

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 Jul-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 ¹ (NTU)
1			0.031				
2			0.030				
3			0.038				
4			0.030				
5			0.029				
6			0.031				
7			0.031				
8			0.032				
9			0.030				
10			0.030				
11			0.038				
12			0.032				
13			0.030				
14			0.030				
15			0.030				
16			0.033				
17			0.030				
18			0.031				
19			0.030				
20			0.038				
21			0.029				
22			0.030				
23			0.030				
24			0.030				
25			0.030				
26			0.032				
27			0.033				
28			0.030				
29			0.032				
30			0.036				
31			0.036				

Slow Sand/Membrane/DE Filtration/Unfiltered		Montly Summary (Answer Yes or No)	
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 ⁴	CT's met everyday? (see back)	All Cl ² 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
Notes:		PRINTED NAME: Karl Frink	
		SIGNATURE: <i>Karl Frink</i>	DATE: 8/9/2024
		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:** **Jul-24**

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/	1.19	83	98.77	19.7	7.27	23	YES	339
2/	1.08	83	89.64	20.4	7.37	22	YES	350
3/	0.93	83	77.19	22.2	7.49	19	YES	340
4/	1.05	83	87.15	20.9	7.32	22	YES	335
5/	0.99	83	82.17	21.0	7.26	19	YES	340
6/	1.04	83	86.32	21.7	7.37	21	YES	327
7/	0.92	83	76.36	22.9	7.40	19	YES	330
8/	1.15	83	95.45	22.6	7.28	19	YES	365
9/	0.99	83	82.17	23.2	7.28	17	YES	358
10/	1.09	83	90.47	23.5	7.26	17	YES	358
11/	0.93	83	77.19	24.5	7.27	15	YES	360
12/	0.61	83	50.63	23.2	7.26	16	YES	345
13/	1.14	83	94.62	23.2	7.59	19	YES	400
14/	1.20	83	99.60	23.2	7.48	18	YES	390
15/	1.09	83	90.47	23.1	7.40	18	YES	396
16/	0.90	83	74.70	23.9	7.70	19	YES	357
17/	1.00	83	83.00	22.7	7.52	20	YES	365
18/	0.75	83	62.25	22.7	7.33	18	YES	366
19/	0.98	83	81.34	22.5	7.81	23	YES	386
20/	0.65	83	53.95	23.9	8.23	24	YES	387
21/	1.05	83	87.15	22.9	7.78	22	YES	367
22/	0.81	83	67.23	22.7	7.84	23	YES	371
23/	0.82	83	68.06	22.3	8.44	27	YES	374
24/	0.93	83	77.19	22.1	7.93	23	YES	371
25/	0.55	83	45.65	21.9	7.63	21	YES	396
26/	0.87	83	72.21	21.8	8.06	26	YES	378
27/	0.89	83	73.87	22.6	8.49	29	YES	352
28/	0.84	83	69.72	21.9	7.64	22	YES	341
29/	0.78	83	64.74	22.2	8.12	24	YES	354
30/	0.81	83	67.23	22.6	8.07	24	YES	385
31/	0.73	83	60.59	22.7	7.95	23	YES	370

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: Jul-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	0.444		9:01	0.28	9:07	0.47	9:14	0.72	9:42	0.55	
2	443,786	0.357		9:21	0.29	9:34	0.62	9:40	0.73	10:08	0.67	
3	801,065	0.557		9:21	0.55	9:52	0.31	9:58	0.35	10:17	0.39	
4	1,357,775	0.404										
5	1,762,002	0.547		9:22	0.42	9:52	0.31	9:59	0.24	10:18	0.43	
6	2,309,364	0.464										
7	2,773,770	0.553										
8	3,327,007	0.610		8:28	0.56	8:38	0.39	8:48	0.27	9:10	0.25	
9	3,936,569	0.582		9:18	0.34	9:36	0.51	9:16	0.75	10:16	0.62	
10	4,518,151	0.455		8:33	0.29	8:45	0.32	8:56	0.81	9:16	0.60	
11	4,973,436	0.493		8:44	0.32	9:13	0.35	9:19	0.33	9:38	0.62	
12	5,466,419	0.531		8:38	0.46	8:52	0.30	9:02	0.49	9:25	0.52	
13	5,997,093	0.587										
14	6,584,409	0.465										
15	7,049,884	0.476		8:33	0.28	8:42	0.35	8:49	0.64	9:14	0.65	
16	7,525,843	0.578		8:28	0.40	8:39	0.37	8:44	0.60	9:12	0.63	
17	8,103,693	0.436		7:01	0.37	9:14	0.46	9:22	0.62	9:43	0.67	
18	8,539,510	0.560		9:35	0.41	9:49	0.25	9:53	0.45	10:17	0.45	
19	9,099,988	0.356		9:03	0.59	9:15	0.34	9:23	0.71	9:45	0.68	
20	9,455,625	0.556										
21	10,011,504	0.349										
22	10,360,232	0.559		(:49	0.38	10:15	0.37	10:12	0.38	10:49	0.30	
23	10,919,426	0.449		8:05	0.50	8:13	0.78	8:19	0.81	8:56	0.75	
24	11,368,527	0.454		7:16	0.44	8:08	0.42	8:16	0.79	8:35	0.63	
25	11,822,816	0.549		9:52	0.39	10:01	0.39	10:07	0.35	10:31	0.37	
26	12,372,270	0.412		8:13	0.45	8:27	0.43	8:34	0.75	9:01	0.71	
27	12,784,696	0.459										
28	13,243,422	0.498										
29	13,741,155	0.400		8:33	0.40	8:44	0.32	8:52	0.58	9:11	0.67	
30	14,141,324	0.476		8:09	0.63	8:23	0.40	8:31	0.45	8:56	0.70	
31	14,617,793	0.591		8:22	0.30	8:30	0.36	8:40	0.52	9:01	0.59	

Water Supervisor Signature: Karl Frink Date: 8/9/2024

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