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: August 2014

Certificate No. & Grade: WO0012234, A

Date: September 2, 2014

TREATMENT PLANT PERFORMANCE

Total number of turbidity readings:	177	Number of 4-hour periods when plant was off-line:	9
Number of readings above 0.10 NTU:	14	Number of 4-hour periods when plant was on-line	
Number of readings above 0.3 NTU:	0	but turbidity data was not collected:	0
Number of readings above 0.5 NTU:	0	Number of days when plant was on-line	
Number of readings above 1.0 NTU:	0	but individual filter turbidity data was not collected:	0
Maximum allowable turbidity level:	0.3	Number of days with readings above 1.0 NTU:	0 (2)
Percentage of readings above this limit:	0.0 % (1)	Number of days with readings above 5.0 NTU:	0 (3)

Statistical Summary

Maximum turbidity reading:	0.21 NTU	Average turbidity value:	0.07 NTU
Minimum turbidity reading:	0.04 NTU	Standard deviation:	0.024 NTU
CFE 95th percentile value:	0.11 NTU	IFE 95th percentile:	0.160 NTU

Number of days with a low CT for no more than 4.0 consecutive hours:	0	Average log inactivation for Giardia:	NA
		Average log inactivation for viruses:	NA
Number of days with a low CT for more than 4.0 consecutive hours:	0 (4)	Number of days when profiling data was not collected:	31
		Number of days when CT data was not collected:	0

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:	0		
Number of days with a low residual for more than 4.0 consecutive hours:	0 (5)	Number of days when disinfectant residual leaving the plant was not properly monitored:	0

DISTRIBUTION SYSTEM

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

Total number of readings this month:	61 (at least 31 required) (8)		
Average disinfectant residual value:	1.96	Percentage of readings with a low residual this month:	0.0 % (6A)
Number of readings with a low residual:	0		
Number of readings with no detectable residual:	0	Percentage of readings with a low residual last month:	0.0 % (6B)

ADDITIONAL REPORTS & WORKSHEETS

The Page 1 Addendum (Public Notices) is not required because there were no treatment technique or monitoring/reporting violations reported.

Additional report(s) for individual filter monitoring required:	◉ NONE	○ Filter Profile	○ Filter Assessment	○ CPE
Additional report(s) for individual filter monitoring submitted:	◉ NONE	○ Filter Profile (9)	○ Filter Assessment (10)	○ 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: 10,893

Month: August **Year:** 2014

Population: 23,770

PERFORMANCE DATA

Date	Raw Water Pumpage (MGD)	Treated Water Pumpage (MGD)	RAW WATER ANALYSES		SETTLED WATER TURBIDITY (Optional Data)						FINISHED WATER QUALITY							
					Basin No.						Turbidity						Lowest Residual	Time=
			NTU	Alk.	1	2	3	4	5	6	NTU1	NTU2	NTU3	NTU4	NTU5	NTU6		
1	1.569	1.569	41	107							0.05	0.05	0.05	0.05	0.06	0.05	2.9	
2	1.500	1.431	40	106							0.05	0.05	0.06	0.07	0.08	0.06	2.6	
3	2.440	2.368	38	105							0.06	0.06	0.06	0.08	0.06	0.05	2.9	
4	2.468	2.384	46	105							0.05	0.05	0.04	0.04	0.05	0.05	2.8	
5	2.000	2.094	55	106							0.06	0.05	0.05	0.05	0.05	0.05	2.9	
6	1.744	1.744	44	105							0.05	0.06	0.06	0.07	0.08	0.06	2.7	
7	2.170	2.085	29	104							0.07	0.07	0.05	0.05	0.05	0.05	2.8	
8	3.282	3.101	24	104							0.05	0.08	0.07	0.06	0.06	0.06	2.7	
9	2.360	2.360	33	102							0.08	0.06	0.06	0.06	0.05	0.05	2.8	
10	2.000	1.969	35	103							0.05	0.05	0.05	0.05	0.05	0.05	3.0	
11	1.555	1.555	32	104							0.05	0.05	x	x	0.06	0.06	2.6	
12	2.040	1.989	41	106							0.05	0.05	0.05	0.05	0.06	0.06	2.8	
13	3.090	2.991	34	101							0.06	0.05	0.06	0.07	0.07	0.07	2.9	
14	2.555	2.456	32	100							0.07	0.06	0.06	0.07	0.07	0.07	3.0	
15	2.799	2.698	31	98							0.06	0.06	0.07	0.06	0.09	0.07	2.6	
16	2.960	2.895	30	95							0.07	0.07	0.08	0.06	0.06	0.06	2.9	
17	2.060	1.974	32	97							0.07	0.07	0.07	0.06	0.06	0.06	2.7	
18	1.120	1.040	36	99							x	x	x	0.10	0.11	0.08	2.6	
19	1.950	1.950	36	98							0.07	0.06	0.06	0.06	0.07	0.06	2.9	
20	1.596	1.596	24	99							x	x	0.07	0.07	0.06	0.06	2.6	
21	3.447	3.261	24	101							0.06	0.07	0.07	0.08	0.07	0.08	2.8	
22	3.700	3.662	30	99							0.07	0.08	0.05	0.05	0.05	0.05	2.8	
23	2.341	2.341	27	97							0.06	0.05	0.05	0.05	0.05	0.05	2.9	
24	3.080	2.909	30	97							0.05	0.05	0.05	0.08	0.08	0.08	2.8	
25	2.697	2.595	40	98							0.07	0.06	0.05	0.06	0.06	0.06	2.8	
26	3.700	3.480	38	101							0.06	0.07	0.06	0.07	0.09	0.11	2.8	
27	1.889	1.789	40	99							0.12	0.09	0.09	x	x	0.09	2.8	
28	2.896	2.896	32	95							0.08	0.09	0.11	0.11	0.13	0.07	2.9	
29	2.200	2.108	32	94							0.07	0.07	0.08	0.09	0.08	0.08	2.8	
30	1.500	1.497	36	96							0.08	0.08	0.11	0.12	0.14	0.17	2.7	
31	2.920	2.838	34	95							0.21	0.16	0.14	0.13	0.10	0.09	3.0	
Total	73.628	71.625																
Avg	2.375	2.310																
Max	3.700	3.662																
Min	1.120	1.040																

