

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

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
Report for the Month of: December 2005

Operator's Signature: _____
Certificate No. & Grade: W00012234 A Date: January 3, 2006

TREATMENT PLANT PERFORMANCE			
Total number of turbidity readings:	<u>90</u>	Number of 4-hour periods when plant was off-line:	<u>96</u>
Number of readings above 0.10 NTU:	<u>4</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 readings above 0.5 NTU:	<u>0</u>		
Number of readings above 1.0 NTU:	<u>0</u>		
Maximum allowable turbidity level:	<u>0.3</u>	Number of days with readings above 1.0 NTU:	<u>0</u> (2)
Percentage of readings above this limit:	<u>0.0</u> % (1)	Number of days with readings above 5.0 NTU:	<u>0</u> (3)
Statistical Summary	Maximum turbidity reading: <u>0.12</u> NTU	Average turbidity value:	<u>0.08</u> NTU
	Minimum turbidity reading: <u>0.05</u> NTU	Standard deviation:	<u>0.016</u> NTU
Additional report(s) for individual filter monitoring required:	<input checked="" type="radio"/> NONE	<input type="radio"/> Filter Profile	<input type="radio"/> Filter Assessment
Additional report(s) for individual filter monitoring submitted:	<input checked="" type="radio"/> NONE	<input type="radio"/> Filter Profile	<input type="radio"/> Filter Assessment
		<input type="radio"/> CPE	<input type="radio"/> CPE
		Number of days when plant was on-line but individual filter turbidity data was not collected:	<u>0</u>
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>23</u>
		Number of days when CT data was not collected:	<u>23</u>
Minimum disinfectant residual required leaving the plant:	<u>0.5</u> mg/L	<input type="radio"/> Free Chlorine	<input checked="" type="radio"/> Total Chlorine
Number of days with a low residual for no more than 4.0 consecutive hours:	<u>0</u>		
Number of days with a low residual for more than 4.0 consecutive hours:	<u>0</u> (5)	Number of days when disinfectant residual leaving the plant was not properly monitored:	<u>0</u>

DISTRIBUTION SYSTEM			
Minimum disinfectant residual required in distribution system:	<u>0.5</u> mg/L	<input type="radio"/> Free Chlorine	<input checked="" type="radio"/> Total Chlorine
Total number of readings this month:	<u>56</u>		
Average disinfectant residual value:	<u>2.15</u>	Percentage of readings with a low residual this month:	<u>0.0</u> % (6A)
Number of readings with a low residual:	<u>0</u>		
Number of readings with no detectable residual:	<u>0</u>	Percentage of readings with a low residual last month:	<u>0.0</u> % (6B)

PUBLIC NOTIFICATION			
TREATMENT TECHNIQUE VIOLATIONS	YES/NO	If YES, date when notice was given to:	
		COMMISSION	CUSTOMERS*
Were more than 5.0% of the turbidity readings above the acceptable level? - see (1) above	No		
Were there any days with turbidity readings above 1.0 NTU? - see (2) above	No		
Were there any days with turbidity readings above 5.0 NTU? - see (3) above	No		
Were there any periods when the plant failed to meet the CT requirements for more than 4.0 consecutive hours? - see (4) above	No		
Were there any periods when the residuals leaving the plant fell below the acceptable level for more than 4.0 consecutive hours? - see (5) above	No		
Were more than 5.0% of the residuals in the distribution system below the acceptable level for two months in a row? - see (6A) and (6B) above	No		

*Due by the end of the next business day.
* Copies of each Public Notice must accompany this report.

