

SURFACE WATER MONTHLY OPERATING REPORT

FOR PUBLIC WATER SYSTEMS THAT ARE USING SURFACE WATER SOURCES
OR GROUND WATER SOURCES UNDER THE INFLUENCE OF SURFACE WATER

Summary Page

PUBLIC WATER

SYSTEM NAME: City Of Corsicana

PLANT NAME

OR NUMBER: Lake Halbert WTP

I certify that I am familiar with the information contained in this report and that,
to the best of my knowledge, the information is true, complete, and accurate.

PWS ID No.: 1750002

Operator's Signature: _____

Report for

the Month of: October 2010

Certificate No. & Grade: WO0012234, A

Date: November 2, 2010

TREATMENT PLANT PERFORMANCE

Total number of turbidity readings: <u>103</u>	Number of 4-hour periods when plant was off-line: <u>83</u>
Number of readings above 0.10 NTU: <u>97</u>	Number of 4-hour periods when plant was on-line but turbidity data was not collected: <u>0</u>
Number of readings above 0.3 NTU: <u>0</u>	Number of days when plant was on-line but individual filter turbidity data was not collected: <u>0</u>
Number of readings above 0.5 NTU: <u>0</u>	Number of days with readings above 1.0 NTU: <u>0</u> (2)
Number of readings above 1.0 NTU: <u>0</u>	Number of days with readings above 5.0 NTU: <u>0</u> (3)
Maximum allowable turbidity level: <u>0.3</u>	
Percentage of readings above this limit: <u>0.0</u> % (1)	

Statistical Summary

Maximum turbidity reading: <u>0.26</u> NTU	Average turbidity value: <u>0.17</u> NTU
Minimum turbidity reading: <u>0.10</u> NTU	Standard deviation: <u>0.038</u> NTU
CFE 95 th percentile value: <u>0.24</u> NTU	IFE 95 th percentile: <u>0.241</u> NTU

Number of days with a low CT for no more than 4.0 consecutive hours: <u>0</u>	Average log inactivation for Giardia: <u>NA</u>
Number of days with a low CT for more than 4.0 consecutive hours: <u>0</u> (4)	Average log inactivation for viruses: <u>NA</u>
	Number of days when profiling data was not collected: <u>27</u>
	Number of days when CT data was not collected: <u>27</u>

Minimum disinfectant residual required leaving the plant: 0.5 mg/L, measured as Total Chlorine

Number of days with a low residual for no more than 4.0 consecutive hours: <u>0</u>	Number of days when disinfectant residual leaving the plant was not properly monitored: <u>0</u>
Number of days with a low residual for more than 4.0 consecutive hours: <u>0</u> (5)	

DISTRIBUTION SYSTEM

Minimum disinfectant residual required in distribution system: 0.5 mg/L, measured as Total Chlorine

Total number of readings this month: <u>61</u> (at least 31 required) (8)	Percentage of readings with a low residual this month: <u>0.0</u> % (6A)
Average disinfectant residual value: <u>2.35</u>	Percentage of readings with a low residual last month: <u>0.0</u> % (6B)
Number of readings with a low residual: <u>0</u>	
Number of readings with no detectable residual: <u>0</u>	

ADDITIONAL REPORTS & WORKSHEETS

The Page 1 Addendum (Public Notices) is required because there was at least one treatment technique or monitoring/reporting violation reported.

Additional report(s) for individual filter monitoring required:	<input checked="" type="radio"/> NONE	<input type="radio"/> Filter Profile	<input type="radio"/> Filter Assessment	<input type="radio"/> CPE
Additional report(s) for individual filter monitoring submitted:	<input checked="" type="radio"/> NONE	<input type="radio"/> Filter Profile (9)	<input type="radio"/> Filter Assessment (10)	<input type="radio"/> CPE (11)
No additional IFE Reports are required this month.				