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:** WO0012234, A **Date:** September 2, 2014

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
PLANT NAME OR NUMBER: Lake Halbert WTP
PWS ID No.: 1750002
Month: August **Year:** 2014

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	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	0.07	x	x	x	0.07	x	0.04	x												
2	0.06	x	0.07	0.06	0.06	x	0.08	0.08												
3	0.08	0.08	0.06	x	0.08	0.08	0.07	x												
4	0.07	x	0.09	0.09	0.06	x	0.06	x												
5	0.05	x	0.09	x	0.06	x	0.05	x												
6	0.05	x	0.05	0.05	0.06	x	0.04	x												
7	0.08	0.08	0.09	x	0.06	x	0.04	x												
8	0.11	x	0.08	x	0.12	0.12	0.07	x												
9	0.07	x	0.11	0.11	0.11	x	0.07	x												
10	0.09	0.09	0.08	x	0.07	x	0.04	x												
11	0.08	0.08	0.06	0.06	0.06	0.05	0.05	0.05												
12	0.07	x	0.08	x	0.12	0.11	0.04	x												
13	0.07	x	0.15	0.15	0.10	x	0.05	x												
14	0.12	0.12	0.10	x	0.08	x	0.05	x												
15	0.10	x	0.07	x	0.06	x	0.09	0.09												
16	0.08	x	0.07	x	0.16	0.15	0.09	x												
17	0.09	x	0.17	0.17	0.11	x	0.08	x												
18	x	x	0.16	0.16	0.15	0.15	0.06	0.06												
19	0.12	0.12	0.09	x	0.08	x	0.07	x												
20	0.10	0.10	0.08	0.08	0.08	0.08	0.07	0.07												
21	0.13	x	0.19	0.19	0.22	0.21	0.08	x												
22	0.15	0.15	0.17	x	0.13	x	0.07	x												
23	0.14	x	0.09	x	0.07	x	0.06	x												
24	0.09	x	0.17	0.17	0.18	0.18	0.05	x												
25	0.13	0.10	0.14	x	0.15	x	0.05	x												
26	0.11	x	0.10	0.10	0.11	0.11	0.07	0.07												
27	0.06	x	0.10	0.10	0.12	0.12	0.07	0.07												
28	0.14	0.14	0.10	x	0.11	x	0.08	x												
29	0.09	x	0.13	0.13	0.06	x	0.06	x												
30	0.06	x	0.11	x	x	x	0.05	x												
31	0.14	0.14	0.11	x	0.15	0.15	0.06	x												

SUMMARY & COMPLIANCE ACTIONS

Criteria	Filter No. 1	2	3	4	5	6	7	8	9	10	Plant
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:** September 2, 2014

