

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			0.031				
2			0.032				
3			0.030				
4			0.030				
5			0.030				
6			0.030				
7			0.030				
8			0.030				
9			0.030				
10			0.030				
11			0.031				
12			0.030				
13			0.030				
14			0.030				
15			0.033				
16			0.030				
17			0.029				
18			0.030				
19			0.029				
20			0.030				
21			0.029				
22			0.030				
23			0.031				
24			0.031				
25			0.032				
26			0.033				
27			0.033				
28			0.034				
29			0.034				
30			0.032				
31			0.032				

Slow Sand/Membrane/DE Filtration/Unfiltered		Montly Summary (Answer Yes or No)	
95% of turbidity readings \leq 1 NTU? All turbidity readings \leq 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 \geq 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes:	PRINTED NAME: Karl Frink		DATE: 11/7/2022
	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/	0.89	83	73.87	17.8	7.76	30	YES	370
2/	1.54	83	127.82	18.4	8.13	36	YES	349
3/	1.30	83	107.90	18.2	7.96	32	YES	367
4/	1.53	83	126.99	18.3	7.97	33	YES	358
5/	1.59	83	131.97	17.9	7.96	35	YES	355
6/	1.41	83	117.03	17.5	7.95	35	YES	361
7/	1.58	83	131.14	17.0	7.97	35	YES	358
8/	1.60	83	132.80	17.1	7.97	35	YES	350
9/	1.53	83	126.99	17.2	7.94	35	YES	354
10/	1.46	83	121.18	17.0	7.89	34	YES	366
11/	1.43	83	118.69	18.1	8.17	36	YES	356
12/	1.59	83	131.97	17.6	8.02	35	YES	350
13/	1.44	83	119.52	16.9	7.96	37	YES	351
14/	1.53	83	126.99	16.6	7.96	37	YES	345
15/	1.23	83	102.09	17.7	8.22	38	YES	356
16/	1.41	83	117.03	16.9	8.06	39	YES	352
17/	1.64	83	136.12	16.4	8.04	40	YES	356
18/	1.70	83	141.10	16.6	8.05	40	YES	360
19/	1.40	83	116.20	16.1	8.05	38	YES	363
20/	1.46	83	121.18	16.3	8.05	39	YES	347
21/	1.31	83	108.73	16.1	8.03	38	YES	347
22/	1.34	83	111.22	16.0	7.99	36	YES	357
23/	1.44	83	119.52	15.4	7.98	39	YES	354
24/	0.67	83	55.61	14.5	7.96	39	YES	356
25/	1.57	83	130.31	14.6	8.03	45	YES	349
26/	1.51	83	125.33	13.9	8.07	49	YES	348
27/	1.66	83	137.78	13.3	8.13	52	YES	353
28/	1.64	83	136.12	13.3	8.12	52	YES	350
29/	1.52	83	126.16	13.2	8.04	49	YES	349
30/	1.48	83	122.84	13.5	8.01	49	YES	356
31/	1.44	83	119.52	14.6	7.95	43	YES	356

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: _____

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	0.379											
2	379,024	0.415											
3	794,118	0.368		9:38	0.56	9:48	0.49	9:57	0.93	10:15	0.63		
4	1,161,641	0.377		8:24	0.52	8:42	0.47	8:52	0.94	9:09	0.97		
5	1,538,438	0.330		9:22	0.72	9:33	0.84	9:40	0.91	9:58	0.98		
6	1,868,796	0.322		8:53	0.70	9:04	1.07	9:10	1.17	9:29	0.63		
7	2,191,078	0.273		9:31	0.52	9:40	1.27	9:46	0.95	10:05	0.46		
8	2,463,646	0.324											
9	2,787,641	0.326											
10	3,113,924	0.339		9:03	1.13	9:12	1.23	9:17	0.87	9:32	1.06		
11	3,453,160	0.387		9:22	0.92	9:41	1.19	9:45	0.90	10:14	1.03		
12	3,839,983	0.478		8:24	0.81	8:34	0.80	8:38	1.13	8:55	0.96		
13	4,317,776	0.326		9:14	0.97	9:20	0.84	9:24	1.08	9:42	1.03		
14	4,643,388	0.290		8:07	0.96	8:24	1.28	8:29	1.02	8:53	1.17		
15	4,933,031	0.397											
16	5,329,737	0.354											
17	5,683,568	0.333		9:12	0.94	9:26	1.02	9:33	1.29	9:55	1.26		
18	6,016,458	0.385		8:27	1.03	8:56	1.06	9:02	1.36	9:26	1.18		
19	6,400,987	0.361		9:57	0.95	10:06	0.93	10:15	1.17	10:29	1.14		
20	6,762,403	0.301		9:00	0.90	9:11	1.03	9:18	1.13	9:39	1.03		
21	7,063,389	0.325		9:03	0.99	9:15	1.00	9:22	0.93	9:44	0.99		
22	7,388,549	0.298											
23	7,686,399	0.297											
24	7,983,241	0.284		10:05	0.99	10:15	1.03	10:20	1.00	10:39	0.98		
25	8,267,094	0.282		9:08	0.73	9:16	1.02	9:23	0.91	9:45	0.81		
26	8,548,854	0.330		9:29	0.63	9:38	1.09	9:43	0.91	10:07	0.80		
27	8,878,868	0.280		8:47	0.61	8:57	1.13	9:02	0.98	9:31	0.71		
28	9,158,481	0.272		8:03	0.85	8:12	1.04	8:18	0.89	8:51	0.86		
29	9,430,607	0.311											
30	9,741,248	0.299											
31	10,040,182	0.277		9:20	0.80	9:48	0.92	9:52	0.94	10:40	0.84		

Water Supervisor Signature: Karl Frink Date: 11/7/2022

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