

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: **Douglas**
 Month/Year: **January 2022**

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	0.02	0.02	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	0.02	PLANT OFF	>	0.02
4	>	>	>	0.03	0.03	0.02	0.06
5	0.02	0.02	PLANT OFF	>	0.03	0.02	0.07
6	0.02	0.02	0.02	0.02	0.02	0.02	0.02
7	0.02	0.02	0.02	0.02	PLANT OFF	>	0.02
8	>	>	>	0.03	0.02	0.02	0.05
9	0.02	0.02	0.02	0.02	0.02	0.02	0.02
10	0.02	0.02	0.02	0.00	Plant Off	>	0.02
11	>	>	>	>	0.03	0.02	0.06
12	0.02	0.02	0.02	0.02	0.02	0.02	0.02
13	0.02	0.02	0.02	0.02	0.02	0.02	0.02
14	0.02	0.02	0.02	0.02	PLANT OFF	>	0.02
15	>	>	>	0.03	0.02	0.02	0.06
16	0.02	0.02	0.02	0.02	0.02	0.02	0.02
17	0.02	0.02	0.02	0.02	0.02	0.02	0.02
18	0.02	0.02	PLANT OFF	>	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	0.20	0.02	0.02	0.02
21	0.02	0.02	PLANT OFF	>	>	>	0.02
22	>	>	>	0.03	0.02	0.02	0.05
23	0.02	0.02	0.02	0.02	0.02	0.02	0.02
24	0.02	0.02	0.02	0.02	0.02	0.02	0.02
25	0.02	0.02	PLANT OFF	>	>	>	0.02
26	>	>	>	0.02	0.02	0.02	0.05
27	0.02	0.02	0.02	0.02	0.02	0.02	0.02
28	0.02	0.02	0.02	0.03	0.02	0.02	0.02
29	0.03	0.04	PLANT OFF	0.05	0.04	0.02	0.13
30	0.02	0.02	0.02	0.02	0.02	0.02	0.02
31	0.02	0.02	PLANT OFF	>	>	>	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	
	SIGNATURE:	DATE: 2/2/22
	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: **January-2022** 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/ 19:05	0.82	110	90.2	6.8	7.36	26.5	Yes	230
2/19:24	0.82	110	90.2	6.9	7.24	25.2	Yes	228
3/00:01	0.87	110	95.7	7.1	7.30	25.6	Yes	235
4/10:53	0.8	110	88.0	7.5	7.35	25.2	Yes	272
5/23:22	0.82	110	90.2	8.1	7.24	23.3	Yes	266
6/19:05	0.75	110	82.5	8.9	7.25	22.0	Yes	251
7/00:32	0.81	110	89.1	9.5	7.19	20.9	Yes	246
8/ 11:02	0.7	110	77.0	9.2	7.25	21.5	Yes	297
9/19:14	0.84	110	92.4	8.6	7.09	21.4	Yes	241
10/14:51	0.89	110	97.9	8.1	7.13	22.6	Yes	240
11/13:23	0.65	110	71.5	9.3	7.15	20.5	Yes	294
12/20:39	0.76	110	83.6	8.8	7.28	22.4	Yes	243
13/ 20:08	0.76	110	83.6	10.6	7.20	19.4	Yes	236
14/ 00:06	0.83	110	91.3	9.0	7.24	22.0	Yes	233
15/ 12:12	0.71	110	78.1	8.4	7.25	22.6	Yes	276
16/ 19:50	0.82	110	90.2	7.9	7.26	23.8	Yes	243
17/ 20:08	0.82	110	90.2	7.9	7.26	23.8	Yes	241
18/ 20:02	0.82	110	90.2	7.7	7.30	24.4	Yes	241
19/ 19:40	0.76	110	83.6	8.1	7.28	23.5	Yes	245
20/22:28	0.79	110	86.9	8.8	7.29	22.6	Yes	245
21/ 00:02	0.81	110	89.1	8.8	7.09	21.1	Yes	244
22/ 10:48	0.74	110	81.4	8.8	7.31	22.6	Yes	264
23/19:38	0.77	110	84.7	8.2	7.27	23.3	Yes	241
24/ 20:10	0.78	110	85.8	8.0	7.33	24.1	Yes	239
25/ 00:02	0.82	110	90.2	7.2	7.34	25.6	Yes	237
26/19:54	0.79	110	86.9	7.3	7.36	25.6	Yes	267
27/19:15	0.76	110	83.6	6.8	7.33	26.1	Yes	243
28/ 19:44	0.65	110	71.5	6.4	7.38	26.9	Yes	229
29/ 14:27	0.7	110	77.0	6.2	7.36	27.2	Yes	255
30/18:36	0.76	110	83.6	6.0	7.40	28.2	Yes	255
31/ 00:32	0.85	110	93.5	6.0	7.54	30.0	Yes	277

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