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

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

PWS ID No.: 1750002

Connections: 8,734

Month: December Year: 2005

Population: 24,485

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	1.423	1.298	29	124							X	X	X	0.09	0.09	0.10	2.8	
2	0.808	0.755	15	129							0.11	0.10	0.10	X	X	X	2.7	
3	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
4	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
5	1.632	1.508	18	127							X	X	0.07	0.10	0.10	0.09	2.6	
6	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
7	1.094	1.031	29	127							X	X	X	0.09	0.09	0.09	2.8	
8	0.686	0.606	32	146							X	X	X	X	0.10	0.08	3.0	
9	1.868	1.671	16	131							0.06	X	X	0.07	0.07	0.07	2.6	
10	2.354	2.136	6	125							0.05	0.06	0.07	0.07	0.05	0.08	2.5	
11	2.169	2.032	8	126							0.08	0.05	0.06	0.06	0.05	0.05	2.6	
12	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
13	1.335	1.308	8	129							X	X	X	0.12	0.10	0.06	2.5	
14	1.061	1.016	10	131							0.06	0.06	0.07	X	X	X	2.5	
15	0.739	0.577	26	128							X	X	X	X	0.08	0.07	3.1	
16	0.368	0.348	27	128							X	X	X	X	X	0.08	2.5	
17	1.916	1.791	12	125							0.11	0.07	0.07	0.08	0.08	0.07	2.4	
18	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
19	1.698	1.506	16	130							X	X	0.07	0.08	0.11	0.08	2.6	
20	2.246	2.054	16	132							0.05	0.06	0.07	0.07	0.07	0.08	2.6	
21	0.531	0.494	16	132							0.06	0.06	X	X	X	0.06	2.7	
22	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
23	1.003	0.967	30	156							X	X	X	X	0.09	0.08	3.3	
24	2.116	2.010	17	133							0.06	0.07	0.06	0.06	0.07	0.06	2.5	
25	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
26	0.000	0.000	X	X	X	X					X	X	X	X	X	X	X	
27	1.473	1.247	17	131							X	X	X	0.08	0.08	0.08	2.9	
28	2.241	2.091	16	133							0.07	0.07	0.09	0.09	0.08	0.08	3.3	
29	2.259	2.041	12	136							0.07	0.06	0.08	0.09	0.08	0.09	2.8	
30	2.258	2.043	14	134							0.07	0.06	0.08	0.07	0.06	0.07	3.1	
31	0.826	0.731	20	134							X	X	X	X	0.06	0.06	3.4	
Total	34.104	31.261																
Avg	1.100	1.008																
Max	2.354	2.136																
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: January 3, 2006

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
Month: December Year: 2005

PERFORMANCE DATA																				
INDIVIDUAL FILTER TURBIDITY																				
Date	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																		
1	0.17	0.17	0.11	0.10	0.10	0.09	0.15	0.14												
2	0.16	X	0.14	0.14	0.10	X	0.15	X												
3	X	X	X	X	X	X	X	X												
4	X	X	X	X	X	X	X	X												
5	0.13	0.13	0.13	0.13	0.09	0.09	0.16	0.16												
6	X	X	X	X	X	X	X	X												
7	0.12	0.12	0.13	0.12	0.09	0.09	0.16	0.15												
8	0.11	0.11	0.12	0.12	0.09	0.09	0.15	0.15												
9	0.11	0.10	0.12	0.11	0.12	0.12	0.16	0.15												
10	0.11	X	0.11	X	0.12	X	0.16	X												
11	0.13	0.13	0.11	X	0.11	X	0.15	X												
12	X	X	X	X	X	X	X	X												
13	0.12	0.12	0.14	0.14	0.10	0.10	0.15	0.14												
14	0.11	X	0.14	X	0.10	X	0.15	X												
15	0.11	0.11	0.14	0.14	0.10	0.10	0.15	0.15												
16	0.10	0.10	0.14	0.14	0.10	0.10	0.17	0.17												
17	0.16	0.16	0.14	X	0.10	X	0.17	X												
18	X	X	X	X	X	X	X	X												
19	0.15	0.15	0.12	0.12	0.10	0.10	0.16	0.15												
20	0.14	X	0.12	X	0.14	0.13	0.16	X												
21	0.12	X	0.11	X	0.13	X	0.16	X												
22	X	X	X	X	X	X	X	X												
23	0.11	0.11	0.11	0.11	0.12	0.12	0.15	X												
24	0.12	0.12	0.25	X	0.12	X	0.18	X												
25	X	X	X	X	X	X	X	X												
26	X	X	X	X	X	X	X	X												
27	0.14	0.14	0.17	0.17	0.11	0.11	0.15	0.15												
28	0.13	X	0.14	X	0.11	X	0.15	X												
29	0.11	X	0.12	X	0.13	0.13	0.17	0.17												
30	0.15	0.15	0.12	X	0.13	X	0.19	X												
31	0.12	0.12	0.11	0.10	0.12	0.11	0.16	0.16												

SUMMARY & COMPLIANCE ACTIONS	Filter No.											Plant
	Criteria											
	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 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. W00012234 A and Grade: _____ Date: January 3, 2006

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
Month: December Year: 2005 PWS IC

DISINFECTION PROCESS PARAMETERS										
APPROVED CT STUDY PARAMETERS					PERFORMANCE STANDARDS					
Parameters	Disinfection Zones					Log Inactivations				Parar
	D1	D2	D3	D4	D5	Giardia lamblia Cysts		Viruses		
Flow Rate (MGD)	4.000					0.5		2.0		Flow
T ₁₀ (minutes)	18.0									T ₁₀ (f

