

OHA - Drinking Water Program -Turbidity Monitoring Report Form
Conventional or Direct Filtration

County: Douglas
Month/Year: Dec. 2023

System Name:	Canyonville, City Of		ID#: 41	00169	WTP: TP -		A
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	.034	X	X	.073	.036	.035	.073
2	X	X	X	X	X	X	off
3	X	X	X	X	X	X	off
4	X	X	X	.041	.037	.073	.073
5	X	X	X	.044	.032	.036	.044
6	.037	X	X	.041	.034	.033	.041
7	.041	X	X	X	X	X	.041
8	X	X	X	X	X	X	off
9	X	X	X	X	.051	.040	.051
10	.047	X	X	X	.052	.050	.052
11	.057	X	X	.089	.052	.049	.089
12	.046	.058	X	.079	.097	.047	.097
13	.047	.046	X	X	X	X	.047
14	X	X	X	X	X	X	off
15	.078	X	X	X	.047	.047	.078
16	.048	.046	.047	.047	.050	.052	.052
17	X	X	X	X	X	X	off
18	X	X	X	X	X	X	off
19	X	X	X	.058	.052	.048	.058
20	.052	.049	.051	.051	.049	.052	.052
21	X	X	X	X	X	X	off
22	X	X	X	X	X	X	off
23	X	X	X	.061	.052	.052	.061
24	.051	.050	.049	.051	.053	X	.053
25	.066	X	X	X	.059	.051	.066
26	.052	X	X	X	X	X	.052
27	X	X	X	X	X	.100	.100
28	.054	.063	.083	X	X	X	.083
29	X	X	X	X	.057	.056	.057
30	.050	.054	.055	.057	X	X	.057
31	X	X	X	X	X	X	off

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No
All daily turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / No		
All turbidity readings < IFE ² triggers <input checked="" type="checkbox"/> Yes / No		

Notes:	PRINTED NAME: BRIAN KELLY
	SIGNATURE: <i>Brian Kelly</i> DATE: 1-4-24
	PHONE #: (541) 560-2581 CERT #: D-5441 / T-6301

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))
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OHA - Drinking Water Program — Surface Water Quality Data Form

CITY OF CANYONVILLE ID OR4100169 WTP-: WTP-A Month/Year: Dec 2023

Required Log Inactivation: O

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT			Use tables	Yes / No	[GPM]
1/1432	1.93	21	40	8.7	7.49	33	yes	370
2/ off	 	 	 	 	 	 	 	off
3/ off	 	 	 	 	 	 	 	off
4/1017	1.94	21	40	10.6	7.46	25	yes	370
5/1031	2.27	21	47	13.9	7.20	26	yes	370
6/1039	2.04	21	42	14.0	7.24	25	yes	370
7/0100	1.94	21	40	13.1	7.31	25	yes	370
8/ off	 	 	 	 	 	 	 	off
9/1240	2.04	21	42	13.0	7.32	25	yes	370
10/1427	2.09	21	43	11.5	7.26	25	yes	370
11/1132	2.26	21	47	12.0	7.28	26	yes	370
12/1107	2.17	21	45	12.8	7.29	26	yes	370
13/0300	2.11	21	44	11.5	7.33	26	yes	370
14/ off	 	 	 	 	 	 	 	off
15/1402	2.05	21	43	11.9	7.28	25	yes	370
16/0949	1.95	21	41	8.80	7.57	33	yes	370
17/ off	 	 	 	 	 	 	 	off
18/ off	 	 	 	 	 	 	 	off
19/1052	1.96	21	41	10.3	7.53	25	yes	370
20/1130	2.21	21	46	11.9	7.57	26	yes	370
21/ off	 	 	 	 	 	 	 	off
22/ off	 	 	 	 	 	 	 	off
23/1122	2.17	21	45	12.1	7.59	26	yes	370
24/1153	2.09	21	42	7.9	7.61	41	yes	370
25/1240	2.16	21	45	9.0	7.64	41	yes	370
26/2415	2.35	21	49	10.7	7.59	26	yes	370
27/1921	2.11	21	44	11.2	7.55	26	yes	370
28/0811	2.15	21	45	11.7	7.54	26	yes	370
29/1355	2.10	21	44	11.7	7.54	25	yes	370
30/1110	2.24	21	47	11.9	7.55	26	yes	370
31/ off	 	 	 	 	 	 	 	off

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.