

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **COOS**  
 Month/Year: **Nov-25**

Conventional or Direct Filtration

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 <sup>1</sup> [NTU]
1	OFF	0.04	0.04	0.03	0.03	OFF	0.04
2	OFF	OFF	0.04	0.03	0.03	OFF	0.04
3	OFF	0.04	0.15	0.03	0.11	0.03	0.15
4	OFF	0.04	0.11	0.03	0.03	0.03	0.11
5	OFF	OFF	0.07	0.05	0.03	0.04	0.07
6	OFF	OFF	0.08	0.05	0.05	0.06	0.08
7	OFF	OFF	0.08	0.11	0.06	OFF	0.11
8	OFF	0.04	0.06	0.03	0.03	OFF	0.06
9	OFF	0.04	0.06	0.03	0.03	OFF	0.06
10	OFF	0.04	0.04	0.03	0.03	OFF	0.04
11	OFF	OFF	0.04	0.04	0.03	OFF	0.04
12	OFF	0.04	0.12	0.04	0.03	0.03	0.12
13	OFF	0.04	0.10	0.04	0.03	OFF	0.10
14	OFF	OFF	0.04	0.03	0.03	OFF	0.04
15	OFF	OFF	0.04	0.03	0.03	OFF	0.04
16	OFF	OFF	0.04	0.03	0.03	OFF	0.04
17	OFF	OFF	0.04	0.03	0.03	OFF	0.04
18	OFF	OFF	0.04	0.03	0.03	OFF	0.04
19	OFF	OFF	0.04	0.03	0.03	OFF	0.04
20	OFF	0.04	0.14	0.04	0.04	OFF	0.14
21	OFF	OFF	0.04	0.08	0.04	0.04	0.08
22	OFF	OFF	0.12	0.03	OFF	OFF	0.12
23	OFF	0.09	0.05	0.03	0.03	OFF	0.09
24	OFF	OFF	0.07	0.03	0.03	OFF	0.07
25	OFF	OFF	0.04	0.03	0.03	OFF	0.04
26	OFF	OFF	0.04	0.03	0.03	OFF	0.04
27	OFF	OFF	0.04	0.03	0.03	OFF	0.04
28	OFF	0.03	0.06	0.04	0.03	0.03	0.06
29	OFF	0.03	0.06	0.04	0.03	OFF	0.06
30	OFF	OFF	0.03	0.03	0.03	OFF	0.03
31							

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

Notes:	PRINTED NAME: <b>JAMES J. YOURAVISH</b>	
	SIGNATURE: <i>[Signature]</i>	<b>12-3-2025</b>
	PHONE #: <b>(541)-347-3007</b>	CERT #: <b>T-09155</b>

<sup>1</sup> 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. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: <b>Bandon, City of</b>				ID#: <b>4100074</b>	Month/Year: <b>Nov-25</b>	WTP - : Disinfection <i>Giardia</i> Log Inactiv: <b>0.5</b>	
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Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup> [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? <sup>3</sup> Yes / No	Peak Hourly Demand Flow [GPM]
1	0.66	424	279.8	14.3	7.69	17.7	YES	633
2	0.61	424	258.6	14.2	7.70	17.8	YES	500
3	0.6	424	254.4	14.3	7.75	18.0	YES	636
4	0.69	424	292.6	14.3	7.73	18.1	YES	849
5	0.68	424	288.3	14.3	7.74	18.1	YES	708
6	0.45	424	190.8	14.4	7.77	17.7	YES	655
7	0.46	424	195.0	14.4	7.74	17.5	YES	658
8	0.62	424	262.9	14.4	7.59	16.9	YES	678
9	0.56	424	237.4	14.4	7.52	16.3	YES	584
10	0.53	424	224.7	14.3	7.53	16.5	YES	661
11	0.54	424	229.0	14.4	7.53	16.4	YES	650
12	0.53	424	224.7	14.2	7.56	16.8	YES	729
13	0.59	424	250.2	14.3	7.62	17.1	YES	557
14	0.62	424	262.9	14.3	7.64	17.3	YES	580
15	0.69	424	292.6	14.3	7.69	17.8	YES	508
16	0.74	424	313.8	14.4	7.70	17.8	YES	521
17	0.79	424	335.0	14.3	7.67	17.9	YES	580
18	0.8	424	339.2	14.1	7.64	17.9	YES	492
19	0.78	424	330.7	13.9	7.57	17.7	YES	736
20	0.76	424	322.2	13.7	7.45	17.1	YES	482
21	0.74	424	313.8	13.4	7.42	17.2	YES	574
22	0.66	424	279.8	13.2	7.36	16.9	YES	498
23	0.61	424	258.6	13.1	7.37	17.0	YES	591
24	0.59	424	250.2	13.0	7.31	16.7	YES	738
25	0.58	424	245.9	12.8	7.37	17.2	YES	537
26	0.57	424	241.7	12.5	7.39	17.7	YES	533
27	0.53	424	224.7	12.5	7.40	17.7	YES	530
28	0.49	424	207.8	12.5	7.39	17.5	YES	508
29	0.47	424	199.3	12.6	7.45	17.8	YES	494
30	0.47	424	199.3	12.5	7.46	18.0	YES	523
31		424					NO	

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.