

# OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Linn Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

**System Name: BROWNSVILLE, CITY OF ID#: OR4100152 WTP-: WTP-A Month/Ye May-22**

DAY	12:00 AM (NTU)	4:00 AM (NTU)	8:00 AM (NTU)	NOON (NTU)	4:00 PM (NTU)	8:00 PM (NTU)	Highest Reading of the Day <sup>1</sup> (NTU)
1			0.027				
2			0.029				
3			0.003				
4			0.029				
5			0.028				
6			0.029				
7			0.031				
8			0.029				
9			0.035				
10			0.033				
11			0.036				
12			0.033				
13			0.033				
14			0.032				
15			0.035				
16			0.033				
17			0.035				
18			0.036				
19			0.036				
20			0.036				
21			0.036				
22			0.036				
23			0.048				
24			0.035				
25			0.034				
26			0.031				
27			0.031				
28			0.031				
29			0.030				
30			0.032				
31			0.074				

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Montly Summary (Answer Yes or No)</b>	
95% of turbidity readings $\leq$ 1 NTU? All turbidity readings $\leq$ 5 NTU?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Yes <input type="radio"/> No <sup>4</sup>	CT's met everyday? (see back)	All Cl <sup>-</sup> residual at entry point $\geq$ 0.2 mg/l?
	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Notes:</b>	<b>PRINTED NAME:</b> Karl Frink		<b>DATE:</b> 6/7/2022
	<b>SIGNATURE:</b> <i>Karl Frink</i>		<b>CERT #:</b> 7037
	<b>PHONE #:</b> (541)466-3381		

<sup>1</sup> Including continuous turbidity 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> Filtered systems only.

## OHA - Drinking Water Program - Surface Water Quality Data Form

**BROWNSVILLE, CITY OF**    **ID #: OR4100152**    **WTP-:WTP-A**    **Month/Year:**    **May-22**

Date/ Time	Minimum $\text{Cl}_2$ Residual at 1 <sup>st</sup> User ( C ) <sup>3</sup>	Contact Time ( T )	Actual CT	Temp	pH	Required CT	CT Met?	Peak Hourly Demand Flow
	[ppm or mg/l]	[minutes]	<b>C X T</b>	°C		Use Tables	Yes/No	[GPM]
1/	1.49	83	123.67	12.5	7.90	49	YES	221
2/	1.16	83	96.28	12.8	7.20	36	YES	220
3/	1.37	83	113.71	12.3	7.62	44	YES	215
4/	0.87	83	72.21	12.7	7.42	39	YES	223
5/	0.80	83	66.40	13.0	7.23	33	YES	222
6/	0.65	83	53.95	12.7	7.28	36	YES	220
7/	0.85	83	70.55	12.8	7.62	42	YES	216
8/	0.85	83	70.55	12.2	7.49	39	YES	217
9/	0.89	83	73.87	13.2	7.69	39	YES	217
10/	0.93	83	77.19	12.5	7.38	38	YES	220
11/	0.70	83	58.10	14.4	7.44	32	YES	234
12/	0.74	83	61.42	12.9	7.23	36	YES	218
13/	0.62	83	51.46	13.0	7.31	34	YES	217
14/	0.75	83	62.25	12.2	7.29	36	YES	216
15/	0.50	83	41.50	14.3	7.59	33	YES	238
16/	0.64	83	53.12	13.2	7.27	33	YES	220
17/	0.62	83	51.46	13.4	7.36	34	YES	218
18/	0.63	83	52.29	13.3	7.25	33	YES	218
19/	0.60	83	49.80	13.0	7.20	33	YES	233
20/	0.56	83	46.48	12.8	7.21	35	YES	215
21/	0.64	83	53.12	13.0	7.35	34	YES	211
22/	0.68	83	56.44	13.4	7.41	35	YES	226
23/	0.75	83	62.25	14.3	7.39	31	YES	219
24/	0.75	83	62.25	14.1	7.46	32	YES	216
25/	1.06	83	87.98	14.4	7.41	34	YES	220
26/	1.30	83	107.90	14.7	7.46	34	YES	222
27/	1.12	83	92.96	14.2	8.22	46	YES	224
28/	0.64	83	53.12	13.2	8.60	52	YES	221
29/	1.12	83	92.96	12.9	8.79	65	YES	212
30/	1.11	83	92.13	12.9	8.98	69	YES	216
31/	0.66	83	54.78	13.8	7.39	34	YES	210

