

OHA - Drinking Water Program - Surface Water Quality Data Form								WTP: WTP-A	
System Name: Yamhill, City of		ID#: OR4100968		Month/Year: Mar-26		Disinfection Giardia Log Inactiv:		0.500	
Date / Time	Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow	
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]	
1/20:00	0.5	80.00	43.2	9.1	7.8	25.6	YES	392	
2/17:00	0.5	80.00	43.2	9.1	7.8	25.5	YES	386	
3/14:00	0.5	80.00	41.6	9.5	7.8	24.9	YES	397	
4/13:00	0.5	80.00	42.4	10.1	7.8	24.0	YES	402	
5/23:00	0.6	80.00	44.0	9.4	7.8	25.6	YES	405	
6/11:00	0.5	80.00	40.0	9.5	7.8	25.3	YES	400	
7/15:00	0.6	80.00	44.8	9.6	7.8	25.0	YES	402	
8/19:00	0.5	80.00	43.2	9.9	7.8	24.5	YES	396	
9/15:00	0.5	80.00	41.6	9.2	7.8	26.1	YES	399	
10/12:00	0.5	80.00	42.4	8.4	7.9	27.5	YES	395	
11/17:00	0.5	80.00	38.4	7.8	7.8	28.2	YES	406	
12/11:00	0.5	80.00	41.6	8.1	7.8	28.0	YES	398	
13/12:00	0.5	80.00	40.8	9.4	7.7	24.0	YES	394	
14/11:00	0.5	80.00	41.6	9.9	7.8	24.2	YES	405	
15/17:00	0.5	80.00	41.6	9.2	7.7	25.0	YES	391	
16/12:00	0.6	80.00	44.0	9.3	7.8	25.5	YES	392	
17/12:00	0.5	80.00	42.4	9.5	7.8	24.8	YES	395	
18/8:00	0.6	80.00	44.8	10.3	7.8	23.7	YES	389	
19/13:00	0.5	80.00	41.6	10.7	7.9	23.7	YES	397	
20/18:00	0.5	80.00	42.4	10.6	7.8	23.6	YES	394	
21/22:00	0.5	80.00	38.4	10.6	7.8	23.4	YES	384	
22/7:00	0.5	80.00	39.2	10.2	7.8	24.1	YES	404	
23/18:00	0.5	80.00	43.2	9.4	7.9	25.8	YES	401	
24/9:00	0.5	80.00	40.8	9.3	7.8	25.6	YES	406	
25/11:00	0.5	80.00	40.8	9.5	7.8	24.9	YES	393	
26/12:00	0.6	80.00	44.0	8.9	7.8	26.1	YES	396	
27/13:00	0.5	80.00	41.6	8.8	7.8	26.2	YES	402	
28/15:00	0.5	80.00	42.4	9.6	7.8	24.6	YES	398	
29/17:00	0.5	80.00	41.6	10.0	7.8	24.0	YES	391	
30/16:00	0.6	80.00	44.8	9.3	7.8	25.5	YES	395	
31/12:00	0.6	80.00	44.0	8.8	7.8	26.3	YES	390	

³ If Cl2 at entry point < 0.2 mg/l or CT not met, DWS to be notified by end of next business day. Revised October 2013

