

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: **Douglas**
 Month/Year: **September, 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	0.03	0.03	0.03	0.03	0.03	0.03	0.03
2	0.03	0.03	PLANT OFF	>	0.03	0.30	0.12
3	0.03	0.03	0.03	0.03	0.03	0.03	0.03
4	0.03	0.03	0.03	0.03	0.03	0.03	0.03
5	0.03	0.03	Plant Off	>	0.03	0.04	0.13
6	0.03	0.03	0.03	0.03	0.03	0.03	0.03
7	0.03	0.03	PLANT OFF	>	0.03	0.03	0.12
8	0.03	0.03	0.03	0.03	0.03	PLANT OFF	0.03
9	>	>	>	0.03	0.04	0.04	0.05
10	0.03	0.03	0.03	PLANT OFF	0.04	0.04	0.12
11	0.04	PLANT OFF	>	0.03	0.03	0.03	0.03
12	0.03	0.03	0.03	0.03	0.03	0.03	0.03
13	0.03	0.03	Plant Off	0.04	0.04	0.04	0.18
14	0.03	0.03	0.03	0.02	PLANT OFF	>	0.03
15	>	>	>	0.05	0.04	0.03	0.13
16	0.03	0.03	0.03	0.03	0.03	0.03	0.03
17	0.03	0.03	PLANT OFF	>	0.03	0.03	0.12
18	0.03	0.03	0.03	0.03	0.03	0.03	0.03
19	0.03	0.03	0.03	0.03	0.03	0.03	0.03
20	0.03	0.03	0.03	0.04	0.03	0.03	0.13
21	0.03	0.03	0.03	0.03	0.02	0.02	0.03
22	0.03	0.03	0.03	0.03	0.02	0.02	0.03
23	0.02	0.03	PLANT OFF	>	0.03	0.03	0.12
24	0.03	0.03	0.03	0.03	0.02	0.02	0.03
25	0.03	0.02	0.02	0.03	0.02	0.02	0.03
26	0.02	0.02	Plant Off	>	0.04	0.03	0.15
27	0.03	0.03	0.03	0.03	0.04	0.04	0.04
28	0.04	0.03	0.03	0.03	0.04	0.04	0.04
29	0.03	0.03	0.03	Plant Off	0.03	0.03	0.15
30	0.03	0.03	0.03	0.03	0.03	0.03	0.03
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:	DATE: 10/4/21
	PHONE #: (541) 874-2905	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: September, 2021	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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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]
1/19:19	0.87	110	95.7	21.0	7.23	9.8	Yes	221
2/17:30	0.84	110	92.4	20.6	7.26	10.1	Yes	306
3/16:19	0.71	110	78.1	20.4	7.26	10.1	Yes	429
4/ 15:56	0.68	110	74.8	19.6	7.31	10.8	Yes	404
5/23:12	0.73	110	80.3	20.4	7.33	10.4	Yes	400
6/10:08	0.74	110	81.4	21.0	7.74	11.6	Yes	399
7/14:38	0.90	110	99.0	20.7	7.19	9.8	Yes	321
8/19:05	0.85	110	93.5	20.7	7.21	9.9	Yes	330
9/11:47	0.61	110	67.1	21.4	7.34	9.6	Yes	433
10/18:23	0.71	110	78.1	22.2	7.72	10.6	Yes	406
11/ 10:02	0.68	110	74.8	21.3	7.75	11.4	Yes	396
12/ 23:51	0.80	110	88.0	21.0	7.15	9.4	Yes	385
13/17:51	0.73	110	80.3	20.8	7.44	10.5	Yes	390
14/ 12:22	0.76	110	83.6	20.1	7.58	11.7	Yes	355
15/ 10:03	0.61	110	67.1	19.4	7.55	11.9	Yes	407
16/16:35	0.69	110	75.9	19.8	7.74	12.5	Yes	398
17/ 00:30	0.85	110	93.5	19.4	7.39	11.5	Yes	232
18/ 16:06	0.90	110	99.0	19.9	7.19	10.4	Yes	212
19/ 19:06	0.82	110	90.2	19.6	7.17	10.4	Yes	230
20/ 13:14	0.75	110	82.5	19.0	7.21	10.9	Yes	273
21/ 00:04	0.82	110	90.2	18.7	7.15	11.0	Yes	235
22/ 19:41	0.91	110	100.1	19.8	7.10	10.1	Yes	222
23/ 15:16	0.91	110	100.1	18.8	7.17	11.1	Yes	233
24/ 19:47	0.90	110	99.0	18.5	7.27	11.8	Yes	207
25/ 19:40	0.90	110	99.0	18.9	7.18	11.1	Yes	211
26/ 17:24	0.90	110	99.0	19.4	7.18	10.7	Yes	224
27/ 18:03	0.70	110	77.0	19.2	7.15	10.5	Yes	417
28/ 12:56	0.62	110	68.2	18.5	7.22	11.2	Yes	313
29/ 16:15	0.83	110	91.3	19.1	7.22	11.0	Yes	214
30/ 17:53	0.89	110	97.9	17.7	7.09	11.6	Yes	211
31/		110					Yes	

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