

MONTHLY REPORT OF OPERATION **WATER TREATMENT PLANT**

State Form 34609 (R11 / 1-17)

INDIANA DEPARTMENT OF ENVIRONMENTAL MANAGEMENT

System Name Finch Newton Water, Inc.	PWSID Number 5274003
For the Month of June Year 2024	IDEM Field Rep. <u>Anna Readle</u>
()	Title Superintendent
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 bast of my knowledge and belief, true, accurate, and complete. I am also aware that there are significant penalties for submitting false information.	Certification NumberDS 90527/

PHYSICAL AND CHEMICAL DATA *

Date	Tur	bidity	Alk	alinity		pН	Har	dness		iron	Man	ganese	Phosphate	Fluoride	T
	Raw	Finished	Raw	Finished	Raw	Finished	Raw	Finished	Raw	Finished	Raw	Finished	Finished	Finished	
1			,												
2															
3						_									
4															
5															
6															
7															
8															
9															
10													,		
11										·					*******
12															
13											·				
14															
15															
16															
17															
18	ĺ														
19			ĺ												
20															
21								-							
22															
23															
24															
25					Ì										
26															
27															
28															
29		***************************************	***************************************	· · · · · · · · · · · · · · · · · · ·											
30															
31															

Date	Treated	-		Ų.	a leiTilCa	ais USEC	- Pounds			Fi	Chlorine Residual				Remarks		
	1000 gallons	Salt	Alum	Lime	Soda Ash	Carbon	Chlorine	Fluoride	Phos- phate	Filter Run (hours)	Gallons per wash x 1000		t Tap	·	. S.	D 1	1 0
1	41,000	-										Free	Total	Free	 	Purchas	ed trom
2	36,000					<u> </u>									220+	Patok	Ĺ
3	39,000													ļ	2.20+		
4	36,000											<u> </u>			2.20+		
5	00	 													2.20+		
6	00												·		2.20+		
7	47,000														2.20+		
8	41,000											 			2.20+		
9	37,000													-	2.20		
10	39.000														220		
11	43,000														2.20+		
12	40,000									-					220+		
13	37.000														2.20		
14	40,000														2.20+		
15	39.000			*											2.20+		
16	40,000														220+		
17	37,000																
18	35,000														2.20+		
19	39,000														2.20		
20	40,000														2701		
21	36,000														2.20-	Monthly Wate	r Treatment
22	35,000														·	Total Gallons	1073,00
23	37.00D															Max. Day	47,000
24	40,000												-			Min. Day	00
25	38,000															Avg. Daily	36,000
26	37.000									7						E-Mail To:	ے ہی اور ا
27	36,000														2.20	DWBMRO@idem.i	n.gov
28	38,000														1 20-	Mail To:	
29	33,00D															Indiana Departme Environmental Ma	nt of
30	37,000														2.20	Drinking Water Bra 100 N. Senate Ave	nch
31	e Form 34609 (R11 /															100 N. Senate Ave Indianapolis, IN 46	. Room N1201 204-2237