

# 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-24**

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			0.026				
2			0.026				
3			0.043				
4			0.026				
5			0.036				
6			0.026				
7			0.034				
8			0.027				
9			0.027				
10			0.027				
11			0.030				
12			0.027				
13			0.026				
14			0.026				
15			0.028				
16			0.026				
17			0.029				
18			0.034				
19			0.037				
20			0.038				
21			0.038				
22			0.037				
23			0.037				
24			0.035				
25			0.036				
26			0.033				
27			0.035				
28			0.036				
29			0.038				
30			0.037				
31			0.037				

<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) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl <sup>2</sup> residual at entry point $\geq$ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Notes:</b>	<b>PRINTED NAME:</b> Karl Frink		<b>DATE:</b> 6/4/2024
	<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-24**

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/	0.98	83	81.34	12.5	7.35	38	YES	200
2/	0.93	83	77.19	13.3	7.22	34	YES	198
3/	0.76	83	63.08	13.2	7.44	35	YES	199
4/	0.95	83	78.85	12.8	7.28	36	YES	221
5/	0.86	83	71.38	16.0	7.49	28	YES	201
6/	0.90	83	74.70	12.3	7.31	38	YES	199
7/	0.92	83	76.36	14.4	8.07	41	YES	204
8/	1.01	83	83.83	12.9	7.53	39	YES	199
9/	0.98	83	81.34	13.4	7.40	35	YES	216
10/	1.01	83	83.83	14.1	7.34	31	YES	214
11/	0.98	83	81.34	13.5	7.31	29	YES	205
12/	1.08	83	89.64	15.6	7.26	30	YES	203
13/	1.06	83	87.98	15.1	7.34	29	YES	204
14/	1.34	83	111.22	14.8	7.27	32	YES	219
15/	1.47	83	122.01	14.4	7.43	35	YES	246
16/	0.97	83	80.51	15.0	7.34	29	YES	221
17/	0.93	83	77.19	14.6	7.45	33	YES	224
18/	0.72	83	59.76	16.6	7.91	32	YES	349
19/	0.80	83	66.40	17.5	8.89	44	YES	330
20/	0.71	83	58.93	17.1	8.82	44	YES	327
21/	0.88	83	73.04	17.1	8.74	44	YES	338
22/	0.79	83	65.57	17.6	8.36	37	YES	325
23/	0.85	83	70.55	17.5	8.44	39	YES	335
24/	0.98	83	81.34	14.7	8.05	41	YES	328
25/	1.41	83	117.03	16.7	8.17	40	YES	336
26/	1.70	83	141.10	14.8	7.76	41	YES	316
27/	0.86	83	71.38	17.3	7.79	30	YES	326
28/	0.88	83	73.04	18.0	7.56	26	YES	340
29/	0.79	83	65.57	18.1	7.91	29	YES	335
30/	0.78	83	64.74	17.7	7.70	29	YES	344
31/	0.89	83	73.87	18.1	7.60	26	YES	325

# 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-24

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	0.309		9:18	0.68	9:31	0.53	9:36	0.92	9:57	0.78	
2	308,989	0.098		9:19	0.76	9:27	0.65	9:33	0.61	10:00	0.66	
3	406,516	0.305		9:29	0.75	9:40	0.66	9:44	0.68	10:17	0.68	
4	711,534	0.219										
5	930,050	0.231										
6	1,161,053	0.276		8:44	0.84	9:01	0.65	9:13	0.65	9:38	0.94	
7	1,437,259	0.171		8:29	0.88	8:43	0.74	8:51	1.20	9:36	0.27	
8	1,607,786	0.326		8:48	0.47	8:58	0.96	9:06	0.84	9:30	0.96	
9	1,934,216	0.302		9:04	0.82	9:15	1.07	9:22	1.18	9:47	1.13	
10	2,236,577	0.256		8:08	0.89	8:19	1.16	8:28	1.14	8:49	1.08	
11	2,492,989	0.226										
12	2,718,687	0.353										
13	3,072,179	0.305		10:03	0.70	10:13	0.95	10:22	1.11	10:34	0.77	
14	3,377,339	0.286		9:23	0.76	9:34	0.71	9:44	0.96	10:11	0.94	
15	3,663,686	0.337		7:08	0.52	7:19	0.77	7:28	0.91	7:48	0.58	
16	4,000,682	0.300		9:01	0.41	9:20	0.42	9:28	0.40	9:53	0.61	
17	4,300,943	0.512		8:14	0.31	8:28	0.52	8:38	0.61	9:01	0.53	
18	4,812,502	0.278										
19	5,090,629	0.308										
20	5,398,982	0.363		8:05	0.41	8:19	0.58	8:26	0.44	8:54	0.48	
21	5,761,520	0.276		8:44	0.41	9:03	0.59	9:07	0.73	9:37	0.66	
22	6,037,081	0.275		7:48	0.36	8:15	0.53	8:19	0.63	8:44	0.51	
23	6,311,930	0.343		9:16	0.38	9:24	0.53	9:28	0.65	9:46	0.55	
24	6,654,489	0.328		9:13	0.53	9:24	0.59	9:29	0.70	9:48	0.74	
25	6,982,961	0.287										
26	7,270,276	0.305										
27	7,574,914	0.354										
28	7,929,042	0.311		9:30	0.29	9:40	0.45	9:53	0.65	10:09	0.72	
29	8,240,360	0.304		9:17	0.33	9:33	0.60	9:40	0.69	10:06	0.66	
30	8,544,634	0.330		9:06	0.36	9:14	0.38	9:19	0.43	9:49	0.62	
31	8,874,901	0.356		8:32	0.43	9:05	0.49	9:13	0.64	9:35	0.62	

Water Supervisor Signature: Karl Frink      Date: 6/4/2024

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