SURFACE WATER MONTHLY OPERATING REPORT
TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
WATER SUPPLY DIVISION/PUBLIC DRINKING WATER SECTION (MC-155)
P.O. BOX 13087, AUSTIN, TEXAS 78711-3087

SURFACE WATER MONTHLY OPERATING REPORT

FOR PUBLIC WATER SYSTEMS THAT ARE USING SURFACE WATER SOURCES
OR GROUND WATER SOURCES UNDER THE INFLUENCE OF SURFACE WATER (cont.)
Turbidity Data Page

PUBLIC WATER SYSTEM NAME: City Of Corsicana

PLANT NAME OR NUMBER: Lake Halbert WTP

PWS ID No.: 1750002

Connections: 10,713

Month: October Year: 2010

Population: 28,500

PERFORMANCE DATA																			
Date	Raw Water Pumpage (MGD)	Treated Water Pumpage (MGD)	RAW WATER ANALYSES		SETTLED WATER TURBIDITY (Optional Data)						FINISHED WATER QUALITY								
			NTU	Alk.	Basin No.						Turbidity						Lowest Residual	Time	
					1	2	3	4	5	6	NTU1	NTU2	NTU3	NTU4	NTU5	NTU6			
1	2.112	1.800	23	120								0.22	0.18	0.19	0.20	0.20	0.21	2.5	
2	1.375	1.372	21	119								0.21	0.21	0.21	0.18	X	X	3.6	
3	0.478	0.385	27	116								X	X	0.18	0.17	X	X	3.6	
4	1.640	1.500	29	111								X	X	X	0.16	0.19	0.18	2.5	
5	2.330	2.100	30	112								0.19	0.21	0.22	0.26	0.26	0.25	1.7	
6	1.334	1.325	28	115								0.21	0.19	0.22	0.21	X	X	2.5	
7	1.808	1.800	24	118								X	X	X	0.17	0.15	0.16	3.3	
8	0.696	0.605	21	116								0.15	0.14	X	X	X	X	3.2	
9	1.924	1.900	21	121								X	0.12	0.12	0.10	0.10	0.10	2.5	
10	0.000	0.000	X	X	X	X						X	X	X	X	X	X	X	
11	1.640	1.400	18	114								X	X	X	X	0.18	0.20	2.1	
12	2.342	2.100	20	115								0.16	0.15	0.22	0.20	0.24	0.20	2.9	
13	0.000	0.000	X	X	X	X						X	X	X	X	X	X	X	
14	1.336	1.150	25	116								X	X	0.16	0.20	0.22	X	2.1	
15	3.255	3.200	21	117								X	0.21	0.20	0.15	0.17	0.20	2.9	
16	2.357	2.200	21	121								0.16	0.16	0.14	0.10	0.10	0.13	2.8	
17	0.000	0.000	X	X	X	X						X	X	X	X	X	X	X	
18	2.622	2.432	18	116								X	X	0.17	0.22	0.23	0.21	2.3	
19	1.443	1.400	18	118								0.16	0.16	0.17	X	X	X	2.6	
20	0.860	0.850	20	118								X	X	X	X	0.18	0.18	2.2	
21	2.293	2.191	23	122								0.13	0.13	0.17	0.16	0.15	0.14	2.1	
22	1.888	1.697	28	121								0.14	0.17	X	0.16	0.16	0.15	1.5	
23	0.702	0.700	26	122								X	X	0.17	0.17	X	X	1.5	
24	0.000	0.000	X	X	X	X						X	X	X	X	X	X	X	
25	3.090	2.903	30	114								X	0.24	0.25	0.18	0.20	0.18	1.3	
26	0.836	0.800	30	116								0.17	0.16	X	X	X	X	2.0	
27	1.012	1.000	26	116								X	X	0.16	0.14	X	X	1.4	
28	1.583	1.550	28	121								X	X	0.15	0.12	0.13	0.13	1.1	
29	2.502	2.421	35	119								0.13	0.12	0.12	0.13	0.12	0.14	1.8	
30	1.239	1.139	28	122								X	X	X	0.13	0.10	0.13	2.4	
31	1.172	1.159	24	116								X	X	X	X	0.15	0.19	2.9	
Total	45.869	43.079																	
Avg	1.480	1.390																	
Max	3.255	3.200																	
Min	0.000	0.000																	

NOTE: ONLY use the "Time" column to show the length of time that the disinfectant residual entering the distribution system fell below the acceptable level.

