

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: COOS

Conventional or Direct Filtration

Month/Year: Sep-23

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	0.03	0.03	0.03	0.03	0.03	0.03	0.03
2	0.00	0.03	0.03	0.03	0.03	0.00	0.03
3	0.03	0.04	0.03	0.03	0.02	OFF	0.04
4	0.03	0.04	0.03	0.03	0.03	0.03	0.04
5	OFF	0.03	0.03	0.03	0.03	OFF	0.03
6	OFF	0.03	0.03	0.03	0.03	OFF	0.03
7	OFF	0.03	0.03	0.02	0.02	OFF	0.03
8	OFF	0.03	0.03	0.02	0.02	OFF	0.03
9	0.03	0.03	0.03	0.03	0.03	OFF	0.03
10	0.03	0.04	0.03	0.03	0.03	OFF	0.04
11	OFF	0.03	0.03	0.03	0.03	OFF	0.03
12	0.03	0.03	0.03	0.03	0.03	OFF	0.03
13	OFF	0.03	0.03	0.03	0.03	OFF	0.03
14	OFF	0.03	0.03	0.03	0.03	OFF	0.03
15	OFF	0.04	0.03	0.03	0.03	OFF	0.04
16	OFF	0.05	0.05	0.03	0.03	OFF	0.05
17	OFF	0.03	0.03	0.03	0.03	OFF	0.03
18	OFF	0.03	0.03	0.03	0.03	OFF	0.03
19	OFF	0.03	0.03	0.03	0.03	OFF	0.03
20	OFF	0.03	0.03	0.03	0.03	OFF	0.03
21	OFF	0.04	0.04	0.03	0.03	0.03	0.04
22	OFF	0.04	0.05	0.03	0.03	OFF	0.05
23	OFF	0.04	0.04	0.03	OFF	OFF	0.04
24	0.04	0.04	0.04	0.03	0.04	0.04	0.04
25	OFF	OFF	0.05	0.04	OFF	OFF	0.05
26	OFF	0.05	0.05	0.04	OFF	OFF	0.05
27	OFF	OFF	0.07	0.07	0.04	0.04	0.07
28	OFF	0.05	0.05	0.04	0.04	OFF	0.05
29	OFF	0.05	0.06	0.04	0.04	OFF	0.06
30	OFF	0.05	0.05	0.05	OFF	OFF	0.05
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes / No	CT's met everyday? (see back)
All 4-hour turbidity readings ≤ 1 NTU?	Yes / No	Yes / No
All turbidity readings < IFE ² triggers	Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l?
		Yes / No
Notes:	PRINTED NAME: JAMES J. YOURAVISH	
	SIGNATURE: <i>[Signature]</i>	10-4-2023
	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: Sep-23	WTP - : Disinfection <i>Giardia</i> Log Inactiv: 0.5	
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	0.67	424	284.1	15.8	7.42	14.5	YES	824
2	0.69	424	292.6	16.3	7.33	13.6	YES	707
3	0.68	424	288.3	15.7	7.29	14.0	YES	817
4	0.71	424	301.0	15.6	7.29	14.1	YES	806
5	0.71	424	301.0	15.3	7.36	14.8	YES	839
6	0.72	424	305.3	15.3	7.39	14.9	YES	1072
7	0.77	424	326.5	15.4	7.30	14.4	YES	1070
8	0.76	424	322.2	15.0	7.28	14.7	YES	828
9	0.73	424	309.5	14.9	7.31	14.9	YES	734
10	0.73	424	309.5	14.8	7.42	15.6	YES	793
11	0.73	424	309.5	15.2	7.48	15.6	YES	741
12	0.73	424	309.5	15.5	7.58	15.8	YES	1057
13	0.73	424	309.5	15.1	7.59	16.3	YES	917
14	0.72	424	305.3	15.2	7.54	15.9	YES	1021
15	0.73	424	309.5	15.3	7.51	15.6	YES	787
16	0.75	424	318.0	15.4	7.52	15.6	YES	706
17	0.77	424	326.5	15.7	7.71	16.5	YES	961
18	0.46	424	195.0	15.2	7.66	16.1	YES	1149
19	0.75	424	318.0	15.1	7.56	16.2	YES	867
20	0.73	424	309.5	15.1	7.48	15.7	YES	880
21	0.69	424	292.6	14.4	7.49	16.4	YES	834
22	0.73	424	309.5	14.3	7.54	16.9	YES	1040
23	0.72	424	305.3	14.5	7.67	17.5	YES	841
24	0.73	424	309.5	14.4	7.73	18.0	YES	725
25	0.67	424	284.1	14.1	7.74	18.3	YES	851
26	0.68	424	288.3	14.0	7.69	18.1	YES	861
27	0.64	424	271.4	13.7	7.67	18.3	YES	895
28	0.62	424	262.9	14.1	7.54	16.9	YES	759
29	0.51	424	216.2	14.5	7.70	17.3	YES	962
30	0.54	424	229.0	14.4	7.77	17.9	YES	887
31		424					NO	

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