Oregon Health Authority Drinking Water Section

Turbidity Monitoring Report Form

Day	12AM (NTU)	4AM (NTU)	8AM (NTU)	NOON (NTU)	4PM (NTU)	8PM (NTU)	Highest (NTU)	Peak Hourly Flow (GPM)
1	OFF	OFF	0.022	0.024	OFF	0.027	0.027	392
2	OFF	0.025	OFF	0.023	0.026	OFF	0.026	386
3	OFF	OFF	0.025	0.025	OFF	OFF	0.025	397
4	OFF	OFF	0.024	0.026	0.023	OFF	0.026	402
5	0.023	OFF	OFF	0.023	OFF	0.025	0.025	405
6	OFF	0.027	OFF	0.022	0.022	OFF	0.027	400
7	OFF	OFF	0.023	0.023	OFF	OFF	0.023	402
8	0.023	OFF	OFF	0.024	OFF	0.024	0.024	396
9	OFF	OFF	0.023	0.026	OFF	OFF	0.026	399
10	0.023	OFF	OFF	0.025	0.024	OFF	0.025	395
11	OFF	0.023	0.028	OFF	0.025	OFF	0.028	406
12	0.026	OFF	OFF	0.032	OFF	0.030	0.032	398
13	OFF	0.027	OFF	0.035	0.032	OFF	0.035	394
14	OFF	0.033	0.041	0.026	OFF	OFF	0.041	405
15	0.030	OFF	0.032	OFF	0.029	OFF	0.032	391
16	OFF	0.027	OFF	0.028	0.023	OFF	0.028	392
17	0.023	OFF	OFF	0.026	0.027	OFF	0.027	395
18	0.023	OFF	0.020	OFF	0.025	OFF	0.025	389
19	0.024	OFF	0.024	0.022	0.024	OFF	0.024	397
20	OFF	0.025	0.023	0.023	OFF	0.026	0.026	394
21	OFF	OFF	0.024	OFF	0.023	OFF	0.024	384
22	OFF	OFF	0.023	0.023	OFF	OFF	0.023	404
23	0.023	OFF	0.025	OFF	0.024	OFF	0.025	401
24	OFF	0.024	0.023	OFF	0.024	OFF	0.024	406
25	0.025	OFF	0.025	0.025	0.025	OFF	0.025	393
26	0.024	OFF	0.023	0.024	0.025	OFF	0.025	396
27	0.025	OFF	OFF	0.027	0.026	OFF	0.027	402
28	OFF	0.025	OFF	0.026	OFF	0.024	0.026	398
29	0.026	OFF	0.025	OFF	0.025	OFF	0.026	391
30	OFF	OFF	0.022	0.023	0.024	OFF	0.024	395
31	0.024	OFF	OFF	0.024	0.024	OFF	0.024	390

You are using a Slow Sand or Cartridge Filter Monthly Summary

95% of Turbidity readings < 5 NTU No
 All Turbidity readings < 5 NTU Yes

CT's met every day? No
 (see box) Yes

Cl residual in distribution system always ≥ 2.0 mg/L? No
 Yes

Cl Residual measured in 95% of distribution system? No
 Yes

MCL is 0.5 for conventional and direct filtration and 1.0 for slow sand and diatomaceous earth filters

Dannel Lockard

Date: 4/9/2026

Day	pH	Alk	Phos	Sili	Y/N
1					
2					
3	7.80	58			Y
4					

<< Have minimums been met for this day?

System Name: City of Yamhill
Entry Point: EP-A

ENTRY POINT

PWS ID: 41 0 0 9 6 8



5	7.83	56			Y
6					
7					
8					
9	7.84	58			Y
10					
11					
12	7.82	57			Y
13					
14					
15					
16					
17	7.76	57			Y
18					
19	7.88	58			Y
20					
21					
22					
23					
24	7.80	56			Y
25					
26					
27	7.82	58			Y
28					
29					
30					
31	7.80	57			Y

(NO=N=Excursions) Total N's **0**

Sample Period: _____
Month / Year Mar-26

Number of excursions* during this month: **0**

(Count the number of days when any WQP was less than the minimum required)

Total excursions during the previous 5 months: **0**

(Over 9 excursions in 6 months is a violation. Entry Point and Distribution excursions are cumulative)

For DHS use only

**Minimum Water Quality
Parameters as set by State:**

pH	7.2	
Alk	55	(Alkalinity)
PO4		(Orthophosphate)
Sill		(Silicate)

Print Name: _____ Darrel Lockard

Signature: *Darrel Lockard*

Date: _____ 4/9/2026

Send to DHS within 10 days after end of sampling period
DHS-Drinking Water Program, PO Box 14350, Portland, Or 97293-0350 Phone (503) 731-4381