SUBMITTED BY: _____ Certificate No. and Grade: W00012234, A Date: November 2, 2010

SURFACE WATER MONTHLY OPERATING REPORT

FOR PUBLIC WATER SYSTEMS THAT ARE USING SURFACE WATER SOURCES
OR GROUND WATER SOURCES UNDER THE INFLUENCE OF SURFACE WATER (cont.)

Filter Data Page

PUBLIC WATER
SYSTEM NAME: City Of Corsicana
PWS ID No.: 1750002

PLANT NAME
OR NUMBER: Lake Halbert WTP
Month: October Year: 2010

PERFORMANCE DATA																				
Date	INDIVIDUAL FILTER TURBIDITY																			
	Filter No. 1		Filter No. 2		Filter No. 3		Filter No. 4		Filter No. 5		Filter No. 6		Filter No. 7		Filter No. 8		Filter No. 9		Filter No. 10	
	Max	4 Hrs	Max	4 Hrs	Max	4 Hrs	Max	4 Hrs	Max	4 Hrs	Max	4 Hrs	Max	4 Hrs	Max	4 Hrs	Max	4 Hrs		
1	0.27	0.24	X	X	0.17	X	0.20	0.14												
2	0.23	X	X	X	0.11	X	0.22	X												
3	0.13	0.13	X	X	0.06	0.06	0.18	0.18												
4	0.17	0.16	X	X	0.11	0.07	0.21	0.17												
5	0.14	X	0.25	0.20	0.21	0.21	0.28	X												
6	0.21	0.21	0.18	0.18	0.10	X	0.17	X												
7	0.18	0.18	0.16	0.15	0.08	0.06	0.09	0.09												
8	0.13	X	0.15	X	0.08	X	X	X												
9	0.12	0.12	0.15	0.14	0.05	0.04	0.09	0.09												
10	X	X	X	X	X	X	X	X												
11	0.24	0.24	0.18	0.14	0.06	0.06	0.10	0.08												
12	0.25	0.17	0.23	0.23	0.22	0.21	0.12	X												
13	X	X	X	X	X	X	X	X												
14	0.13	0.11	0.22	0.20	0.10	0.06	0.16	0.16												
15	0.13	0.12	0.21	0.21	0.09	0.09	0.20	0.20												
16	X	X	0.12	X	0.08	0.08	0.15	0.15												
17	X	X	X	X	X	X	X	X												
18	0.22	0.22	0.24	0.24	0.15	0.15	0.16	0.14												
19	0.16	X	0.16	X	0.10	X	0.17	X												
20	0.14	0.14	X	X	0.06	0.06	X	X												
21	0.09	X	0.17	0.17	0.06	X	0.12	0.08												
22	0.17	0.13	0.10	0.08	0.09	0.07	0.16	0.13												
23	0.15	0.15	0.18	0.18	0.08	0.08	0.20	0.20												
24	X	X	X	X	X	X	X	X												
25	0.19	0.18	0.21	0.20	0.09	0.09	0.27	0.27												
26	0.18	X	0.15	X	0.07	X	0.15	X												
27	0.13	0.13	0.15	0.12	0.05	0.04	0.10	0.10												
28	0.10	0.10	0.09	0.09	0.05	0.04	0.10	0.09												
29	0.17	0.17	0.09	X	0.06	X	0.10	X												
30	0.13	0.12	0.09	0.09	0.08	0.08	0.10	0.08												
31	0.13	0.13	0.18	0.15	X	X	0.10	0.09												

SUMMARY & COMPLIANCE ACTIONS	Criteria	Filter No.										Plant
		1	2	3	4	5	6	7	8	9	10	
Number of days with event(s) above 0.5 NTU at 4.0 hrs this month	0	0	0	0								
Number of days with event(s) above 1.0 NTU this month	0	0	0	0								
Number of days with event(s) above 1.0 NTU last month	0	0	0	0								
Number of days with event(s) above 1.0 NTU two months ago	0	0	0	0								
Total number of days with event(s) above 1.0 NTU in three months	0	0	0	0								
Number of days with event(s) above 2.0 NTU this month												0
Number of days with event(s) above 2.0 NTU last month												0
Does the filter/plant have an approved Corrective Action Plan?	N	N	N	N								N
Is the plant required to submit a Filter Profile Report?	N	N	N	N								
Is the plant required to submit a Filter Assessment Report?	N	N	N	N								
Is the plant required to submit a Request for Compliance CPE?												N

