

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 Sep-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			0.032				
2			0.032				
3			0.032				
4			0.034				
5			0.033				
6			0.032				
7			0.032				
8			0.033				
9			0.033				
10			0.031				
11			0.032				
12			0.031				
13			0.032				
14			0.031				
15			0.031				
16			0.030				
17			0.031				
18			0.030				
19			0.030				
20			0.031				
21			0.031				
22			0.032				
23			0.031				
24			0.031				
25			0.031				
26			0.031				
27			0.030				
28			0.032				
29			0.031				
30			0.031				
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) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl ² residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes:	PRINTED NAME: Karl Frink		DATE: 10/5/2022
	SIGNATURE: <i>Karl Frink</i>		CERT #: 7037
	PHONE #: (541)466-3381		

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:** **Sep-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/	1.00	83	83.00	21.8	7.77	23	YES	330
2/	0.94	83	78.02	21.9	7.77	23	YES	326
3/	0.96	83	79.68	21.8	7.80	23	YES	326
4/	0.88	83	73.04	21.7	8.02	26	YES	365
5/	0.85	83	70.55	21.5	7.80	23	YES	332
6/	1.00	83	83.00	21.2	7.82	24	YES	383
7/	0.80	83	66.40	21.2	7.77	23	YES	373
8/	1.14	83	94.62	20.9	7.85	27	YES	389
9/	1.10	83	91.30	20.6	7.88	27	YES	387
10/	0.92	83	76.36	20.6	7.86	26	YES	368
11/	0.73	83	60.59	20.4	7.83	25	YES	354
12/	0.87	83	72.21	20.7	7.79	25	YES	359
13/	0.96	83	79.68	20.3	7.80	25	YES	347
14/	1.05	83	87.15	19.7	7.78	28	YES	341
15/	1.21	83	100.43	19.6	7.72	28	YES	377
16/	1.23	83	102.09	19.6	7.77	28	YES	372
17/	1.53	83	126.99	19.6	7.92	31	YES	359
18/	1.38	83	114.54	19.0	7.83	29	YES	361
19/	1.44	83	119.52	18.6	7.85	32	YES	371
20/	1.15	83	95.45	18.5	7.87	31	YES	370
21/	1.00	83	83.00	18.4	7.85	30	YES	367
22/	1.05	83	87.15	19.0	8.04	31	YES	368
23/	1.11	83	92.13	18.0	7.88	31	YES	363
24/	1.04	83	86.32	18.1	7.87	31	YES	370
25/	1.13	83	93.79	18.1	7.76	29	YES	361
26/	1.22	83	101.26	18.2	7.87	31	YES	363
27/	1.03	83	85.49	18.5	7.87	31	YES	372
28/	1.12	83	92.96	18.8	8.03	33	YES	372
29/	1.21	83	100.43	18.5	7.91	32	YES	354
30/	1.15	83	95.45	18.0	7.90	32	YES	362
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: Sep-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	0.517		8:41	0.36	8:52	0.82	8:57	0.79	9:22	0.63	
2	516,701	0.543		9:02	0.57	9:13	0.54	9:29	0.37	9:38	0.37	
3	1,059,821	0.361										
4	1,420,676	0.522										
5	1,942,897	0.602										
6	2,545,201	0.429		9:36	0.31	10:00	0.56	10:07	0.52	10:53	0.57	
7	2,973,708	0.477		7:13	0.55	7:44	0.30	7:51	0.45	8:07	0.42	
8	3,450,606	0.466		8:35	0.31	9:05	0.64	9:11	0.77	9:31	0.71	
9	3,916,381	0.492		9:00	0.49	9:17	0.36	9:23	0.32	9:41	0.75	
10	4,408,723	0.549										
11	4,957,448	0.419										
12	5,376,659	0.460		8:27	0.35	8:45	0.77	8:52	0.71	9:14	0.52	
13	5,837,075	0.488		8:14	0.36	8:34	0.29	8:42	0.34	9:02	0.32	
14	6,324,622	0.309		9:12	0.21	10:09	0.32	10:14	0.72	10:29	0.37	
15	6,633,950	0.550		7:58	0.64	8:18	0.62	8:27	0.65	9:24	0.87	
16	7,183,622	0.399		7:20	0.84	8:11	1.05	8:15	1.13	8:35	0.97	
17	7,582,975	0.492										
18	8,075,441	0.423										
19	8,498,354	0.507		9:56	0.95	10:18	1.10	10:25	1.11	10:50	0.78	
20	9,005,649	0.393		8:27	0.85	8:37	0.72	8:48	0.87	9:23	0.50	
21	9,398,848	0.320		9:00	0.46	9:40	0.78	9:45	0.79	10:02	0.73	
22	9,718,851	0.558		9:28	0.60	9:50	0.50	9:57	0.56	10:15	0.52	
23	10,277,198	0.351		9:12	0.56	9:36	0.86	9:43	0.90	10:03	0.88	
24	10,627,736	0.328										
25	10,955,702	0.563										
26	11,518,487	0.372		8:30	0.56	8:53	0.97	9:00	1.00	9:28	0.83	
27	11,890,363	0.347		9:01	0.52	9:20	0.60	9:26	0.62	9:49	0.36	
28	12,237,578	0.509		8:05	0.61	8:15	0.54	8:21	0.51	8:46	0.76	
29	12,746,522	0.295		8:13	0.42	8:47	0.93	8:53	0.53	9:18	0.83	
30	13,041,801	0.219		8:37	0.76	9:06	0.65	9:11	0.64	9:28	0.68	
31	13,260,369											

Water Supervisor Signature: Karl Frink Date: 10/5/2022

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