# CITY OF BROWNSVILLE

## RECORD OF DAILY CHLORINE APPLICATION

Water system ID #: **4100152**      Number of Services: 804      Water Superintendent: **Karl Frink**

Source of Water: Calapooia River      Number of Connections: 804      Month/Year: May-22

Chlorine Strength as Fed: 12.5% Sodium Hypochlorite      Make and Type of Chlorinator: LMI-Diaphragm Pump

DAY OF MONTH	MASTER METER READING GALLONS [X] CU. FEET [ ]	DAILY WATER PRODUCTION MGD	SODIUM HYPOCHLORITE USED: POUNDS [ ] GALLONS [X]	CHLORINE RESIDUAL TESTS SAMPLING POINTS (SP)								REMARKS: Show below, by date, unusual occurrences * or operation of the water system.	
				SP #1		SP #2		SP#3		SP #4			
				TIME	MG/L	TIME	MG/L	TIME	MG/L	TIME	MG/L		
1	0	0.281											
2	280,884	0.297		9:56	0.52	10:08	0.61	10:14	0.58	10:35	0.89		
3	577,489	0.229		9:19	1.14	9:28	1.06	9:34	1.11	10:19	0.91		
4	806,672	0.317		8:56	0.80	9:20	0.93	9:25	0.83	9:43	0.97		
5	1,124,061	0.217		9:28	0.88	9:49	0.77	9:55	0.83	10:11	0.68		
6	1,340,876	0.273		8:03	0.69	8:13	0.48	8:17	0.49	8:46	0.76		
7	1,613,882	0.261											
8	1,874,759	0.256											
9	2,130,678	0.298		8:55	0.71	9:05	0.44	9:13	0.74	9:35	0.59		
10	2,428,252	0.244		8:53	0.60	9:20	0.69	9:28	0.71	9:55	0.60		
11	2,672,027	0.292		10:05	0.69	10:15	0.47	10:23	0.68	10:41	0.65		
12	2,964,125	0.265		9:27	0.48	9:38	0.38	9:46	0.45	10:14	0.51		
13	3,229,299	0.268		9:00	0.55	9:12	0.48	9:20	0.50	9:41	0.55		
14	3,496,969	0.237											
15	3,734,443	0.304											
16	4,038,517	0.281		9:24	0.26	9:39	0.35	9:45	0.24	10:03	0.37		
17	4,319,620	0.252		9:07	0.49	9:16	0.48	9:27	0.68	8:51	0.26		
18	4,571,772	0.310		9:19	0.43	9:42	0.33	9:47	0.34	10:05	0.25		
19	4,882,259	0.231		9:11	0.40	9:25	0.41	9:31	0.43	9:50	0.26		
20	5,112,847	0.295		8:17	0.38	8:26	0.39	8:33	0.39	8:55	0.32		
21	5,408,061	0.305											
22	5,712,697	0.311											
23	6,024,058	0.294		8:35	0.75	8:43	0.59	8:46	0.68	9:32	0.66		
24	6,318,184	0.292		8:35	0.56	8:42	0.57	8:45	0.60	9:35	0.48		
25	6,610,577	0.287		8:33	1.20	8:55	1.87	9:05	1.96	9:30	1.72		
26	6,897,694	0.279		8:42	1.86	9:07	0.80	9:11	1.17	9:28	1.28		
27	7,176,317	0.257		8:20	1.09	8:39	0.84	8:43	1.11	8:54	1.20		
28	7,433,328	0.284											
29	7,717,017	0.302											
30	8,018,739	0.331											
31	8,349,757	0.301		8:42	0.83	9:15	0.82	9:20	0.69	9:49	0.71		

Water Supervisor Signature: Karl Frink      Date: 6/7/2022

NOTE: This form is to be completed and returned by the tenth of the following month to:  
OHA-Drinking Water Program, PO BOX 14350, Portland, OR 97293-0350