SUBMITTED BY: _____ Certificate No. _____ and Grade: WO0012234, A Date: November 2, 2010

SURFACE WATER MONTHLY OPERATING REPORT

FOR PUBLIC WATER SYSTEMS THAT ARE USING SURFACE WATER SOURCES
OR GROUND WATER SOURCES UNDER THE INFLUENCE OF SURFACE WATER (cont.)
Disinfection Data Page

PUBLIC WATER SYSTEM NAME: City Of Corsicana
PWS ID No.: 1750002

PLANT NAME OR NUMBER: Lake Halbert WTP
Month: October Year: 2010

DISINFECTION PROCESS PARAMETERS							
APPROVED CT STUDY PARAMETERS					PERFORMANCE STANDARDS		
Parameters	Disinfection Zones					Log Inactivations	
	D1	D2	D3	D4	D5	Giardia lamblia Cysts	Viruses
Flow Rate (MGD)	4.000	4.000	4.000			0.5	2.0
T ₁₀ (minutes)	78.3	15.1	9.0				

PERFORMANCE DATA									
DISINFECTION PROCESS DATA									
Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time
1	NA D1								
	FCL D2	1.4	2.100	25.0	7.1				
	CLA D3	3.4	2.100	25.0	7.0				
	D4								
	D5								
2	NA D1								
	FCL D2	1.4	2.100	24.0	7.3				
	CLA D3	3.6	2.100	24.0	7.0				
	D4								
	D5								
3	NA D1								
	FCL D2	1.3	2.100	24.0	7.3				
	CLA D3	3.7	2.100	24.0	7.2				
	D4								
	D5								
4	NA D1								
	FCL D2	1.0	2.400	23.0	7.3				
	CLA D3	2.5	2.400	23.0	7.4				
	D4								
	D5								
5	NA D1								
	FCL D2	1.6	2.400	24.0	7.3				
	CLA D3	3.8	2.400	24.0	7.2				
	D4								
	D5								
6	NA D1								
	FCL D2	1.7	2.400	24.0	7.2				
	CLA D3	2.8	2.400	24.0	7.1				
	D4								
	D5								
7	NA D1								
	FCL D2	3.0	3.000	21.0	7.5				
	CLA D3	3.3	3.000	22.0	7.5				
	D4								
	D5								
8	NA D1								
	FCL D2	1.3	2.100	21.0	7.4				
	CLA D3	3.4	2.100	21.0	7.3				
	D4								
	D5								

PERFORMANCE DATA									
DISINFECTION PROCESS DATA									
Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time
9	NA D1								
	FCL D2	2.0	2.200	22.0	7.1				
	CLA D3	2.9	2.200	22.0	7.0				
	D4								
	D5								
10	NA D1								
	NA D2								
	NA D3					NA	NA	NA	
	D4								
	D5								
11	NA D1								
	FCL D2	2.3	3.200	22.0	7.6				
	CLA D3	2.1	3.200	23.0	7.6				
	D4								
	D5								
12	NA D1								
	FCL D2	3.5	2.400	24.0	7.5				
	CLA D3	3.2	2.400	23.0	7.5				
	D4								
	D5								
13	NA D1								
	NA D2								
	NA D3					NA	NA	NA	
	D4								
	D5								
14	NA D1								
	FCL D2	1.2	3.300	22.0	7.1				
	CLA D3	3.9	3.300	22.0	7.2				
	D4								
	D5								
15	NA D1								
	FCL D2	2.2	3.300	22.0	7.0				
	CLA D3	3.2	3.300	22.0	6.8				
	D4								
	D5								
16	NA D1								
	FCL D2	1.9	2.400	21.0	7.0				
	CLA D3	3.0	2.400	21.0	6.9				
	D4								
	D5								

NOTE: = ONLY use the "Time=" column to show the length of time that the total inactivation ratio was less than 1.00.

SUBMITTED BY: _____ Certificate No. and Grade: W00012234, A Date: November 2, 2010

SURFACE WATER MONTHLY OPERATING REPORT

FOR PUBLIC WATER SYSTEMS THAT ARE USING SURFACE WATER SOURCES
OR GROUND WATER SOURCES UNDER THE INFLUENCE OF SURFACE WATER (cont.)
Disinfection Data Page (cont.)

