

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 Oct-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			0.039				
2			0.077				
3			0.064				
4			0.030				
5			0.074				
6			0.030				
7			0.029				
8			0.030				
9			0.028				
10			0.029				
11			0.029				
12			0.058				
13			0.114				
14			0.048				
15			0.038				
16			0.034				
17			0.034				
18			0.038				
19			0.043				
20			0.045				
21			0.042				
22			0.037				
23			0.039				
24			0.053				
25			0.050				
26			0.048				
27			0.041				
28			0.040				
29			0.035				
30			0.033				
31			0.033				

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: 11/3/2023
	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:** **Oct-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/	1.57	83	130.31	17.0	7.75	33	YES	335
2/	1.40	83	116.20	17.6	7.73	32	YES	329
3/	1.60	83	132.80	17.1	7.93	35	YES	331
4/	1.10	83	91.30	16.4	7.72	33	YES	342
5/	0.85	83	70.55	17.5	7.80	30	YES	334
6/	0.89	83	73.87	16.6	7.68	31	YES	333
7/	0.60	83	49.80	17.1	7.60	27	YES	341
8/	0.66	83	54.78	17.2	7.52	27	YES	335
9/	1.03	83	85.49	17.3	7.47	28	YES	343
10/	0.94	83	78.02	16.9	7.75	32	YES	339
11/	0.84	83	69.72	16.4	7.83	33	YES	337
12/	0.54	83	44.82	17.6	8.26	35	YES	339
13/	0.80	83	66.40	16.1	8.81	46	YES	344
14/	1.39	83	115.37	15.1	8.57	48	YES	337
15/	0.81	83	67.23	15.0	7.84	35	YES	338
16/	0.83	83	68.89	15.2	7.70	32	YES	349
17/	0.73	83	60.59	15.5	7.68	31	YES	346
18/	0.82	83	68.06	15.9	7.71	34	YES	344
19/	0.85	83	70.55	15.9	7.71	34	YES	343
20/	0.44	83	36.52	15.9	7.64	29	YES	340
21/	0.86	83	71.38	15.3	7.72	34	YES	339
22/	0.46	83	38.18	15.2	7.50	30	YES	334
23/	0.53	83	43.99	15.5	7.45	29	YES	369
24/	0.60	83	49.80	15.6	7.55	30	YES	345
25/	0.50	83	41.50	15.2	7.51	30	YES	338
26/	0.56	83	46.48	14.2	7.70	35	YES	339
27/	0.69	83	57.27	13.0	7.92	42	YES	339
28/	0.61	83	50.63	12.2	7.94	46	YES	348
29/	0.68	83	56.44	11.7	7.87	48	YES	338
30/	0.74	83	61.42	11.6	7.72	46	YES	345
31/	1.12	83	92.96	11.4	7.74	46	YES	341

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: Oct-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	0.287											
2	286,851	0.289		10:08	0.42	10:18	0.69	10:25	1.22	10:45	0.99		
3	576,248	0.300		8:45	0.63	8:55	0.80	9:02	1.21	9:50	0.95		
4	876,408	0.291		9:14	0.76	9:25	0.80	9:31	1.01	9:50	0.91		
5	1,167,344	0.297		9:33	0.76	9:42	0.80	9:50	0.72	10:09	0.84		
6	1,464,754	0.288		8:26	0.71	8:36	0.56	8:49	0.63	9:05	0.49		
7	1,752,772	0.284											
8	2,036,696	0.348											
9	2,385,036	0.260		8:43	0.40	8:59	0.29	9:02	0.47	9:30	0.50		
10	2,644,933	0.214		8:44	0.41	9:07	0.78	9:12	0.46	9:35	0.27		
11	2,859,368	0.264		8:40	0.49	8:50	0.74	8:54	0.59	9:16	0.44		
12	3,122,921	0.303		9:06	0.44	9:17	0.48	9:21	0.40	9:38	0.48		
13	3,426,330	0.280		9:30	0.30	9:58	0.40	10:03	0.34	10:21	0.37		
14	3,706,102	0.259											
15	3,965,047	0.284											
16	4,249,227	0.282		7:46	0.25	7:57	0.75	8:06	0.31	8:31	0.28		
17	4,531,604	0.281		9:24	0.28	9:38	0.43	9:50	0.44	10:36	0.32		
18	4,812,465	0.285		7:54	0.26	8:22	0.48	8:29	0.34	8:50	0.44		
19	5,097,781	0.296		9:12	0.32	9:44	0.37	9:02	0.48	10:18	0.57		
20	5,393,523	0.249		9:54	0.33	10:06	0.33	10:13	0.39	10:34	0.32		
21	5,642,701	0.250											
22	5,892,858	0.255											
23	6,147,521	0.278		9:58	0.22	10:01	0.33	10:06	0.30	10:24	0.41		
24	6,425,792	0.283		8:56	0.30	9:12	0.35	9:18	0.46	9:38	0.24		
25	6,708,939	0.261		8:17	0.39	8:31	0.45	8:35	0.34	8:52	0.35		
26	6,969,916	0.252		8:59	0.31	9:06	0.45	9:12	0.36	9:33	0.44		
27	7,221,862	0.241		8:57	0.26	9:05	0.44	9:11	0.36	9:40	0.36		
28	7,462,439	0.245											
29	7,707,008	0.259											
30	7,966,278	0.256		9:58	0.21	10:10	0.12	10:15	0.17	10:35	0.19		
31	8,222,265	0.259		8:48	0.44	9:25	0.64	9:30	0.60	10:00	0.68		

Water Supervisor Signature: Karl Frink Date: 11/3/2023

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