00	10.4	YES	108
23	0.5	50	25.0	19.0	7.00	9.8	YES	108
24	0.7	50	35.0	19.0	7.00	10.1	YES	108
25	0.8	50	40.0	20.0	7.00	9.5	YES	108
26	0.7	50	35.0	19.0	7.00	10.1	YES	108
27	0.6	50	30.0	19.0	7.00	9.9	YES	108
28	0.6	50	30.0	19.0	7.00	9.9	YES	108
29	0.5	50	25.0	19.0	7.00	9.8	YES	108
30	0.5	50	25.0	18.0	6.90	10.1	YES	108
31		50						

[3] If Cl_2 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