

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: **Douglas**
 Month/Year: **March 2021**

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	0.02	0.02	PLANT OFF	0.02	0.02	0.02	0.06
2	0.02	0.02	0.02	0.02	PLANT OFF	>	0.02
3	>	>	>	>	0.02	0.02	0.04
4	0.02	0.02	0.02	0.02	0.02	0.02	0.02
5	0.02	0.02	0.02	0.02	PLANT OFF	>	0.02
6	>	>	>	>	>	>	OFF
7	>	>	>	0.02	0.02	0.02	0.06
8	0.02	0.02	0.02	0.02	0.02	0.02	0.02
9	0.02	0.02	PLANT OFF	>	0.02	0.02	0.05
10	0.02	0.02	0.02	0.02	0.02	0.02	0.02
11	0.02	0.02	Plant Off	>	>	>	0.02
12	>	>	>	0.02	0.02	0.02	0.05
13	0.02	0.02	0.02	0.02	0.20	0.02	0.02
14	0.02	0.02	0.02	0.02	PLANT OFF	>	0.02
15	>	>	>	>	0.02	0.02	0.07
16	0.02	0.02	0.02	0.02	0.02	0.02	0.02
17	0.02	0.02	0.02	PLANT OFF	>	>	0.02
18	>	>	>	>	0.02	0.02	0.05
19	0.02	0.02	0.02	0.02	0.02	0.02	0.02
20	0.02	0.02	0.02	PLANT OFF	>	>	0.02
21	>	>	>	0.02	0.02	0.02	0.07
22	0.02	0.02	0.02	0.02	0.02	0.02	0.02
23	0.02	0.02	Plant Off	>	>	>	0.02
24	>	>	>	0.02	0.02	0.02	0.03
25	0.02	PLANT OFF	0.02	0.02	0.02	0.02	0.02
26	0.02	0.02	PLANT OFF	>	>	>	0.02
27	>	>	>	<	0.02	0.02	0.06
28	0.02	0.02	0.02	0.02	0.02	0.02	0.02
29	0.02	0.02	0.02	0.02	PLANT OFF	>	0.02
30	>	>	>	>	>	0.02	0.04
31	0.02	0.02	0.02	0.02	0.02	0.02	0.02

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 <hr/> SIGNATURE: <hr/> PHONE #: (541) 874-2905 <hr/> DATE: 4/5/21 <hr/> CERT #: 2604
-----------------------	---

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: March-2021	Disinfection <i>Giardia</i> Log Inactiv:	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]
1/19:22	0.83	110	91.3	8.6	7.35	23.5	Yes	342
2/14:38	0.88	110	96.8	8.8	7.35	23.3	Yes	346
3/15:33	0.68	110	74.8	9.4	7.26	21.2	Yes	354
4/21:33	0.75	110	82.5	9.1	7.28	21.9	Yes	359
5/00:02	0.8	110	88.0	9.6	7.34	21.8	Yes	350
6/ Off	>	>	>	>	>	>	>	Off
7/10:59	0.63	110	69.3	9.3	7.38	22.1	Yes	378
8/16:37	0.75	110	82.5	8.8	7.34	22.9	Yes	380
9/14:18	0.7	110	77.0	8.5	7.22	22.2	Yes	357
10/19:14	0.73	110	80.3	8.7	7.32	22.8	Yes	362
11/00:07	0.78	110	85.8	8.7	7.17	21.7	Yes	358
12/10:48	0.71	110	78.1	8.5	7.32	23.1	Yes	364
13/ 19:02	0.73	110	80.3	8.8	7.36	23.0	Yes	361
14/ 00:38	0.8	110	88.0	8.7	7.34	23.1	Yes	338
15/ 15:56	0.69	110	75.9	8.8	7.26	22.1	Yes	370
16/18:48	0.73	110	80.3	8.1	7.34	23.9	Yes	355
17/ 00:30	0.76	110	83.6	8.0	7.32	24.0	Yes	327
18/ 18:04	0.71	110	78.1	8.9	7.45	23.5	Yes	371
19/ 20:20	0.78	110	85.8	8.8	7.41	23.5	Yes	359
20/ 00:46	0.83	110	91.3	8.9	7.47	24.0	Yes	340
21/ 11:02	0.81	110	89.1	9.4	7.31	21.9	Yes	358
22/ 18:41	0.83	110	91.3	8.9	7.42	23.6	Yes	359
23/ 00:01	0.97	110	106.7	9.1	7.43	23.7	Yes	348
24/ 10:25	0.97	110	106.7	9.3	7.45	23.6	Yes	363
25/ 00:38	1.07	110	117.7	9.1	7.47	24.3	Yes	356
26/ 00:14	1.13	110	124.3	9.1	7.51	24.9	Yes	351
27/ 21:18	1.05	110	115.5	10.1	7.39	22.1	Yes	371
28/ 21:43	0.96	110	105.6	9.8	7.51	23.3	Yes	366
29/14:50	0.94	110	103.4	10.9	7.44	21.1	Yes	357
30/13:47	0.76	110	83.6	11.1	7.45	20.4	Yes	381
31/ 12:41	0.73	110	80.3	10.2	7.43	21.5	Yes	361

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