

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **COOS**
 Month/Year: **Dec-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 ¹ [NTU]	
1	OFF	OFF	0.03	0.03	0.03	OFF	0.03	
2	OFF	OFF	0.03	0.03	0.03	OFF	0.03	
3	OFF	OFF	0.03	0.03	0.02	OFF	0.03	
4	OFF	OFF	0.03	0.03	0.02	OFF	0.03	
5	OFF	OFF	0.03	0.03	0.02	OFF	0.03	
6	OFF	OFF	0.09	0.03	0.03	0.03	0.09	
7	OFF	OFF	0.16	0.04	0.04	0.03	0.16	
8	OFF	OFF	0.03	0.03	0.03	OFF	0.03	
9	OFF	OFF	0.03	0.03	0.03	OFF	0.03	
10	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
11	OFF	0.03	0.03	0.03	0.02	OFF	0.03	
12	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
13	OFF	OFF	0.03	0.03	0.02	OFF	0.03	
14	OFF	0.03	0.10	0.03	0.03	0.02	0.10	
15	OFF	0.03	0.14	0.03	0.03	OFF	0.14	
16	OFF	0.03	0.03	0.03	0.03	0.03	0.03	
17	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
18	OFF	OFF	0.03	0.03	0.02	OFF	0.03	
19	OFF	0.03	0.03	0.03	0.03	OFF	0.03	
20	OFF	OFF	0.15	0.14	0.03	OFF	0.15	
21	OFF	0.16	0.13	0.03	0.03	0.02	0.16	
22	OFF	0.03	0.05	0.03	0.03	OFF	0.05	
23	OFF	OFF	0.03	0.02	0.02	OFF	0.03	
24	OFF	OFF	0.03	0.02	0.02	OFF	0.03	
25	OFF	OFF	0.03	0.02	OFF	OFF	0.03	
26	OFF	OFF	0.03	0.02	0.02	OFF	0.03	
27	OFF	OFF	0.03	0.03	0.03	OFF	0.03	
28	OFF	OFF	0.04	0.06	0.10	OFF	0.10	
29	OFF	0.05	0.21	0.17	0.14	0.05	0.21	
30	0.05	OFF	0.06	0.05	0.06	OFF	0.06	
31	OFF	0.13	0.09	0.11	0.04	0.04	0.13	

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

Notes:

PRINTED NAME: **JAMES J. YOURAVISH**

SIGNATURE: *[Signature]* /-5-2026

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 - :

System Name:	Bandon, City of	ID#: 4100074	Month/Year:		Disinfection <i>Giardia</i> Log Inactiv:	0.5
--------------	-----------------	--------------	-------------	--	--	-----

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	0.51	424	216.2	12.6	7.55	18.5	YES	511
2	0.54	424	229.0	12.6	7.62	19.1	YES	1581
3	0.6	424	254.4	12.4	7.65	19.8	YES	512
4	0.64	424	271.4	12.4	7.68	20.1	YES	776
5	0.71	424	301.0	12.4	7.69	20.3	YES	498
6	0.71	424	301.0	12.4	7.62	19.8	YES	495
7	0.73	424	309.5	12.4	7.71	20.5	YES	446
8	0.67	424	284.1	12.6	7.68	19.8	YES	637
9	0.67	424	284.1	12.7	7.57	18.9	YES	692
10	0.62	424	262.9	13.0	7.46	17.7	YES	1091
11	0.57	424	241.7	13.2	7.49	17.5	YES	989
12	0.55	424	233.2	13.0	7.42	17.3	YES	911
13	0.52	424	220.5	13.4	7.39	16.6	YES	457
14	0.51	424	216.2	13.3	7.42	16.9	YES	558
15	0.55	424	233.2	13.2	7.53	17.8	YES	687
16	0.57	424	241.7	13.2	7.68	18.8	YES	1778
17	0.55	424	233.2	13.3	7.64	18.4	YES	1366
18	0.55	424	233.2	13.2	7.70	18.9	YES	518
19	0.55	424	233.2	13.2	7.72	19.0	YES	525
20	0.51	424	216.2	13.2	7.65	18.5	YES	472
21	0.49	424	207.8	13.0	7.69	19.0	YES	487
22	0.46	424	195.0	13.0	7.61	18.3	YES	494
23	0.42	424	178.1	12.8	7.41	17.2	YES	490
24	0.38	424	161.1	12.6	7.40	17.3	YES	437
25	0.38	424	161.1	12.8	7.38	16.9	YES	380
26	0.39	424	165.4	12.7	7.36	16.9	YES	436
27	0.38	424	161.1	12.5	7.22	16.3	YES	479
28	0.35	424	148.4	11.9	7.32	17.7	YES	504
29	0.43	424	182.3	11.4	7.38	18.9	YES	854
30	0.65	424	275.6	11.6	7.53	20.1	YES	1032
31	0.58	424	245.9	11.5	7.64	20.9	YES	507

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

Revised October 2013