PUBLIC WATER SYSTEM NAME: City Of Corsicana
PWS ID No.: 1750002

PLANT NAME OR NUMBER: Lake Halbert WTP
Month: October Year: 2010

DISINFECTION PROCESS PARAMETERS							
APPROVED CT STUDY PARAMETERS					PERFORMANCE STANDARDS		
Parameters	Disinfection Zones					Log Inactivations	
	D1	D2	D3	D4	D5	Giardia lamblia Cysts	Virus
Flow Rate (MGD)	4.000	4.000	4.000			0.5	2.0
T ₁₀ (minutes)	78.3	15.1	9.0				

PERFORMANCE DATA									
DISINFECTION PROCESS DATA									
Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time
17	NA D1								
	NA D2								
	NA D3					NA	NA	NA	
	D4								
	D5								
18	NA D1								
	FCL D2	1.0	3.400	22.0	7.2				
	CLA D3	2.3	3.400	22.0	7.2				
	D4								
	D5								
19	NA D1								
	FCL D2	1.6	3.400	22.0	7.2				
	CLA D3	3.3	3.400	23.0	7.2				
	D4								
	D5								
20	NA D1								
	FCL D2	1.3	2.300	23.0	7.3				
	CLA D3	2.2	2.300	23.0	7.2				
	D4								
	D5								
21	NA D1								
	FCL D2	1.5	2.300	23.0	7.3				
	CLA D3	2.4	2.300	23.0	7.2				
	D4								
	D5								
22	NA D1								
	FCL D2	1.1	2.400	23.0	7.2				
	CLA D3	2.0	2.400	23.0	7.2				
	D4								
	D5								
23	NA D1								
	FCL D2	1.4	2.400	21.0	7.1				
	CLA D3	1.5	2.400	22.0	7.4				
	D4								
	D5								
24	NA D1								
	NA D2								
	NA D3					NA	NA	NA	
	D4								
	D5								

PERFORMANCE DATA									
DISINFECTION PROCESS DATA									
Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time
25	NA D1								
	FCL D2	1.7	3.600	22.0	6.8				
	CLA D3	1.8	3.600	22.0	7.2				
	D4								
	D5								
26	NA D1								
	FCL D2	1.6	2.400	22.0	7.2				
	CLA D3	2.1	2.400	22.0	6.7				
	D4								
	D5								
27	NA D1								
	FCL D2	1.0	2.400	22.0	7.0				
	CLA D3	1.4	2.400	22.0	6.7				
	D4								
	D5								
28	NA D1								
	FCL D2	1.4	2.500	22.0	7.1				
	CLA D3	1.1	2.500	22.0	7.0				
	D4								
	D5								
29	NA D1								
	FCL D2	2.0	2.500	20.0	6.9				
	CLA D3	2.3	2.500	21.0	6.9				
	D4								
	D5								
30	NA D1								
	FCL D2	1.1	2.500	19.0	6.8				
	CLA D3	2.4	2.500	20.0	7.1				
	D4								
	D5								
31	NA D1								
	FCL D2	1.4	2.500	19.0	6.9				
	CLA D3	2.9	2.500	19.0	6.8				
	D4								
	D5								

Max	NA	NA
Min	NA	NA
Avg	NA	NA
SD	NA	NA

NOTE: = ONLY use the "Time=" column to show the length of time that the total inactivation ratio was less than 1.00.

SUBMITTED BY: _____ Certificate No. _____ and Grade: WO0012234, A Date: November 2, 2010

MONTHLY TOTAL ORGANIC CARBON REMOVAL REPORT (TOCMOR)

FOR SURFACE WATER OR GROUND WATER UNDER THE INFLUENCE OF SURFACE WATER SYSTEMS

PUBLIC WATER SYSTEM NAME: City Of Corsicana
 PWS ID No.: 1750002
 Type of treatment: Conventional Unconventional explain: _____

PLANT NAME OR NUMBER: Lake Halbert WTP
 Month: October Year: 2010

Note: Systems are required to run one TOC Sample Set every month. Additional space is provided for those systems that do additional sampling

