

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 Aug-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 ¹ (NTU)
1			0.036				
2			0.036				
3			0.036				
4			0.036				
5			0.035				
6			0.035				
7			0.035				
8			0.034				
9			0.035				
10			0.035				
11			0.035				
12			0.034				
13			0.035				
14			0.035				
15			0.034				
16			0.034				
17			0.034				
18			0.034				
19			0.035				
20			0.034				
21			0.033				
22			0.033				
23			0.034				
24			0.034				
25			0.034				
26			0.034				
27			0.033				
28			0.033				
29			0.035				
30			0.033				
31			0.032				

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) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl ⁻ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes: 		PRINTED NAME: Karl Frink	
		SIGNATURE: <i>Karl Frink</i>	DATE: 9/7/2022
		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:** **Aug-22**

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/	0.55	83	45.65	23.9	7.60	18	YES	350
2/	1.20	83	99.60	23.7	7.67	20	YES	325
3/	1.19	83	98.77	23.6	7.65	20	YES	324
4/	1.21	83	100.43	23.4	7.71	21	YES	319
5/	1.33	83	110.39	22.8	7.73	23	YES	321
6/	1.16	83	96.28	22.6	7.73	22	YES	328
7/	1.04	83	86.32	23.0	7.79	20	YES	361
8/	1.27	83	105.41	22.3	7.72	23	YES	393
9/	1.26	83	104.58	22.0	7.74	23	YES	321
10/	1.10	83	91.30	22.0	7.73	22	YES	330
11/	0.96	83	79.68	21.8	7.72	23	YES	328
12/	1.13	83	93.79	21.9	7.73	24	YES	352
13/	1.16	83	96.28	21.8	7.76	24	YES	369
14/	0.95	83	78.85	22.0	7.83	23	YES	360
15/	1.20	83	99.60	21.7	7.74	24	YES	362
16/	0.87	83	72.21	21.8	7.72	23	YES	373
17/	1.07	83	88.81	22.0	7.71	22	YES	322
18/	1.06	83	87.98	22.2	7.69	21	YES	356
19/	1.00	83	83.00	22.0	7.67	21	YES	390
20/	1.09	83	90.47	22.2	7.65	21	YES	385
21/	1.01	83	83.83	22.1	7.68	21	YES	391
22/	0.99	83	82.17	22.1	7.67	21	YES	355
23/	1.06	83	87.98	22.5	7.73	22	YES	355
24/	1.09	83	90.47	22.3	7.70	22	YES	375
25/	1.00	83	83.00	22.3	7.68	21	YES	356
26/	0.96	83	79.68	22.5	7.68	21	YES	383
27/	1.04	83	86.32	22.6	7.73	22	YES	380
28/	0.88	83	73.04	21.8	7.76	23	YES	386
29/	1.00	83	83.00	21.3	7.79	24	YES	388
30/	1.10	83	91.30	21.4	7.80	25	YES	398
31/	1.04	83	86.32	21.8	7.78	24	YES	362

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: Aug-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	0.549		9:48	0.65	10:00	0.43	10:08	0.36	10:29	0.55	
2	548,828	0.538		9:46	0.32	9:52	0.60	9:58	1.05	10:28	0.92	
3	1,086,864	0.557		9:03	0.72	9:15	0.91	9:20	1.06	9:40	1.05	
4	1,644,328	0.546		9:23	0.78	9:40	0.64	9:46	1.06	10:08	1.18	
5	2,190,710	0.507		9:07	0.85	9:26	0.61	9:32	0.79	9:49	1.07	
6	2,697,508	0.473										
7	3,170,062	0.540										
8	3,710,030	0.535		9:58	0.53	10:18	0.99	10:24	0.91	10:42	0.57	
9	4,245,404	0.551		9:14	0.53	9:33	1.16	9:39	1.22	10:06	0.72	
10	4,796,002	0.430		9:13	0.71	9:32	0.69	9:39	0.69	10:00	0.66	
11	5,226,268	0.570		8:52	0.56	9:16	0.61	9:21	0.84	9:43	0.99	
12	5,796,337	0.505		9:42	0.51	10:06	0.71	9:47	0.71	10:32	0.67	
13	6,301,100	0.442										
14	6,743,519	0.526										
15	7,269,323	0.534		8:58	0.62	9:13	0.79	9:17	1.02	9:35	0.80	
16	7,803,242	0.557		8:30	0.58	8:41	0.77	8:45	0.92	9:45	0.52	
17	8,360,511	0.559		8:55	0.60	9:35	0.52	9:39	0.69	9:58	0.60	
18	8,919,797	0.559		9:08	0.49	9:16	0.59	9:21	0.90	9:49	0.76	
19	9,478,575	0.325		9:32	0.58	9:39	0.64	9:47	0.79	9:58	0.74	
20	9,803,544	0.524										
21	10,327,502	0.578										
22	10,905,088	0.438		9:00	0.68	9:11	0.78	9:18	0.72	9:40	0.71	
23	11,342,669	0.500		9:06	0.58	8:44	0.33	8:50	0.62	9:12	0.71	
24	11,842,567	0.566		7:58	0.42	8:31	0.43	8:36	0.86	8:57	0.82	
25	12,408,448	0.556		8:27	0.50	9:03	0.83	9:10	0.87	9:38	0.83	
26	12,964,885	0.530		8:55	0.60	9:12	0.36	8:20	0.79	9:48	0.84	
27	13,495,156	0.540										
28	14,035,444	0.446										
29	14,481,532	0.536		9:48	0.63	9:54	0.47	10:02	0.61	10:15	0.55	
30	15,017,149	0.534		8:55	0.31	9:18	0.34	9:24	0.73	9:53	0.70	
31	15,551,617	0.556		8:48	0.54	8:59	0.51	9:04	0.83	9:24	0.71	

Water Supervisor Signature: Karl Frink Date: 9/7/2022

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