

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 Nov-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			0.034				
2			0.055				
3			0.061				
4			0.051				
5			0.043				
6			0.039				
7			0.037				
8			0.035				
9			0.032				
10			0.031				
11			0.030				
12			0.031				
13			0.035				
14			0.041				
15			0.076				
16			0.057				
17			0.046				
18			0.063				
19			0.068				
20			0.034				
21			0.030				
22			0.045				
23			0.038				
24			0.032				
25			0.029				
26			0.031				
27			0.031				
28			0.033				
29			0.029				
30			0.040				
31							

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)	All Cl ² residual at entry point ≥ 0.2 mg/l?
		<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: 12/4/2024
		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:** **Nov-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/	0.67	83	55.61	15.8	7.64	31	YES	314
2/	0.57	83	47.31	13.8	7.77	38	YES	310
3/	0.60	83	49.80	12.8	7.82	43	YES	327
4/	0.54	83	44.82	14.1	8.10	39	YES	324
5/	1.03	83	85.49	13.5	7.49	32	YES	310
6/	1.01	83	83.83	14.8	7.53	33	YES	315
7/	0.97	83	80.51	14.1	7.46	33	YES	317
8/	0.99	83	82.17	15.3	7.39	29	YES	312
9/	1.45	83	120.35	13.3	7.34	37	YES	311
10/	1.70	83	141.10	12.7	7.33	41	YES	316
11/	1.13	83	93.79	13.5	7.21	34	YES	314
12/	1.04	83	86.32	12.9	7.29	34	YES	309
13/	0.92	83	76.36	15.4	7.37	29	YES	311
14/	0.76	83	63.08	14.8	7.54	33	YES	311
15/	0.49	83	40.67	14.1	7.81	35	YES	312
16/	0.70	83	58.10	12.8	7.50	38	YES	309
17/	0.98	83	81.34	13.5	7.42	36	YES	311
18/	0.53	83	43.99	11.9	7.69	43	YES	309
19/	0.80	83	66.40	12.3	7.55	40	YES	309
20/	0.92	83	76.36	13.6	7.48	36	YES	316
21/	0.88	83	73.04	14.3	7.46	33	YES	315
22/	0.84	83	69.72	17.7	7.44	27	YES	320
23/	1.46	83	121.18	16.6	7.41	30	YES	314
24/	1.71	83	141.93	15.5	7.46	33	YES	313
25/	1.67	83	138.61	14.4	7.45	36	YES	310
26/	1.96	83	162.68	14.3	7.41	36	YES	337
27/	1.64	83	136.12	14.1	7.65	39	YES	343
28/	1.15	83	95.45	14.7	7.36	33	YES	345
29/	1.16	83	96.28	13.5	7.28	34	YES	339
30/	1.23	83	102.09	17.2	7.36	27	YES	346
31/								

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: Nov-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	0.262		8:51	0.31	9:22	0.31	9:28	0.34	9:47	0.40	
2	262,141	0.306										
3	568,081	0.295										
4	863,048	0.280		9:34	0.21	9:42	0.31	9:44	0.33	10:20	0.34	
5	1,143,359	0.268		8:55	0.24	9:09	0.38	9:09	0.32	9:44	0.22	
6	1,411,066	0.261		8:28	0.34	8:44	0.34	8:51	0.36	9:11	0.51	
7	1,672,481	0.271		8:19	0.54	8:31	0.36	8:41	0.34	9:00	0.49	
8	1,943,643	0.272		9:21	0.41	9:29	0.39	9:34	0.40	9:59	0.46	
9	2,215,801	0.267										
10	2,482,621	0.275										
11	2,757,470	0.275										
12	3,032,894	0.259		9:19	0.62	9:55	0.47	9:44	0.62	10:09	0.64	
13	3,291,666	0.263		10:39	0.37	11:01	0.51	11:08	0.76	11:27	0.48	
14	3,554,402	0.269		8:07	0.56	8:45	0.43	8:52	0.45	9:12	0.71	
15	3,823,382	0.265		8:07	0.31	8:20	0.49	8:27	0.30	8:53	0.66	
16	4,088,098	0.274										
17	4,361,763	0.284										
18	4,645,573	0.281		9:46	0.30	9:58	0.64	10:04	0.58	10:21	0.73	
19	4,926,226	0.251		9:15	0.41	9:28	0.73	9:37	0.32	10:05	0.46	
20	5,177,059	0.351		9:27	0.35	9:39	1.67	9:49	1.00	10:08	0.57	
21	5,528,358	0.271		9:23	0.33	9:49	1.13	9:55	0.97	10:14	1.22	
22	5,798,979	0.292		7:56	0.38	8:02	0.43	8:09	1.25	8:28	1.04	
23	6,091,133	0.278										
24	6,369,189	0.276										
25	6,645,366	0.242		9:59	0.37	9:47	0.38	9:55	0.46	10:24	0.72	
26	6,887,174	0.263		7:03	0.69	7:13	1.62	7:21	1.25	7:44	0.91	
27	7,150,367	0.278		8:17	0.53	8:28	1.48	8:36	1.55	8:54	1.15	
28	7,428,012	0.256										
29	7,684,416	0.217										
30	7,901,080	0.306										
1	8,207,488											

Water Supervisor Signature: Karl Frink Date: 12/4/2024

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