

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: JACKSON

Conventional or Direct Filtration

Month/Year: Nov 2024

System Name: Emigrant Lake WTP ID#: 4190730 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/	off	off	off	off	off	off	.074
2/	.050	off	off	off	off	off	.075
3/	off	off	off	off	off	off	.073
4/	.045	off	off	off	.045	off	.075
5/	off	off	off	.043	off	off	.081
6/	off	off	.047	off	off	off	.098
7/	.041	off	off	off	off	.046	.098
8/	off	off	off	.043	off	off	.085
9/	off	.054	off	off	off	off	.085
10/	off	off	off	off	off	off	.086
11/	.046	off	off	off	off	.045	.096
12/	off	off	off	off	off	off	.095
13/	off	off	.056	off	off	off	.092
14/	.047	off	off	.082	.046	off	.082
15/	off	off	off	off	off	off	.141
16/	.043	off	off	off	off	.045	.091
17/	off	off	off	.041	off	off	.091
18/	off	off	off	off	off	off	.095
19/	.047	off	off	off	off	.042	.102
20/	off	off	off	.043	.041	off	.089
21/	off	off	.039	off	off	off	.088
22/	.042	off	off	off	.054	.041	.096
23/	off	off	off	.045	off	off	.120
24/	off	off	off	off	off	.045	.095
25/	off	off	off	.043	.041	off	.089
26/	off	off	.039	off	off	off	.103
27/	off	off	off	off	off	.043	.109
28/	off	off	off	off	.045	off	.108
29/	off	off	.043	off	off	off	.103
30/	off	.046	.046	off	.045	.046	.120
31/							

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes/No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	Yes/No	Yes/No	Yes/No
All turbidity readings < IFE ² triggers	Yes/No		
Notes: All NTU > .300 to waste		PRINTED NAME: Destin Stafford	
		SIGNATURE: <i>[Signature]</i>	DATE: 12/2/24
		PHONE #: (541) 774-8183	CERT #:

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)(d)(B&C))

OHA - Drinking Water Program – Surface Water Quality Data Form

System Name: JACKSON CO PKS EMIGRANT LAKE ID #: 4190730 WTP: A Month/Year: Nov 2024

Required Log Inactivation: 1

Date	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT CXT	Temp [° C]	pH	Required CT Use Tables	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1/	0.8	192	153.6	13.8	7.2	44	Y	4
2/	0.9	192	172.8	13.5	7.2	45	Y	1.3
3/	0.8	192	153.6	13.2	7.2	44	Y	1.8
4/	0.8	192	153.6	13.1	7.2	44	Y	1.6
5/	0.8	192	153.6	13.0	7.2	44	Y	1.5
6/	0.7	192	134.4	13.1	7.2	44	Y	1.8
7/	0.7	192	134.4	12.9	7.2	44	Y	1.3
8/	0.7	192	134.4	12.9	7.2	44	Y	1.1
9/	0.7	192	134.4	12.7	7.2	44	Y	2.5
10/	0.6	192	115.2	12.5	7.2	43	Y	3
11/	0.6	192	115.2	12.4	7.2	43	Y	1.8
12/	0.6	192	115.2	12.5	7.2	43	Y	2.5
13/	0.6	192	115.2	12.0	7.2	43	Y	1.5
14/	1.1	192	211.2	11.5	7.2	46	Y	6.5
15/	1.1	192	211.2	11.3	7.2	46	Y	1.6
16/	1.0	192	192	11.0	7.2	45	Y	1.6
17/	1.0	192	192	10.9	7.2	45	Y	1.6
18/	1.0	192	192	10.9	7.2	45	Y	1.1
19/	1.0	192	192	10.6	7.2	45	Y	2.1
20/	1.0	192	192	10.5	7.2	45	Y	1.6
21/	1.1	192	211.2	10.3	7.2	46	Y	2.1
22/	1.1	192	211.2	10.0	7.2	46	Y	4.8
23/	1.0	192	192	9.8	7.2	60	Y	1.6
24/	1.0	192	192	9.5	7.2	60	Y	1.5
25/	1.0	192	192	9.2	7.2	60	Y	2.3
26/	1.0	192	192	8.9	7.2	60	Y	1.1
27/	1.1	192	211.2	8.6	7.2	61	Y	1.5
28/	1.2	192	230.4	8.4	7.2	61	Y	2
29/	1.3	192	249.6	8.4	7.2	62	Y	1.5
30/	1.3	192	249.6	8.0	7.2	62	Y	7
31/		192						

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.