

**OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Linn**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

**BROWNSVILLE, CITY OF**      **ID# OR 4100152**      **WTP-: WTP-A**      **MONTH/YEAR:**      Dec-25

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			0.074				
2			0.073				
3			0.073				
4			0.074				
5			0.074				
6			0.076				
7			0.076				
8			0.077				
9			0.079				
10			0.081				
11			0.081				
12			0.080				
13			0.080				
14			0.080				
15			0.080				
16			0.081				
17			0.082				
18			0.083				
19			0.050				
20			0.031				
21			0.034				
22			0.030				
23			0.058				
24			0.032				
25			0.031				
26			0.031				
27			0.032				
28			0.030				
29			0.031				
30			0.035				
31			0.034				

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Montly Summary (Answer Yes or No)</b>	
95% of turbidity readings ≤ 1 NTU? All turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes <input checked="" type="radio"/> No <input checked="" type="radio"/> Yes <input checked="" type="radio"/> No <sup>1</sup>	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input checked="" type="radio"/> No	All Cl <sup>2</sup> residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input checked="" type="radio"/> No
<b>Notes:</b>	<b>PRINTED NAME:</b> Karl Frink		<b>DATE:</b> 1/7/2026
	<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# OR 4100152**      **WTP-: WTP-A**      **MONTH/YEAR:**      **Dec-25**

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/	0.65	83	53.95	11.4	8.03	48	YES	383
2/	0.67	83	55.61	11.0	8.11	53	YES	381
3/	0.69	83	57.27	11.3	7.96	49	YES	360
4/	0.67	83	55.61	11.1	7.79	46	YES	383
5/	0.67	83	55.61	11.7	7.62	44	YES	382
6/	0.77	83	63.91	11.3	8.27	55	YES	379
7/	0.67	83	55.61	12.2	7.70	41	YES	388
8/	0.81	83	67.23	14.6	7.46	33	YES	336
9/	1.53	83	126.99	13.2	7.31	37	YES	326
10/	1.42	83	117.86	14.2	7.29	33	YES	327
11/	1.58	83	131.14	15.3	7.33	31	YES	333
12/	1.33	83	110.39	14.2	7.42	34	YES	334
13/	1.00	83	83.00	15.8	7.60	31	YES	333
14/	1.30	83	107.90	13.8	7.50	37	YES	332
15/	1.30	83	107.90	16.0	7.45	29	YES	330
16/	1.52	83	126.16	14.4	7.29	33	YES	332
17/	1.28	83	106.24	16.9	7.21	27	YES	337
18/	1.45	83	120.35	14.0	7.24	33	YES	336
19/	0.88	83	73.04	16.1	7.43	28	YES	335
20/	1.00	83	83.00	13.5	7.75	40	YES	334
21/	1.00	83	83.00	13.1	7.32	35	YES	336
22/	1.07	83	88.81	13.4	7.41	37	YES	335
23/	1.32	83	109.56	15.2	7.36	30	YES	333
24/	1.13	83	93.79	13.0	7.38	36	YES	331
25/	1.02	83	84.66	13.2	7.46	37	YES	332
26/	1.13	83	93.79	13.2	7.36	36	YES	332
27/	0.72	83	59.76	13.6	7.54	36	YES	338
28/	0.84	83	69.72	12.9	7.33	38	YES	335
29/	0.84	83	69.72	13.4	7.43	36	YES	335
30/	0.81	83	67.23	13.4	8.05	45	YES	325
31/	0.82	83	68.06	13.3	7.79	40	YES	336

# 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: Dec-25

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	0.256		9:19	8:09	9:46	0.24	9:50	0.43	10:07	0.40	
2	256,439	0.254		9:10	0.30	9:18	0.30	9:24	0.46	9:53	0.46	
3	510,045	0.263		8:12	0.36	8:41	0.44	8:46	0.27	9:04	0.31	
4	772,982	0.233		10:03	0.30	10:12	0.41	10:46	0.34	10:31	0.36	
5	1,006,090	0.150		9:50	0.41	10:00	0.44	10:05	0.33	10:19	0.40	
6	1,155,660	0.199										
7	1,354,325	0.346										
8	1,700,455	0.342		9:24	0.29	9:39	0.25	9:47	0.34	10:04	.24.	
9	2,042,809	0.185		9:54	0.24	10:04	1.17	10:11	0.65	10:36	0.20	
10	2,227,783	0.251		9:23	0.31	9:34	0.64	9:40	0.31	9:58	0.94	
11	2,479,231	0.243		8:20	0.21	8:39	0.29	8:46	0.91	9:04	0.51	
12	2,722,406	0.241		7:59	0.41	8:17	0.49	8:24	0.69	8:43	0.43	
13	2,963,014	0.272										
14	3,235,469	0.260										
15	3,495,335	0.275		9:08	0.53	9:15	0.38	9:19	0.42	9:40	0.52	
16	3,770,762	0.208		9:51	0.39	9:59	0.53	10:03	0.57	10:22	0.31	
17	3,979,114	0.250		9:39	0.46	9:50	0.29	9:55	0.68	10:15	0.46	
18	4,228,744	0.230		7:12	0.48	7:36	0.46	7:41	0.70	7:56	0.46	
19	4,458,988	0.293		8:28	0.47	9:03	0.44	9:08	0.45	9:31	0.42	
20	4,751,620	0.259										
21	5,010,127	0.308										
22	5,317,688	0.209		10:53	0.34	11:02	0.41	11:07	0.42	11:24	0.40	
23	5,526,241	0.260		9:19	0.31	9:47	0.31	9:51	0.51	10:12	0.46	
24	5,786,315	0.283										
25	6,069,363	0.278										
26	6,347,133	0.238		10:01	0.34	10:08	0.31	10:13	0.40	10:31	0.34	
27	6,585,490	0.252										
28	6,837,674	0.300										
29	7,137,694	0.234		9:10	0.36	9:19	0.23	9:23	0.40	9:42	0.49	
30	7,371,918	0.278		8:02	0.48	8:11	0.51	8:16	0.41	8:51	0.41	
31	7,649,665	0.224										

Water Supervisor Signature: Karl Frink Date: 1/7/2026

NOTE: This form is to be completed and returned by the tenth of the following month to:  
OHA-Drinking Water Program, PO BOX 14450, Portland, OR 97293-0450