PERFORMANCE DATA									
DISINFECTION PROCESS DATA									
Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time
1	FCL D1	4.0	2.600	14.0	7.6				
	D2								
	D3								
	D4								
	D5								
2	FCL D1	3.8	2.600	12.0	7.1				
	D2								
	D3								
	D4								
	D5								
3	NA D1								
	D2								
	D3					NA	NA	NA	
	D4								
	D5								
4	NA D1								
	D2								
	D3					NA	NA	NA	
	D4								
	D5								
5	FCL D1	3.0	2.600	13.0	7.5				
	D2								
	D3								
	D4								
	D5								
6	NA D1								
	D2								
	D3					NA	NA	NA	
	D4								
	D5								
7	FCL D1	3.4	2.600	13.0	7.6				
	D2								
	D3								
	D4								
	D5								
8	FCL D1	3.2	2.300	10.0	7.7				
	D2								
	D3								
	D4								
	D5								

PERFORMANCE DATA										
DISINFECTION PROCESS DATA										
Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time	Date
9	FCL D1	3.9	2.800	11.0	7.2					17
	D2									
	D3									
	D4									
	D5									
10	FCL D1	3.7	2.800	10.0	7.3					18
	D2									
	D3									
	D4									
	D5									
11	FCL D1	4.0	2.500	12.0	7.8					19
	D2									
	D3									
	D4									
	D5									
12	NA D1									20
	D2									
	D3					NA	NA	NA		
	D4									
	D5									
13	FCL D1	4.0	2.500	11.0	7.6					21
	D2									
	D3									
	D4									
	D5									
14	FCL D1	3.8	2.500	11.0	7.4					22
	D2									
	D3									
	D4									
	D5									
15	FCL D1	3.1	3.000	12.0	7.6					23
	D2									
	D3									
	D4									
	D5									
16	FCL D1	3.0	2.500	12.0	7.9					24
	D2									
	D3									
	D4									
	D5									

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

NOTE:

SUBMITTED BY: _____ Certificate No. _____ and Grade: W00012234 A Date: January 3, 2006 SUBMI

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.)

C WATER
 EM NAME: City of Corsicana
 D No.: 1750002

PLANT NAME
 OR NUMBER: Lake Halbert
 Month: December Year: 2005

DISINFECTION PROCESS PARAMETERS									
APPROVED CT STUDY PARAMETERS					PERFORMANCE STANDARDS				
Disinfection Zones					Log Inactivations				
meters	D1	D2	D3	D4	D5	Giardia lamblia Cysts		Virus	
Rate (MGD)	4.000					0.5		2.0	
minutes)	18.0								

PERFORMANCE DATA										
DISINFECTION PROCESS DATA										
Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time		
FCL D1	4.0	2.500	12.0	7.7						
D2										
D3										
D4										
D5										
NA D1										
D2										
D3					NA	NA	NA			
D4										
D5										
FCL D1	3.9	2.500	11.0	7.7						
D2										
D3										
D4										
D5										
FCL D1	3.8	2.500	10.0	7.5						
D2										
D3										
D4										
D5										
FCL D1	3.9	2.500	12.0	7.7						
D2										
D3										
D4										
D5										
NA D1										
D2										
D3					NA	NA	NA			
D4										
D5										
FCL D1	3.9	2.500	11.0	7.5						
D2										
D3										
D4										
D5										
FCL D1	4.0	2.500	13.0	7.9						
D2										
D3										
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									
	D2									
	D3					NA	NA	NA		
	D4									
	D5									
26	NA D1									
	D2									
	D3					NA	NA	NA		
	D4									
	D5									
27	FCL D1	3.8	2.500	13.0	7.8					
	D2									
	D3									
	D4									
	D5									
28	FCL D1	3.2	2.500	13.0	7.8					
	D2									
	D3									
	D4									
	D5									
29	FCL D1	3.7	2.500	12.0	7.4					
	D2									
	D3									
	D4									
	D5									
30	FCL D1	3.7	2.500	12.0	7.8					
	D2									
	D3									
	D4									
	D5									
31	FCL D1	3.6	2.500	12.0	7.5					
	D2									
	D3									
	D4									
	D5									
						Max	NA	NA		
						Min	NA	NA		
						Avg	NA	NA		
						SD	NA	NA		

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

ISSUED BY: _____ Certificate No. _____ and Grade: W00012234 A Date: January 3, 2006