

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: **Douglas**
 Month/Year: **September, 2024**

System Name: **City of Riddle** **ID#: 41** **00706** **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	0.01	0.01	0.01	Plant Off	0.02	0.02	0.02
2	0.02	0.02	0.02	0.02	0.02	0.02	0.02
3	0.02	0.02	0.02	0.01	0.01	0.01	0.01
4	0.01	0.01	0.01	0.01	0.01	0.01	0.01
5	0.01	0.01	Plant Off	Plant Off	0.02	0.02	0.02
6	0.02	0.01	Plant Off	0.01	0.01	0.01	0.01
7	0.01	0.01	0.01	0.01	0.01	0.01	0.01
8	0.01	0.02	0.02	0.02	0.02	0.02	0.02
9	0.02	0.02	0.02	0.02	0.02	0.02	0.02
10	0.02	0.01	0.01	0.01	0.01	0.01	0.02
11	0.01	0.01	0.01	0.01	0.01	0.01	0.01
12	0.01	0.01	0.01	0.01	0.02	Plant Off	0.02
13	Plant Off	Plant Off	Plant Off	0.02	0.02	0.02	0.02
14	0.02	0.02	0.02	0.01	0.01	0.01	0.02
15	0.01	0.01	0.01	0.01	0.01	0.01	0.01
16	0.01	0.01	0.01	Plant Off	Plant Off	Plant Off	0.01
17	Plant Off	Plant Off	Plant Off	0.02	0.02	0.02	0.02
18	0.01	0.01	0.01	0.02	Plant Off	Plant Off	0.02
19	Plant Off	Plant Off	Plant Off	Plant Off	0.01	0.01	0.01
20	0.01	0.01	0.01	0.01	0.01	0.01	0.01
21	0.01	0.01	0.01	0.01	0.02	0.02	0.02
22	0.02	0.02	0.02	0.02	0.02	0.02	0.02
23	0.02	0.02	0.02	0.02	0.02	0.02	0.02
24	0.02	0.02	0.02	0.01	0.01	0.01	0.01
25	0.01	0.01	0.01	0.01	0.01	0.01	0.01
26	0.01	0.01	0.01	0.01	0.01	0.01	0.01
27	0.01	0.01	0.01	Plant Off	0.02	0.02	0.02
28	0.02	0.02	0.02	0.02	0.02	0.02	0.02
29	0.02	0.02	0.02	0.02	0.02	0.02	0.02
30	0.02	0.02	0.01	0.01	0.02	0.02	0.02
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No

Notes:	PRINTED NAME: Robert L Tilton SIGNATURE: PHONE #: (541) 874-2905	DATE: 10/1/24 CERT #: 2604
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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)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : **A**

System Name: **City of Riddle** ID#: **41** **00706** Month/Year: **September, 2021** Disinfection *Giardia* Log Inactiv: **0.5**

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/ 15:21	0.79	110	86.9	21.8	7.10	8.7	Yes	229
2/ 21:34	0.69	110	75.9	21.5	6.83	7.9	Yes	403
3/ 23:55	0.63	110	69.3	21.4	6.95	8.3	Yes	386
4/ 00:07	0.63	110	69.3	21.4	7.04	8.6	Yes	388
5/ 23:54	0.71	110	78.1	22.7	7.44	9.2	Yes	456
6/ 12:43	0.62	110	68.2	23.8	7.55	8.8	Yes	401
7/ 17:41	0.71	110	78.1	22.4	6.84	7.5	Yes	399
8/ 14:31	0.88	110	96.8	22.5	6.91	7.8	Yes	218
9/ 19:53	0.94	110	103.4	22.3	7.03	8.4	Yes	174
10/ 19:19	0.84	110	92.4	22.6	7.17	8.5	Yes	281
11/ 23:55	0.69	110	75.9	22.0	7.13	8.6	Yes	404
12/ 13:54	0.68	110	74.8	20.2	7.44	10.9	Yes	423
13/ 10:26	0.41	110	45.1	20.3	7.46	10.6	Yes	425
14/ 19:08	0.72	110	79.2	20.5	7.09	9.4	Yes	425
15/ 18:56	0.91	110	100.1	20.6	7.11	9.6	Yes	176
16/ 00:01	0.96	110	105.6	20.3	7.05	9.7	Yes	171
17/ 11:24	0.74	110	81.4	20.3	7.05	9.4	Yes	422
18/ 17:16	0.80	110	88.0	18.9	7.60	12.8	Yes	443
19/ 15:52	0.62	110	68.2	20.8	7.43	10.4	Yes	293
20/ 21:00	0.84	110	92.4	19.6	7.17	10.5	Yes	405
21/ 19:28	0.81	110	89.1	19.1	7.34	11.5	Yes	388
22/ 19:56	0.99	110	108.9	18.7	7.33	12.0	Yes	180
23/ 20:00	0.87	110	95.7	19.0	7.20	11.1	Yes	175
24/ 23:59	0.75	110	82.5	19.2	7.21	10.8	Yes	446
25/ 1:15	0.69	110	75.9	19.4	7.00	9.8	Yes	404
26/ 00:56	0.69	110	75.9	19.9	7.06	9.7	Yes	195
27/ 17:28	0.71	110	78.1	18.7	7.04	10.4	Yes	192
28/ 06:48	0.87	110	95.7	19.0	7.01	10.3	Yes	381
29/ 17:55	0.83	110	91.3	18.1	7.01	10.9	Yes	182
30/ 20:01	0.79	110	86.9	17.6	7.12	11.7	Yes	179
31/		110						

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