OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: COOS

Month/Year: Oct-25

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	0.04	0.04	0.03	0.03	OFF	0.04
2	OFF	0.04	0.04	0.03	0.03	OFF	0.04
3	OFF	0.04	0.04	0.03	0.04	OFF	0.04
4	OFF	0.03	0.04	0.03	0.03	OFF	0.04
5	OFF	0.04	0.04	0.03	0.03	OFF	0.04
6	OFF	0.16	0.04	0.03	0.03	0.03	0.16
7	OFF	0.05	0.19	0.03	0.03	0.03	0.19
8	OFF	0.05	0.04	0.03	0.03	OFF	0.05
9	OFF	0.05	0.04	0.03	0.03	OFF	0.05
10	OFF	0.05	0.04	0.03	0.03	OFF	0.05
11	OFF	0.04	0.04	0.03	0.03	OFF	0.04
12	OFF	0.05	0.04	0.03	OFF	OFF	0.05
13	OFF	0.14	0.08	0.04	0.03	0.03	0.14
14	OFF	0.04	0.12	0.04	0.03	OFF	0.12
15	OFF	OFF	0.05	0.09	0.05	0.04	0.09
16	OFF	OFF	0.05	0.03	0.03	OFF	0.05
17	OFF	0.05	0.04	0.03	0.03	OFF	0.05
18	OFF	0.05	0.04	0.03	0.03	OFF	0.05
19	OFF	0.04	0.04	0.03	0.03	OFF	0.04
20	OFF	0.13	0.04	0.04	0.03	0.03	0.13
21	OFF	0.13	0.14	0.03	0.03	OFF	0.14
22	OFF	0.05	0.03	0.03	0.03	OFF	0.05
23	OFF	OFF	0.06	0.03	0.03	OFF	0.06
24	OFF	OFF	0.04	0.03	0.03	OFF	0.04
25	OFF	0.04	0.04	0.03	0.03	OFF	0.04
26	OFF	0.06	0.04	0.03	OFF	OFF	0.06
27	OFF	0.12	0.04	0.03	0.03	OFF	0.12
28	OFF	0.06	0.10	0.03	0.03	OFF	0.10
29	OFF	0.04	0.04	0.03	0.03	OFF	0.04
30	OFF	0.04	0.04	0.03	0.03	OFF	0.04
31	OFF	0.04	0.04	0.03	0.03	OFF	0.04

Conventional or Direct Filtration

95% of 4-hour turbidity readings ≤ 0.3 NTU? **Yes / No**

All 4-hour turbidity readings ≤ 1 NTU? **Yes / No**

All turbidity readings < IFE[2] triggers **Yes / No**

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back) **Yes / No**

All Cl2 residual at entry point ≥ 0.2 mg/l? **Yes / No**

Notes:

PRINTED NAME: JAMES J. YOURAVISH

SIGNATURE: [signature] **11-4-2025**

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

WTP - :	
Disinfection *Giardia* Log Inactiv:	0.5

System Name:	Bandon, City of	ID#: 4100074	Month/Year:	Oct-25

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	0.78	424	330.7	16.3	7.84	16.6	YES	789
2	0.81	424	343.4	16.3	7.90	17.1	YES	655
3	0.83	424	351.9	16.3	7.90	17.1	YES	834
4	0.84	424	356.2	16.3	7.72	16.0	YES	802
5	0.8	424	339.2	16.2	7.78	16.4	YES	729
6	0.76	424	322.2	16.2	7.78	16.3	YES	908
7	0.69	424	292.6	16.3	7.72	15.7	YES	814
8	0.62	424	262.9	16.3	7.78	16.0	YES	809
9	0.59	424	250.2	16.2	7.76	15.9	YES	988
10	0.6	424	254.4	16.1	7.80	16.3	YES	822
11	0.56	424	237.4	15.7	7.83	16.8	YES	805
12	0.55	424	233.2	15.5	7.87	17.3	YES	724
13	0.51	424	216.2	15.3	7.86	17.4	YES	899
14	0.56	424	237.4	14.9	7.92	18.3	YES	813
15	0.61	424	258.6	14.8	7.89	18.4	YES	804
16	0.63	424	267.1	14.6	7.90	18.7	YES	1023
17	0.6	424	254.4	14.5	7.90	18.8	YES	1046
18	0.55	424	233.2	14.4	7.91	18.9	YES	856
19	0.51	424	216.2	14.4	7.90	18.7	YES	718
20	0.49	424	207.8	14.4	7.89	18.6	YES	795
21	0.54	424	229.0	14.2	7.87	18.8	YES	792
22	0.58	424	245.9	14.3	7.78	18.2	YES	991
23	0.55	424	233.2	14.0	7.72	18.1	YES	1088
24	0.51	424	216.2	14.5	7.68	17.1	YES	772
25	0.48	424	203.5	14.4	7.68	17.2	YES	762
26	0.45	424	190.8	14.4	7.68	17.1	YES	694
27	0.51	424	216.2	14.3	7.65	17.2	YES	774
28	0.66	424	279.8	14.3	7.57	17.0	YES	797
29	0.71	424	301.0	14.3	7.55	16.9	YES	606
30	0.69	424	292.6	14.3	7.61	17.3	YES	806
31	0.68	424	288.3	14.2	7.66	17.7	YES	855

[3] If Cl_2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013