Test No.	Test Date	Monthly TOC Sample Set			Actual % TOC Removed	Step 1 Required Removal %	Step 1 Removal Ratio	Optional data		COMPLIANCE REMOVAL RATIO
		Raw Alkalinity	Raw TOC	Treated TOC				Step 2 Required % Removal	Step 2 Removal Ratio	
		Enter the Sample Set results						calculated	calculated from matrix	
1	10/5	101	5.32	4.56	14.3	35	0.41			0.41
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
Avg		101.00	5.32	4.56	14.29		0.41			0.41
Max		101.00	5.32	4.56	14.29		0.41			0.41
Min		101.00	5.32	4.56	14.29		0.41			0.41

TOTAL ORGANIC CARBON (TOC) REMOVAL SUMMARY

TOC Summary: Don't forget to include a copy of your P.7-TOC ACC worksheet with your report.					Monthly Compliance Ratio
Raw Water Alkalinity	Raw Water TOC	Treated Water TOC	TOC % Removal	ACC # used	
101	5.32	4.56	14.3	5 Mo. Avg	1.00

I certify that I am familiar with the information contained in this report and that, to the best of my knowledge, the information is true, complete, and accurate.

Operator's Signature: _____ Certificate No. and Grade: WO0012234, A

Date: November 2, 2010

Submit the report by the 10th of the month following the reporting period to:
 TEXAS COMMISSION ON ENVIRONMENTAL QUALITY
 WATER SUPPLY DIVISION/PUBLIC DRINKING WATER SECTION (MC-155)
 P.O. BOX 13087, AUSTIN, TEXAS 78711-3087

TOC ALTERNATIVE COMPLIANCE CRITERIA REPORT
 FOR SURFACE WATER OR GROUND WATER UNDER THE INFLUENCE OF SURFACE WATER SYSTEMS

PUBLIC WATER SYSTEM NAME: City Of Corsicana
 PWS ID No.: 1750002

PLANT NAME OR NUMBER: Lake Halbert WTP
 Month: October Year: 2010

This Alternative Compliance Criteria (ACC) Report is being submitted to request the following ACC: **(check one)**
(Before you can begin entering data, you must put an "X" in the box that shows the number of the Alternative Compliance Criteria you are applying for.)

#1 #2 #3 #4 #5 #6 #7 #8

ACC #1	
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ACC #2	
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ACC #3	
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ACC #4	
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ACC #5	<p>Source water SUVA less than or equal to 2.0 L/mg-m? (either based on most recent month's data OR calculated quarterly as a running annual average) (Source water SUVA is the dissolved organic carbon concentration divided by the ultraviolet light absorption at 254 nanometers in the source water before any treatment of any kind. Measure monthly.)</p> <table border="1" style="margin-left: 20px;"> <tr> <td style="text-align: center;">Current Month SUVA</td> </tr> <tr> <td style="text-align: center;">1.79</td> </tr> </table>	Current Month SUVA	1.79
Current Month SUVA			
1.79			

ACC #6	
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ACC #7	
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ACC #8	
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I certify that I am familiar with the information contained in this report and that, to the best of my knowledge, the information is true, complete, and accurate.

Operator's Signature: _____ Certificate No. and Grade: WO0012234, A Date: November 2, 2010