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

PLANT NAME OR NUMBER: Lake Halbert WTP

PWS ID No.: 1750002

Month: August **Year:** 2014

DISINFECTION PROCESS PARAMETERS

APPROVED CT STUDY PARAMETERS						PERFORMANCE STANDARDS	
	Disinfection Zones					Log Inactivations	
Parameters	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

Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time=
1	FCL *D1*								
	FCL *D2*	0.9	1.500	28.0	6.8				
	CLA *D3*	3.0	1.500	28.0	7.4	4.19*	94.14*	8.38	
	D4							(G)	
	D5								
2	FCL *D1*								
	FCL *D2*	0.8	1.500	27.0	6.8				
	CLA *D3*	3.1	1.500	28.0	7.5	3.56*	78.25*	7.13	
	D4							(G)	
	D5								
3	FCL *D1*								
	FCL *D2*	0.8	3.000	28.0	6.7				
	CLA *D3*	3.0	3.000	29.0	7.5	1.96*	41.92*	3.92	
	D4							(G)	
	D5								
4	FCL *D1*								
	FCL *D2*	0.8	2.800	28.0	6.7				
	CLA *D3*	3.0	2.800	28.0	7.5	2.10*	44.88*	4.20	
	D4							(G)	
	D5								
5	FCL *D1*								
	FCL *D2*	0.8	2.000	27.0	6.7				
	CLA *D3*	3.0	2.000	28.0	7.7	2.76*	58.67*	5.51	
	D4							(G)	
	D5								
6	FCL *D1*								
	FCL *D2*	0.8	2.000	27.0	6.8				
	CLA *D3*	3.0	2.000	27.0	7.4	2.67*	58.62*	5.33	
	D4							(G)	
	D5								
7	FCL *D1*								
	FCL *D2*	0.8	2.000	28.0	6.8				
	CLA *D3*	2.9	2.000	28.0	7.4	2.84*	62.81*	5.67	
	D4							(G)	
	D5								
8	FCL *D1*								
	FCL *D2*	0.9	3.600	28.0	6.8				
	CLA *D3*	3.0	3.600	28.0	7.6	1.74*	39.23*	3.49	
	D4							(G)	
	D5								

PERFORMANCE DATA

Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time=
9	FCL *D1*								
	FCL *D2*	0.9	3.200	29.0	6.8				
	CLA *D3*	2.9	3.200	29.0	7.6	2.09*	47.28*	4.18	
	D4							(G)	
	D5								
10	FCL *D1*								
	FCL *D2*	0.8	2.000	29.0	6.7				
	CLA *D3*	3.1	2.000	29.0	7.6	3.14*	67.36*	6.28	
	D4							(G)	
	D5								
11	FCL *D1*								
	FCL *D2*	0.5	2.000	29.0	6.7				
	CLA *D3*	2.6	2.000	29.0	7.3	2.07*	42.25*	4.14	
	D4							(G)	
	D5								
12	FCL *D1*								
	FCL *D2*	0.9	2.000	30.0	6.8				
	CLA *D3*	3.0	2.000	30.0	7.3	3.58*	81.11*	7.15	
	D4							(G)	
	D5								
13	FCL *D1*								
	FCL *D2*	0.9	3.000	29.0	6.7				
	CLA *D3*	2.9	3.000	29.0	7.4	2.31*	50.44*	4.61	
	D4							(G)	
	D5								
14	FCL *D1*								
	FCL *D2*	0.9	3.000	28.0	6.7				
	CLA *D3*	3.0	3.000	29.0	7.3	2.17*	47.10*	4.33	
	D4							(G)	
	D5								
15	FCL *D1*								
	FCL *D2*	1.1	3.000	29.0	6.7				
	CLA *D3*	3.0	3.000	29.0	7.4	2.74*	61.56*	5.48	
	D4							(G)	
	D5								
16	FCL *D1*								
	FCL *D2*	0.9	3.000	28.0	6.8				
	CLA *D3*	2.9	3.000	29.0	7.6	2.09*	47.09*	4.18	
	D4							(G)	
	D5								

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

*** Not representative of total log inactivation(s) and/or total inactivation ratio for all disinfection zones; Excluded from statistical summary calculations.**

SUBMITTED BY: _____ **Certificate No. and Grade:** WO0012234, A **Date:** September 2, 2014

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 **PLANT NAME OR NUMBER:** Lake Halbert WTP

PWS ID No.: 1750002 **Month:** August **Year:** 2014

DISINFECTION PROCESS PARAMETERS

APPROVED CT STUDY PARAMETERS						PERFORMANCE STANDARDS	
	Disinfection Zones					Log Inactivations	
Parameters	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

Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time=
17	FCL *D1*								
	FCL *D2*	0.8	2.100	30.0	6.7				
	CLA *D3*	3.2	2.100	30.0	7.8	3.20*	68.78*	6.40	
	D4							(G)	
	D5								
18	FCL *D1*								
	FCL *D2*	0.5	1.500	29.0	6.7				
	CLA *D3*	2.6	1.500	29.0	7.6	2.76*	56.33*	5.52	
	D4							(G)	
	D5								
19	FCL *D1*								
	FCL *D2*	0.9	2.200	28.0	6.7				
	CLA *D3*	2.9	2.200	28.0	7.3	2.95*	64.17*	5.89	
	D4							(G)	
	D5								
20	FCL *D1*								
	FCL *D2*	0.9	2.200	28.0	6.8				
	CLA *D3*	2.6	2.200	28.0	7.6	2.83*	64.11*	5.66	
	D4							(G)	
	D5								
21	FCL *D1*								
	FCL *D2*	0.9	3.700	29.0	6.7				
	CLA *D3*	3.0	3.700	29.0	7.5	1.87*	40.91*	3.75	
	D4							(G)	
	D5								
22	FCL *D1*								
	FCL *D2*	0.9	3.700	28.0	6.8				
	CLA *D3*	3.0	3.700	29.0	7.4	1.70*	38.19*	3.40	
	D4							(G)	
	D5								
23	FCL *D1*								
	FCL *D2*	0.9	2.200	29.0	6.8				
	CLA *D3*	3.0	2.200	29.0	7.4	3.05*	68.80*	6.09	
	D4							(G)	
	D5								
24	FCL *D1*								
	FCL *D2*	0.8	3.600	29.0	6.7				
	CLA *D3*	3.0	3.600	30.0	7.6	1.74*	37.44*	3.48	
	D4							(G)	
	D5								

PERFORMANCE DATA

Date	Disinfectant	C (mg/L)	Flow (MGD)	Temp (°C)	pH	Giardia Log	Virus Log	Inact. Ratio	Time=
25	FCL *D1*								
	FCL *D2*	0.6	3.700	29.0	6.7				
	CLA *D3*	2.9	3.700	30.0	7.6	1.32*	27.40*	2.64	
	D4							(G)	
	D5								
26	FCL *D1*								
	FCL *D2*	0.7	3.700	29.0	6.7				
	CLA *D3*	2.9	3.700	29.0	7.3	1.51*	31.88*	3.01	
	D4							(G)	
	D5								
27	FCL *D1*								
	FCL *D2*	0.8	3.700	29.0	6.6				
	CLA *D3*	2.8	3.700	29.0	7.4	1.74*	36.38*	3.49	
	D4							(G)	
	D5								
28	FCL *D1*								
	FCL *D2*	0.8	3.700	29.0	6.6				
	CLA *D3*	3.2	3.700	29.0	7.5	1.76*	36.42*	3.52	
	D4							(G)	
	D5								
29	FCL *D1*								
	FCL *D2*	0.9	2.200	29.0	6.7				
	CLA *D3*	3.0	2.200	29.0	7.5	3.15*	68.80*	6.30	
	D4							(G)	
	D5								
30	FCL *D1*								
	FCL *D2*	0.8	1.500	29.0	6.7				
	CLA *D3*	2.9	1.500	29.0	7.5	4.17*	89.76*	8.34	
	D4							(G)	
	D5								
31	FCL *D1*								
	FCL *D2*	0.8	3.000	29.0	6.7				
	CLA *D3*	3.0	3.000	29.0	7.4	2.09*	44.89*	4.18	
	D4							(G)	
	D5								
					Max	NA	NA		
					Min	NA	NA		
					Avg	NA	NA		
					SD	NA	NA		

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

*** Not representative of total log inactivation(s) and/or total inactivation ratio for all disinfection zones; Excluded from statistical summary calculations.**

SUBMITTED BY: **Certificate No. and Grade:** WO0012234, A **Date:** September 2, 2014

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

PLANT NAME OR NUMBER: Lake Halbert WTP

PWS ID No.: 1750002

Month: August **Year:** 2014

Type of treatment: X Conventional ____ Unconventional explain: ____

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*	*calculated*			*calculated*
1	8/4	108	6.68	4.66	30.2	35	0.86			0.86
2										
3										
4										
5										
6										
7										
8										
9										
10										
11										
12										
13										
14										
15										
16										
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21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
Avg		108.00	6.68	4.66	30.24		0.86			0.86
Max		108.00	6.68	4.66	30.24		0.86			0.86
Min		108.00	6.68	4.66	30.24		0.86			0.86

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	
108	6.68	4.66	30.2	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: September 2, 2014

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: August Year: 2014

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
				X			

ACC #1

ACC # 2

ACC # 3

ACC # 4

ACC # 5

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.

