

OHA - Drinking Water Services - Surface Water Quality Data Form
Unfiltered System

County: Grant
Month/Year: 25-Jan
WTP : TP - A

System Name: Canyon City ID#: 41 00165							
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day ¹ [NTU]
1							0.06
2							0.08
3							0.08
4							0.08
5							0.10
6							0.11
7							0.10
8							0.08
9							0.10
10							0.11
11							0.08
12							0.12
13							0.11
14							0.09
15							0.10
16							0.12
17							0.12
18							0.10
19							0.10
20							0.09
21							0.10
22							0.10
23							0.13
24							0.16
25							0.23
26							0.17
27							0.20
28							0.17
29							0.22
30							0.14
31							0.12

Unfiltered		Monthly Summary (Answer Yes or No)	
All daily turbidity readings ≤ 5 NTU? <u>Yes</u> / No		CT's met everyday? (see back) <u>Yes</u> / No	All Cl2 residual at entry point ≥ 0.2 mg/l? <u>Yes</u> / No
Notes:		Tim Madden	
		SIGNATURE: 	25-Jan
		(541)620-0365	D-09145

¹ One reading per day allowed.

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WTP- :A

System Name: Canyon City ID#: 41 00165 Month/Year: 25-Jan

Disinfection *Giardia* Log
Inactiv: 1.0

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T) (79 or 106)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	minutes	C X T	[° C]		table/formula	Yes / No	[GPM]
1	1.3	106	137.8	5.7	9.40	128.4	YES	
2	1.05	106	111.3	9.6	9.50	98.4	YES	
3	1.3	106	137.8	7.5	9.50	117.4	YES	
4	1.17	106	124.0	7.4	9.50	116.4	YES	
5	1.06	106	112.4	8.7	9.20	93.8	YES	
6	1	106	106.0	7.4	9.20	102.0	YES	
7	0.96	106	101.8	7.9	9.20	98.0	YES	
8	1.14	106	120.8	6.9	9.40	115.7	YES	
9	0.97	106	102.8	8.2	8.90	86.0	YES	
10	0.99	106	104.9	8.7	8.30	66.8	YES	
11	0.96	106	101.8	8.3	8.20	66.0	YES	
12	0.94	106	99.6	8.7	9.20	92.5	YES	
13	0.98	106	103.9	8.2	8.90	86.1	YES	
14	1	106	106.0	6.0	7.90	69.5	YES	
15	0.99	106	104.9	7.7	6.90	43.3	YES	
16	1.02	106	108.1	9.6	4.60	18.2	YES	
17	0.96	106	101.8	8.2	6.70	38.9	YES	
18	0.84	106	89.0	7.6	6.00	31.4	YES	
19	0.87	106	92.2	7.3	4.80	21.7	YES	
20	0.82	106	86.9	7.9	6.70	39.1	YES	
21	0.92	106	97.5	7.4	6.20	34.4	YES	
22	0.94	106	99.6	6.9	6.30	36.8	YES	
23	1.11	106	117.7	9.1	5.70	26.7	YES	
24	1.01	106	107.1	8.9	5.00	21.4	YES	
25	0.94	106	99.6	8.7	3.60	14.2	YES	
26	1.13	106	119.8	5.2	3.20	15.5	YES	
27	1	106	106.0	5.4	3.40	16.1	YES	
28	0.95	106	100.7	6.8	3.90	17.2	YES	
29	0.7	106	74.2	6.5	3.60	15.6	YES	
30	0.77	106	81.6	7.2	3.80	16.0	YES	
31	0.83	106	88.0	7.0	3.20	13.8	YES	

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised Sep. 14, 2022 W.G.

Return by 10th of following month by email, fax, or mail to:
dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350