

OHA - Drinking Water Services -Turbidity Monitoring Report Form

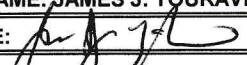
County: COOS

Conventional or Direct Filtration

Month/Year: Jul-22

System Name:	Bandon, City of	ID#: 4100074	WTP : TP -				
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1	OFF	0.06	0.06	0.07	0.05	0.07	0.07
2	OFF	0.07	0.07	0.07	0.05	0.04	0.07
3	OFF	0.05	0.05	0.05	0.04	OFF	0.05
4	OFF	0.08	0.07	0.05	0.05	OFF	0.08
5	0.05	0.08	0.08	0.04	0.08	0.04	0.08
6	0.04	OFF	0.05	0.06	0.04	OFF	0.06
7	OFF	0.06	0.06	0.04	0.04	OFF	0.06
8	0.71	0.05	0.05	0.06	0.07	0.04	0.07
9	OFF	0.07	0.08	0.05	0.04	0.06	0.08
10	0.04	0.06	0.07	0.05	0.10	OFF	0.10
11	0.06	0.04	0.04	0.04	0.04	OFF	0.06
12	0.15	0.07	0.08	0.04	0.06	0.04	0.15
13	0.04	0.05	0.06	0.07	0.17	OFF	0.17
14	0.06	0.07	0.06	0.05	0.06	0.05	0.07
15	OFF	0.07	0.05	0.08	0.12	0.12	0.12
16	OFF	0.07	0.07	0.27	0.07	0.12	0.27
17	0.04	0.05	0.07	0.05	0.07	0.04	0.07
18	0.05	0.08	0.05	0.05	0.04	OFF	0.08
19	0.05	0.07	0.14	0.05	0.05	OFF	0.14
20	0.15	0.09	0.06	0.06	0.05	0.04	0.15
21	OFF	0.07	0.07	0.05	0.06	0.05	0.07
22	OFF	0.07	0.13	0.08	0.09	0.03	0.13
23	OFF	0.05	0.05	0.05	0.06	OFF	0.06
24	OFF	0.05	0.06	0.11	0.04	OFF	0.11
25	0.05	0.05	0.08	0.05	0.10	0.05	0.10
26	OFF	0.06	0.06	0.04	0.06	0.04	0.06
27	OFF	0.05	0.06	0.11	0.05	0.04	0.11
28	OFF	0.13	0.05	0.05	0.05	0.04	0.13
29	OFF	0.06	0.05	0.10	0.05	OFF	0.10
30	0.05	0.06	0.09	0.05	0.08	0.05	0.09
31	OFF	0.07	0.06	0.05	0.05	0.05	0.07

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings $\leq$ 0.3 NTU? ☒ Yes ☐ No	CT's met everyday? (see back) ☒ Yes ☐ No	All Cl2 residual at entry point $\geq$ 0.2 mg/l? ☒ Yes ☐ No
All 4-hour turbidity readings $\leq$ 1 NTU? ☒ Yes ☐ No		
All turbidity readings < IFE ² triggers ☒ Yes ☐ No		

Notes:	PRINTED NAME: JAMES J. YOURAVISH	
	SIGNATURE: 	DATE: 8-4-22
	PHONE #: (541)-347-3007	CERT #: T-09155

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: Bandon, City of				ID#: 4100074	Month/Year: Jul-22	WTP - : Disinfection <i>Giardia</i> Log Inactiv: 0.5	
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.89	424	377.4	16.2	8.05	18.3	YES	879
2	0.91	424	385.8	16.2	7.96	17.8	YES	707
3	0.91	424	385.8	15.6	8.01	18.8	YES	787
4	0.9	424	381.6	16.1	7.77	16.6	YES	747
5	0.91	424	385.8	15.8	7.79	17.1	YES	1264
6	0.93	424	394.3	15.7	7.96	18.4	YES	771
7	0.92	424	390.1	15.4	7.96	18.7	YES	969
8	0.9	424	381.6	15.7	7.91	18.0	YES	942
9	0.91	424	385.8	15.9	7.72	16.6	YES	767
10	0.9	424	381.6	16.3	7.77	16.4	YES	777
11	0.89	424	377.4	16.3	7.94	17.5	YES	1002
12	0.88	424	373.1	16.5	7.94	17.2	YES	947
13	0.87	424	368.9	16.8	7.90	16.6	YES	916
14	0.86	424	364.6	17.0	8.02	17.1	YES	939
15	0.86	424	364.6	16.6	7.94	17.1	YES	1039
16	0.87	424	368.9	16.4	7.84	16.7	YES	713
17	0.89	424	377.4	16.7	7.87	16.6	YES	846
18	0.86	424	364.6	16.4	7.86	16.8	YES	848
19	0.86	424	364.6	16.5	7.84	16.6	YES	1000
20	0.87	424	368.9	16.5	7.76	16.1	YES	882
21	0.87	424	368.9	16.4	7.79	16.4	YES	848
22	0.87	424	368.9	16.4	7.81	16.5	YES	871
23	0.87	424	368.9	16.7	7.74	15.8	YES	829
24	0.91	424	385.8	16.5	7.71	15.9	YES	845
25	0.95	424	402.8	16.4	7.76	16.3	YES	960
26	0.99	424	419.8	16.2	7.70	16.3	YES	841
27	0.98	424	415.5	16.4	7.78	16.5	YES	1052
28	0.95	424	402.8	16.5	7.73	16.1	YES	1044
29	0.91	424	385.8	16.4	7.68	15.8	YES	938
30	0.91	424	385.8	16.5	7.89	17.0	YES	833
31	0.88	424	373.1	16.5	7.67	15.6	YES	776

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013