Current Month SUVA
1.84

ACC # 6

ACC #7

ACC # 8

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: September 2, 2014

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
PLANT NAME OR NUMBER: Lake Halbert WTP
PWS ID No.: 1750002
DATE OF JAR TEST:

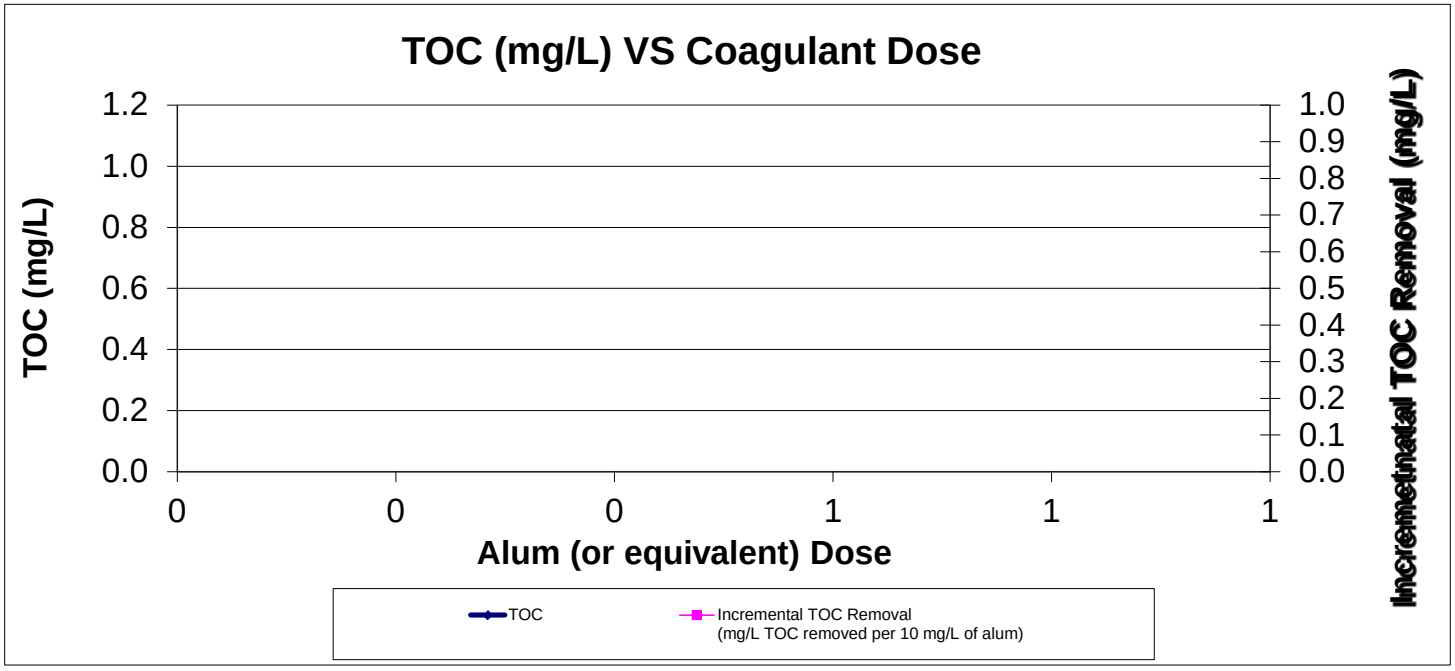
PLANT CONDITIONS								
RAW WATER SOURCE(s)	COAGULANT		COAGULANT AID		FLOC AID		pH ADJUSTMENT	
	Type	Dose (mg/L)	Type	Dose (mg/L)	Type	Dose (mg/L)	Type	Dose (mg/L)

STEP 2 JAR TEST PARAMETERS									
COAGULANT		BASE		JAR SIZE	JAR TEST CONDITIONS				
					Rapid Mix		Flocculation		Settling
Type	Stock Solution Concentration (g/L)	Type	Stock Solution Concentration (g/L)	Volume (liters)	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									
2									
3									
4					Target pH (based on raw water alkalinity)				
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