

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 Jan-23

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 ¹ (NTU)
1			0.029				
2			0.029				
3			0.033				
4			0.028				
5			0.028				
6			0.028				
7			0.028				
8			0.034				
9			0.026				
10			0.028				
11			0.028				
12			0.028				
13			0.028				
14			0.034				
15			0.027				
16			0.027				
17			0.028				
18			0.027				
19			0.027				
20			0.027				
21			0.027				
22			0.027				
23			0.026				
24			0.027				
25			0.029				
26			0.026				
27			0.027				
28			0.035				
29			0.003				
30			0.026				
31			0.026				

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of turbidity readings \leq 1 NTU? All turbidity readings \leq 5 NTU?	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl ² residual at entry point \geq 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes:	PRINTED NAME: Karl Frink	
	SIGNATURE: <i>Karl Frink</i>	DATE: 2/6/2023
	PHONE #: (541)466-3381	CERT #: 7037

¹ 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. ² Filtered systems only.

OHA - Drinking Water Program - Surface Water Quality Data Form

BROWNSVILLE, CITY OF **ID #: OR4100152** **WTP-:WTP-A** **Month/Year:** **Jan-23**

Date/ Time	Minimum Cl_2 Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met?	Peak Hourly Demand Flow
	[ppm or mg/l]	[minutes]	C X T	°C		Use Tables	Yes/No	[GPM]
1/	0.84	83	69.72	12.5	7.58	41	YES	209
2/	0.93	83	77.19	12.3	7.71	44	YES	187
3/	0.93	83	77.19	12.9	7.72	44	YES	188
4/	1.03	83	85.49	11.7	7.72	48	YES	190
5/	0.90	83	74.70	11.7	7.61	45	YES	188
6/	0.92	83	76.36	12.1	7.66	42	YES	191
7/	1.02	83	84.66	12.2	7.92	48	YES	188
8/	0.95	83	78.85	12.3	7.81	45	YES	220
9/	1.03	83	85.49	12.2	7.83	46	YES	212
10/	0.92	83	76.36	12.1	7.77	44	YES	189
11/	0.93	83	77.19	11.6	7.65	45	YES	188
12/	0.98	83	81.34	11.9	7.80	49	YES	195
13/	0.78	83	64.74	12.3	7.50	40	YES	189
14/	0.97	83	80.51	14.2	7.78	37	YES	216
15/	0.76	83	63.08	12.2	7.51	40	YES	214
16/	0.97	83	80.51	11.8	7.82	49	YES	212
17/	1.04	83	86.32	13.0	7.91	44	YES	218
18/	0.90	83	74.70	12.0	7.54	41	YES	215
19/	0.97	83	80.51	11.6	7.76	47	YES	212
20/	0.95	83	78.85	11.0	7.59	44	YES	215
21/	1.12	83	92.96	10.9	7.72	51	YES	217
22/	1.09	83	90.47	10.6	7.76	50	YES	189
23/	1.03	83	85.49	10.9	7.67	50	YES	188
24/	1.20	83	99.60	10.8	7.74	51	YES	187
25/	1.08	83	89.64	12.0	7.75	45	YES	190
26/	1.00	83	83.00	10.9	7.59	48	YES	215
27/	0.95	83	78.85	11.3	7.60	45	YES	214
28/	1.33	83	110.39	12.7	8.01	49	YES	187
29/	1.00	83	83.00	11.5	7.65	0.45	YES	186
30/	1.19	83	98.77	10.4	8.06	57	YES	217
31/	1.21	83	100.43	9.7	7.97	61	YES	222

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: Jan-23

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	0.293											
2	293,106	0.265											
3	558,234	0.271		9:13	0.66	9:41	0.81	9:46	0.89	10:03	0.71		
4	829,301	0.296		9:18	0.64	9:28	0.84	9:33	0.92	10:25	0.78		
5	1,125,331	0.308		8:55	0.71	9:07	0.80	9:13	0.87	10:13	0.80		
6	1,433,204	0.271		9:33	0.74	9:44	0.72	9:48	0.71	10:24	0.73		
7	1,704,348	0.275											
8	1,979,758	0.272											
9	2,252,118	0.292		9:22	0.57	9:35	0.83	9:44	0.78	10:07	0.76		
10	2,544,351	0.304		9:08	0.65	9:22	0.77	9:31	0.81	9:58	0.76		
11	2,848,020	0.280		9:38	0.62	10:01	0.65	10:07	0.64	10:33	0.47		
12	3,127,826	0.309		8:07	0.76	8:42	0.74	8:50	0.85	9:15	0.78		
13	3,437,287	0.211		9:08	0.75	9:33	0.75	9:41	0.77	10:02	0.69		
14	3,648,699	0.263											
15	3,911,305	0.310											
16	4,221,695	0.240											
17	4,461,355	0.286		8:37	0.57	8:54	0.35	9:05	0.43	9:36	0.67		
18	4,746,924	0.288		9:46	0.63	9:58	0.60	10:02	0.73	10:29	0.66		
19	5,035,034	0.229		8:55	0.75	9:26	0.73	9:31	0.67	9:46	0.63		
20	5,264,059	0.269		9:48	0.69	9:58	0.36	10:03	0.43	10:30	0.64		
21	5,532,901	0.191											
22	5,723,932	0.331											
23	6,054,854	0.290		10:03	0.48	10:25	0.43	10:31	0.82	10:51	0.54		
24	6,344,853	0.263		9:48	0.70	10:07	0.70	10:13	1.02	10:33	0.82		
25	6,607,682	0.240		10:35	0.68	10:53	0.30	11:01	0.77	11:25	0.41		
26	6,847,276	0.297		8:41	0.74	8:51	0.33	8:58	0.67	9:18	0.30		
27	7,143,879	0.236		8:53	0.84	9:00	0.68	9:05	0.39	9:31	0.80		
28	7,380,063	0.256											
29	7,636,343	0.311											
30	7,946,908	0.266		9:00	0.76	9:12	0.59	9:17	0.84	9:36	0.74		
31	8,212,433	0.301		9:06	0.74	9:29	0.52	9:33	0.62	9:54	0.82		

Water Supervisor Signature: Karl Frink Date: 2/6/2023

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