



MONTHLY REPORT OF OPERATION WATER TREATMENT PLANT

State Form 34609 (R11 / 1-17)

INDIANA DEPARTMENT OF
ENVIRONMENTAL MANAGEMENT

System Name Hillsboro Water Utility PWSID Number IN 5223003

For the Month of June Year 2024 IDEM Field Rep. Joe Stupinski

Signed Thomas D. Fisher Title Licensed Operator

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.

Certification Number DSS-18547
WTS-17994

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														
2														
3														
4														
5														
6														
7														
8														
9														
10														
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29														
30														
31														

* All parameters are to be expressed in mg/l except pH and turbidity.

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

Date	1000 gallons	Chemicals Used - Pounds									Chlorine Residual				Remarks		
		Salt	Alum	Lime	Soda Ash	Carbon	Chlorine Well #2	Chlorine Well #3	Phosphate	Filter Run (hours)	Plant Tap 2		Plant Tap 3			D. S.	
											Free	Total	Free	Total		Free	Total
1	25										1.0	1.1	.4	.5	.3	.4	
2	45										1.1	1.3	.2	.3	.3	.4	
3	36										.9	.9	.3	.4	.3	.4	
4	18										1.4	1.6	.4	.5	.4	.5	
5	38										1.2	1.4	.3	.3	.3	.4	
6	23										1.3	1.5	.6	.8	.4	.5	
7	41										1.2	1.3	.5	.6	.3	.4	
8	36										1.3	1.4	.6	.7	.4	.4	
9	38										.8	1.0	.6	.8	.4	.5	
10	18										1.0	1.1	.8	1.0	.4	.5	
11	23										.8	.9	.9	.9	.3	.4	
12	42										.9	.9	.9	1.0	.3	.4	
13	18										.5	.5	1.2	1.4	.3	.4	
14	36										.7	.8	1.0	1.2	.4	.4	
15	43										1.2	1.4	.6	.7	.3	.4	
16	25										.9	1.1	.6	.8	.3	.4	
17	43										1.2	1.4	.5	.6	.3	.4	
18	36										1.4	1.6	.4	.5	.3	.4	
19	36										1.3	1.5	.5	.6	.4	.4	
20	41										.9	1.1	.4	.5	.3	.4	
21	38										1.4	1.5	.7	.8	.4	.5	Monthly Water Treatment
22	36										.5	.6	.8	.9	.3	.4	Total Gallons
23	36										.8	.9	.8	1.0	.3	.4	Max. Day
24	18										1.0	1.2	.7	.8	.3	.4	Min. Day
25	37										1.1	1.4	.6	.7	.4	.4	Avg. Daily
26	23										1.5	1.7	.6	.6	.3	.4	E-Mail To:
27	39										1.3	1.5	.5	.6	.3	.4	DWBMRO@idem.in.gov
28	18										1.4	1.5	.7	.8	.4	.4	Mail To:
29	38										.9	1.1	1.1	1.4	.3	.4	Indiana Department of
30	42										1.0	1.2	.6	.7	.3	.4	Environmental Management
31																	Drinking Water Branch
																	100 N. Senate Ave. Room N1201
																	Indianapolis, IN 46204-2237