

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 Aug-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			0.031				
2			0.030				
3			0.031				
4			0.031				
5			0.031				
6			0.031				
7			0.031				
8			0.030				
9			0.030				
10			0.031				
11			0.030				
12			0.030				
13			0.030				
14			0.033				
15			0.029				
16			0.030				
17			0.030				
18			0.031				
19			0.031				
20			0.031				
21			0.030				
22			0.030				
23			0.030				
24			0.030				
25			0.030				
26			0.031				
27			0.029				
28			0.030				
29			0.030				
30			0.030				
31			0.030				

Slow Sand/Membrane/DE Filtration/Unfiltered		Montly Summary (Answer Yes or No)	
95% of turbidity readings ≤ 1 NTU? All turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Yes <input type="radio"/> No ⁴	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl ² residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes:	PRINTED NAME: Karl Frink		DATE: 9/7/2023
	SIGNATURE: <i>Karl Frink</i>		CERT #: 7037
	PHONE #: (541)466-3381		

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:** **Aug-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/	1.17	83	97.11	22.2	7.57	21	YES	3523
2/	1.18	83	97.94	22.2	7.43	20	YES	359
3/	0.96	83	79.68	23.1	7.59	19	YES	372
4/	1.03	83	85.49	.22.3	7.42	20	YES	375
5/	1.01	83	83.83	23.4	7.51	19	YES	354
6/	0.99	83	82.17	22.7	7.32	19	YES	372
7/	0.93	83	77.19	23.5	7.49	18	YES	421
8/	1.02	83	84.66	22.9	7.37	19	YES	422
9/	1.06	83	87.98	22.9	7.27	19	YES	396
10/	0.76	83	63.08	22.9	7.24	18	YES	427
11/	0.93	83	77.19	23.0	7.35	17	YES	415
12/	0.58	83	48.14	23.2	7.29	16	YES	373
13/	0.88	83	73.04	23.2	7.25	17	YES	376
14/	0.78	83	64.74	24.4	7.27	15	YES	371
15/	0.88	83	73.04	24.0	7.36	16	YES	383
16/	0.80	83	66.40	23.8	7.49	18	YES	373
17/	0.83	83	68.89	24.0	7.23	15	YES	390
18/	0.93	83	77.19	23.7	7.20	16	YES	419
19/	0.85	83	70.55	23.8	7.26	17	YES	364
20/	0.81	83	67.23	23.1	7.30	17	YES	353
21/	1.01	83	83.83	22.6	7.32	19	YES	355
22/	1.17	83	97.11	21.4	7.37	21	YES	386
23/	1.07	83	88.81	21.3	7.44	21	YES	392
24/	0.87	83	72.21	21.3	7.43	21	YES	394
25/	0.78	83	64.74	21.3	7.37	20	YES	376
26/	0.50	83	41.50	0.2	8.12	24	YES	339
27/	0.88	83	73.04	22.5	7.42	19	YES	358
28/	0.55	83	45.65	22.0	7.40	18	YES	364
29/	0.53	83	43.99	22.0	7.47	18	YES	369
30/	0.57	83	47.31	21.3	7.48	20	YES	381
31/	0.72	83	59.76	21.2	7.44	21	YES	368

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: Aug-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	0.523		9:15	0.37	9:34	0.60	
2	522,659	0.422		9:14	0.50	10:10	0.57	10:14	0.68	10:38	0.95	
3	944,489	0.560		8:45	0.57	9:07	0.33	9:12	0.45	9:40	0.77	
4	1,504,645	0.419		10:01	0.52	10:09	0.53	10:13	0.46	10:32	1.08	
5	1,923,573	0.488										
6	2,411,955	0.399										
7	2,810,619	0.570		9:32	0.61	9:42	0.37	9:49	0.49	10:09	0.37	
8	3,380,923	0.529		9:28	0.50	9:55	0.39	10:01	0.76	10:26	0.76	
9	3,909,446	0.572		8:16	0.47	8:38	0.48	8:45	0.93	9:08	0.93	
10	4,481,129	0.537		8:52	0.30	9:01	0.58	9:08	0.99	9:27	0.76	
11	5,017,877	0.549		8:04	0.52	8:13	0.53	8:26	0.84	8:35	0.91	
12	5,566,547	0.561										
13	6,127,301	0.548										
14	6,675,126	0.518		9:02	0.37	9:12	0.43	9:18	0.28	9:36	0.54	
15	7,193,116	0.591		7:45	0.25	7:55	0.24	8:00	0.42	8:44	0.76	
16	7,784,378	0.556		9:17	0.67	9:26	0.26	9:33	0.73	9:52	0.78	
17	8,339,966	0.585		8:34	0.38	8:44	0.54	8:51	0.31	9:15	0.33	
18	8,924,679	0.540		7:57	0.24	8:12	0.41	8:16	0.71	8:45	0.65	
19	9,464,235	0.443										
20	9,907,157	0.459										
21	10,365,720	0.597		8:51	0.29	9:04	0.47	9:12	0.48	9:42	0.77	
22	10,962,854	0.393		8:18	0.53	8:47	1.03	8:57	0.98	9:24	0.80	
23	11,355,587	0.520		8:36	0.53	8:45	0.54	9:52	0.42	9:15	0.44	
24	11,875,609	0.576		8:12	0.64	8:23	0.53	8:31	0.75	8:53	0.71	
25	12,451,827	0.381		8:04	0.64	8:16	0.72	8:30	0.81	8:50	0.62	
26	12,833,186	0.506										
27	13,339,461	0.419										
28	13,758,166	0.424		9:02	0.39	9:12	0.46	9:17	0.50	9:34	0.53	
29	14,181,748	0.406		10:00	0.57	10:10	0.46	10:14	0.23	10:36	0.43	
30	14,587,441	0.447		9:31	0.56	9:44	0.43	9:48	0.41	10:19	0.55	
31	15,034,064	0.329		9:23	0.57	9:40	0.47	9:44	0.50	10:00	1.03	

Water Supervisor Signature: Karl Frink Date: 9/7/2023

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