STEP 2 JAR TEST REPORT

FOR SURFACE WATER OR GROUND WATER UNDER THE INFLUENCE OF SURFACE WATER SYSTEMS

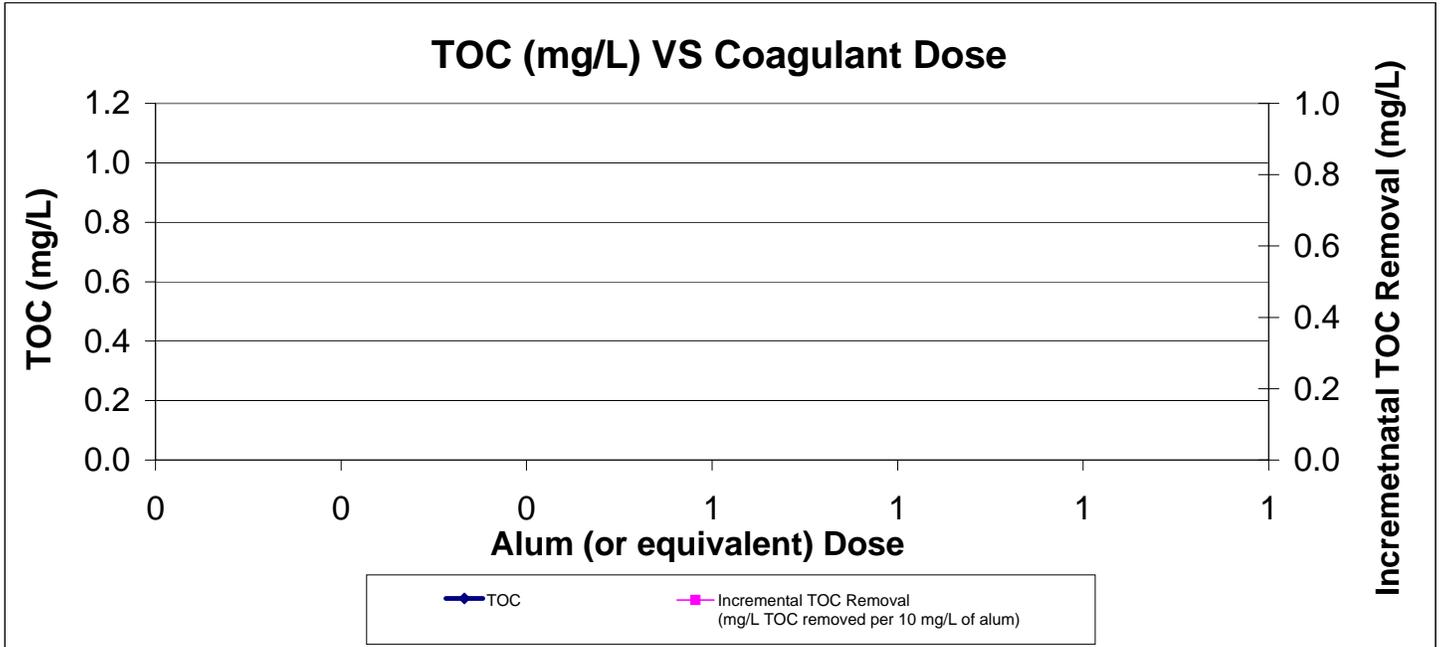
PUBLIC WATER
 SYSTEM NAME: City Of Corsicana
 PWS ID No.: 1750002

PLANT NAME
 OR NUMBER: Lake Halbert WTP
 DATE OF JAR TEST: _____

PLANT CONDITIONS								
RAW WATER SOURCE(s)	COAGULANT		COAGULANT AID		FLOC AID		pH ADJUSTMENT	
	Type	Dose (mg/L)	Type	Dose (mg/L)	Type	Dose (mg/L)	Type	Dose (mg/L)

STEP 2 JAR TEST PARAMETERS									
COAGULANT		BASE		JAR SIZE	JAR TEST CONDITIONS				
Type	Stock Solution Concentration (g/L)	Type	Stock Solution Concentration (g/L)	Volume (liters)	Rapid Mix		Flocculation		Settling
					Speed (rpm)	Duration (minutes)	Speed (rpm)	Duration (minutes)	Duration (minutes)

JAR TEST RESULTS									
Jar No.	COAGULANT		BASE		Alkalinity (mg/L as CaCO ₃)	pH	TOC (mg/L)	Incremental TOC Removal (mg/L TOC removed per 10 mg/L of alum)	Cumulative TOC Removal (%)
	Dose (Alum eq.) (mg/L)	Volume (mL)	Dose (mg/L)	Volume (mL)					
RAW									
1					Target pH (based on raw water alkalinity)				
2									
3									
4									
5									
6									
7									
8									
9									
10									
11									
12									
Has the TCEQ approved this source as "Not Amenable" to Treatment even though Target pH was not reached? If "yes", provide the date of the TCEQ letter or e-mail.					TOC, % Removal at Apparent PODR:				



I certify that I am familiar with the information contained in this report and that, to the best of my knowledge, the information is true, complete, and accurate.

Operator's Signature: _____

Certificate No. _____
 and Grade: WO0012234, A