

# 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 Mar-22**

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			0.061				
2			0.043				
3			0.031				
4			0.031				
5			0.045				
6			0.035				
7			0.032				
8			0.032				
9			0.045				
10			0.031				
11			0.031				
12			0.031				
13			0.030				
14			0.030				
15			0.030				
16			0.030				
17			0.031				
18			0.003				
19			0.030				
20			0.032				
21			0.033				
22			0.035				
23			0.033				
24			0.032				
25			0.031				
26			0.031				
27			0.031				
28			0.031				
29			0.031				
30			0.031				
31			0.031				

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of turbidity readings ≤ 1 NTU?	<b>Yes / No</b>	CT's met everyday? (see back)	All Cl <sup>2</sup> residual at entry point ≥ 0.2 mg/l?
All turbidity readings ≤ 5 NTU?	<b>Yes / No<sup>4</sup></b>	<b>Yes / No</b>	<b>Yes / No</b>
<b>Notes:</b>		<b>PRINTED NAME:</b> Karl Frink	
		<b>SIGNATURE:</b> <i>Karl Frink</i>	<b>DATE:</b> 4/11/2022
		<b>PHONE #:</b> (541)466-3381	<b>CERT #:</b> 7037

<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:**    **Mar-22**

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/	0.68	83	56.44	8.6	7.40	48	YES	359
2/	0.82	83	68.06	12.0	7.31	38	YES	360
3/	1.03	83	85.49	12.3	7.29	37	YES	352
4/	1.03	83	85.49	12.2	7.47	40	YES	360
5/	1.35	83	112.05	11.8	7.52	46	YES	353
6/	1.86	83	154.38	312.0	7.96	53	YES	354
7/	0.84	83	69.72	12.0	7.67	42	YES	356
8/	0.72	83	59.76	11.9	7.47	41	YES	359
9/	1.74	83	144.42	13.5	8.84	67	YES	364
10/	1.20	83	99.60	11.6	7.25	40	YES	358
11/	1.40	83	116.20	11.5	7.44	44	YES	366
12/	1.36	83	112.88	11.7	7.36	42	YES	359
13/	1.32	83	109.56	11.7	7.48	44	YES	359
14/	1.33	83	110.39	11.8	7.31	42	YES	358
15/	1.05	83	87.15	12.2	7.43	40	YES	352
16/	1.18	83	97.94	12.2	7.21	37	YES	358
17/	1.10	83	91.30	.12.2	7.55	42	YES	357
18/	1.06	83	87.98	12.1	7.60	43	YES	352
19/	0.77	83	63.91	12.5	7.26	36	YES	348
20/	1.00	83	83.00	12.3	7.54	39	YES	354
21/	1.22	83	101.26	.11.7	7.23	41	YES	353
22/	0.94	83	78.02	12.0	7.20	36	YES	346
23/	0.91	83	75.53	12.6	7.26	36	YES	355
24/	0.85	83	70.55	12.5	7.29	36	YES	356
25/	0.77	83	63.91	12.0	7.32	37	YES	351
26/	1.85	83	153.55	12.6	7.38	42	YES	351
27/	1.75	83	145.25	12.9	7.43	43	YES	348
28/	1.86	83	154.63	12.6	7.51	42	YES	220
29/	1.14	83	94.62	12.1	7.45	39	YES	222
30/	1.22	83	101.26	12.5	7.47	41	YES	223
31/	1.31	83	108.73	12.0	7.62	44	YES	217

# 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: Mar-22

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	0.299		8:42	0.55	9:05	0.30	9:09	0.48	9:34	0.61	
2	298,657	0.286		8:48	0.33	8:48	0.39	8:52	0.29	9:27	0.45	
3	584,812	0.248		8:42	0.94	8:53	0.43	8:57	0.49	9:26	0.50	
4	833,161	0.225		9:30	0.99	9:41	0.68	9:45	0.77	10:10	0.74	
5	1,058,105	0.289										
6	1,347,594	0.304										
7	1,651,935	0.254		10:03	0.73	10:13	0.77	10:22	0.57	10:42	0.78	
8	1,905,518	0.210		8:03	0.63	8:17	0.52	8:24	0.63	8:57	0.51	
9	2,115,039	0.262		9:25	0.46	9:59	0.36	10:07	0.50	10:25	0.50	
10	2,376,580	0.256		9:27	0.37	10:01	0.37	10:09	0.24	10:28	0.47	
11	2,632,893	0.259		8:27	.4	8:54	0.52	9:02	0.63	9:30	0.23	
12	2,891,885	0.269										
13	3,161,342	0.299										
14	3,459,962	0.277		9:43	0.85	10:02	0.80	10:07	0.60	10:43	0.76	
15	3,737,072	0.211		8:43	0.86	9:04	0.38	9:10	0.83	9:51	0.91	
16	3,948,232	0.296		8:47	0.68	9:10	0.55	9:15	0.50	9:35	0.64	
17	4,243,891	0.284		9:02	0.68	9:11	0.56	9:17	0.73	9:46	0.56	
18	4,527,608	0.215		8:14	0.63	8:26	0.56	8:34	0.59	8:59	0.53	
19	4,742,997	0.251										
20	4,994,404	0.324										
21	5,318,327	0.263		9:37	0.60	9:46	0.40	9:52	0.66	10:31	0.61	
22	5,581,738	0.238		8:29	0.63	9:39	0.63	9:45	0.58	10:10	0.61	
23	5,819,522	0.286		9:32	0.32	9:43	0.47	9:49	0.27	10:07	0.42	
24	6,105,634	0.271		9:16	0.51	9:55	0.44	10:01	0.45	10:20	0.50	
25	6,376,330	0.237		8:06	0.36	8:17	0.37	8:23	0.45	8:42	0.49	
26	6,613,060	0.294										
27	6,907,136	0.315										
28	7,221,765	0.254		9:37	1.37	10:16	1.36	10:20	1.40	10:36	1.37	
29	7,475,580	0.270		9:34	0.58	10:07	0.67	10:15	1.08	10:35	1.03	
30	7,745,670	0.285		9:13	0.81	10:06	0.71	10:13	1.12	10:27	1.00	
31	8,030,659	0.216		9:27	0.47	9:47	0.66	9:52	0.91	10:11	0.60	

Water Supervisor Signature: Karl Frink      Date: 4/11/2022

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