



**MONTHLY REPORT OF OPERATION  
WATER TREATMENT PLANT**

State Form 34609 (R11 / 1-17)

System Name Middlebury Water Works

For the Month of April Year 2025

INDIANA DEPARTMENT OF  
ENVIRONMENTAL MANAGEMENT

PWSID Number 5220014

Megan Wright

Title Water Superintendent

IDEM Field Rep.

Signed Steve Cripe  
Certification Number 967510

I certify *under penalty of law*, by this signature that this document was prepared by me, or under my direction, and the information submitted is to the best of my knowledge and belief, true, accurate, and complete. I am also aware that there are significant penalties for submitting false information.

PHYSICAL AND CHEMICAL DATA\*

Date	Turbidity		Alkalinity		pH		Hardness		Iron		Manganese		Phosphate	Fluoride
	Raw	Finished	Raw	Finished	Raw	Finished	Raw	Finished	Raw	Finished	Raw	Finished	Finished	Finished
1					7.32	7.71	240	226	0.91	0.01			1.13	0.30
2					7.39	7.73	221	228	0.71	0.00			1.41	0.48
3					7.38	7.74	236	227	0.99	0.01			1.59	0.30
4					7.38	7.63	226	224	1.32	0.00			1.41	0.62
5					x	x	x	x	x	x			x	x
6					x	x	x	x	x	x			x	x
7					7.42	7.69	228	183	0.50	0.01			1.44	0.65
8					7.50	7.76	201	232	0.85	0.01			1.15	0.28
9					7.44	7.70	218	217	0.36	0.03			1.20	0.98
10					7.46	7.69	218	217	0.91	0.00			1.40	0.43
11					7.37	7.71	216	202	0.96	0.01			1.58	0.28
12					x	x	x	x	x	x			x	x
13					x	x	x	x	x	x			x	x
14					7.31	7.66	224	223	1.05	0.00			1.30	0.21
15					7.28	7.60	225	221	0.88	0.03			1.98	0.51
16					7.38	7.74	237	231	0.97	0.06			1.29	0.80
17					7.25	7.61	222	230	1.04	0.00			1.50	0.54
18					x	x	x	x	x	x			x	x
19					x	x	x	x	x	x			x	x
20					x	x	x	x	x	x			x	x
21					7.42	7.72	272	240	0.12	0.00			1.09	0.35
22					7.42	7.70	196	222	0.13	0.00			1.39	0.42
23					7.40	7.68	214	241	0.75	0.00			1.30	0.61
24					7.45	7.67	223	224	0.03	0.02			1.16	0.31
25					7.46	7.69	217	230	0.08	0.02			1.14	0.63
26					x	x	x	x	x	x			x	x
27					x	x	x	x	x	x			x	x
28					7.21	7.59	247	239	1.08	0.02			1.20	0.36
29					7.38	7.69	241	218	1.09	0.00			1.24	0.34
30					7.44	7.67	226	246	0.07	0.00			1.45	0.58
31					x	x	x	x	x	x			x	x

\* all Parameters are to be Expressed in mg/l Except pH and turbidity.

**DUE BY THE 10TH OF THE MONTH FOLLOWING THE REPORTING PERIOD.**

