

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : WTP-B

System Name:	Lowell, City of	ID#: 4100492	Month/Year:	Feb-21	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	0.85	66	56.1	9.7	6.90	18.7	Y	145
2	1.03	66	68.0	9.3	6.95	19.9	Y	145
3	1.04	66	68.6	9.6	6.93	19.4	Y	145
4	0.99	66	65.3	8.8	6.89	20.1	Y	145
5	0.92	66	60.7	8.9	6.86	19.6	Y	145
6	0.94	66	62.0	9.2	7.01	20.3	Y	145
7	1.01	66	66.7	9.7	6.88	18.9	Y	145
8	0.96	66	63.4	9.8	6.99	19.4	Y	145
9	1.01	66	66.7	8.9	6.97	20.5	Y	145
10	0.96	66	63.4	8.7	6.91	20.3	Y	145
11	1	66	66.0	8.5	6.91	20.6	Y	145
12	1.05	66	69.3	8.9	6.77	19.2	Y	145
13								
14	0.97	66	64.0	9.5	7.04	20.1	Y	140
15	1.07	66	70.6	9.5	6.86	19.1	Y	140
16	1.03	66	68.0	9.4	6.87	19.2	Y	140
17	1.01	66	66.7	9.2	6.85	19.3	Y	140
18	1	66	66.0	8.9	6.84	19.6	Y	140
19	1.01	66	66.7	9.1	6.93	20.0	Y	140
20	0.99	66	65.3	9.0	6.90	19.9	Y	140
21	1.06	66	70.0	9.4	6.91	19.6	Y	140
22	0.99	66	65.3	9.5	7.02	20.1	Y	140
23	0.95	66	62.7	9.2	6.92	19.7	Y	140
24	0.92	66	60.7	9.5	6.96	19.5	Y	140
25	0.94	66	62.0	9.2	6.90	19.5	Y	140
26	0.9	66	59.4	9.3	6.92	19.4	Y	140
27	0.9	66	59.4	9.1	6.87	19.3	Y	140
28								

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

Revised October 2013