

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 Feb-23

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			0.027				
2			0.027				
3			0.026				
4			0.027				
5			0.026				
6			0.025				
7			0.027				
8			0.026				
9			0.028				
10			0.026				
11			0.027				
12			0.026				
13			0.026				
14			0.026				
15			0.026				
16			0.027				
17			0.026				
18			0.038				
19			0.027				
20			0.028				
21			0.026				
22			0.029				
23			0.027				
24			0.027				
25			0.034				
26			0.027				
27			0.027				
28			0.027				
29							
30							
31							

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: 3/8/2023
	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:** **Feb-23**

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/	1.06	83	87.98	10.0	7.79	51	YES	217
2/	0.99	83	82.17	10.4	7.74	50	YES	211
3/	1.06	83	87.98	10.6	7.79	51	YES	189
4/	1.06	83	87.98	11.1	7.97	51	YES	184
5/	0.78	83	64.74	11.6	7.58	43	YES	186
6/	0.97	83	80.51	11.7	7.79	47	YES	194
7/	0.85	83	70.55	11.7	7.71	47	YES	185
8/	0.77	83	63.91	11.5	7.68	44	YES	186
9/	1.09	83	90.47	11.1	8.05	54	YES	215
10/	0.76	83	63.08	11.6	7.54	43	YES	212
11/	0.79	83	65.57	11.9	7.58	43	YES	213
12/	0.80	83	66.40	11.3	7.52	44	YES	195
13/	0.79	83	65.57	11.0	7.51	43	YES	186
14/	0.70	83	58.10	11.1	7.66	44	YES	184
15/	0.90	83	74.70	10.6	7.80	50	YES	185
16/	1.04	83	86.32	10.3	7.85	53	YES	187
17/	0.82	83	68.06	10.3	7.73	50	YES	185
18/	0.83	83	68.89	11.5	8.11	54	YES	184
19/	0.69	83	57.27	11.0	7.67	44	YES	213
20/	0.58	83	48.14	11.3	7.56	43	YES	193
21/	1.05	83	87.15	11.5	7.48	43	YES	184
22/	0.67	83	55.61	12.1	8.03	48	YES	210
23/	1.16	83	96.28	10.6	7.87	53	YES	184
24/	1.16	83	96.28	10.1	8.21	62	YES	186
25/	1.27	83	105.41	9.5	8.72	79	YES	215
26/	0.71	83	58.93	10.1	7.91	53	YES	209
27/	1.01	83	83.83	10.3	8.16	58	YES	211
28/	1.02	83	84.66	10.4	8.20	58	YES	214
29/								
30/								
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: Feb-23

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	0.293		9:40	0.80	10:07	0.42	
2	292,736	0.283		9:50	0.72	9:57	0.68	10:01	0.78	10:18	0.78	
3	575,955	0.276		9:02	0.77	9:14	0.71	9:19	0.77	9:39	0.80	
4	851,860	0.304										
5	1,156,345	0.313										
6	1,469,652	0.298		9:29	0.89	9:53	0.82	10:00	0.71	10:20	0.58	
7	1,767,621	0.296		9:47	0.78	10:03	0.69	10:12	0.69	10:51	0.68	
8	2,063,202	0.216		9:41	0.73	10:06	0.69	10:13	0.69	10:39	0.72	
9	2,279,387	0.311		8:12	0.62	8:39	0.77	8:47	0.70	9:10	0.76	
10	2,590,698	0.281		9:27	0.64	9:40	0.72	9:48	0.82	10:12	0.75	
11	2,871,634	0.301										
12	3,173,051	0.302										
13	3,474,633	0.291		9:12	0.56	9:25	0.58	9:30	0.61	9:55	0.61	
14	3,765,594	0.289		8:52	0.70	9:04	0.57	9:09	0.68	9:32	0.61	
15	4,054,609	0.297		8:24	0.45	8:34	0.56	8:39	0.55	9:12	0.62	
16	4,351,566	0.309		8:04	0.53	8:13	0.53	8:20	0.75	8:44	0.63	
17	4,660,331	0.226		9:34	0.71	9:53	0.64	9:48	0.57	10:08	0.63	
18	4,886,677	0.259										
19	5,145,461	0.295										
20	5,440,441	0.320										
21	5,760,697	0.208		9:42	0.42	9:55	0.42	10:05	0.30	10:34	0.47	
22	5,969,098	0.290		9:03	0.43	9:16	0.34	9:23	0.66	9:43	0.41	
23	6,258,655	0.307		8:12	0.38	8:24	0.41	8:30	0.65	8:50	0.28	
24	6,565,495	0.235		9:20	0.45	9:30	0.52	9:37	0.47	9:57	0.41	
25	6,800,642	0.255										
26	7,056,120	0.317										
27	7,373,230	0.301		9:16	0.96	10:29	0.88	10:35	1.24	10:55	0.47	
28	7,673,792	0.222		9:28	1.22	9:39	0.92	9:44	1.16	10:01	0.66	
29	7,895,938											
30	0											
31	0											

Water Supervisor Signature: Karl Frink Date: 3/8/2023

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