

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

County: Douglas
 Month/Year: Feb 2024
 WTP: TP - A

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	x	x	x	x	x	x	off
2	x	x	x	.124	.086	.086	.124
3	.091	.087	.089	.091	.089	.090	.091
4	x	x	x	x	x	x	off
5	x	x	x	x	x	.027	.027
6	.025	.024	.025	.013	x	x	.025
7	x	x	x	x	x	x	off
8	x	x	x	x	x	x	off
9	x	x	x	.020	.014	.012	.020
10	.013	.011	.014	.014	.014	.013	.014
11	x	x	x	x	x	x	off
12	x	x	x	.030	.014	.014	.030
13	.013	.012	.011	.012	x	x	.013
14	x	x	x	x	x	x	off
15	x	x	x	.023	.016	.014	.023
16	.016	.017	.014	x	x	x	.017
17	x	x	x	x	x	x	off
18	x	x	x	x	.015	.014	.015
19	.015	.012	.015	.013	x	x	.015
20	x	x	x	x	x	x	off
21	x	x	x	x	x	x	off
22	x	x	x	.015	.011	.013	.015
23	.015	.015	.014	x	.016	.015	.016
24	.016	x	x	x	x	x	.016
25	x	x	x	x	x	x	off
26	x	x	x	.015	.017	.018	.018
27	.018	x	x	x	x	x	.018
28	x	x	x	.033	.018	.022	.033
29	.024	.026	.032	.027	x	x	.032
30							
31							

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

Notes:

PRINTED NAME: BRIAN KELLY
 SIGNATURE: *Brian Kelly* DATE: 3-1-24
 PHONE #: (541) 580-2581 CERT #: 9-1-301

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))

OHA - Drinking Water Program — Surface Water Quality Data Form

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

Required Log Inactivation: 0

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/ off	X	X	X	X	X	X	X	off
2/ 1111	1.94	21	40	13.7	7.53	25	yes	370
3/ 10 19	1.85	21	38	10.6	7.68	30	yes	370
4/ off	X	X	X	X	X	X	X	off
5/ 1617	1.87	21	39	11.5	7.67	30	yes	370
6/ 0830	1.85	21	38	11.0	7.63	30	yes	370
7/ off	X	X	X	X	X	X	X	off
8/ off	X	X	X	X	X	X	X	off
9/ 0951	1.69	21	35	11.7	7.62	30	yes	370
10/ 09:10	1.88	21	39	10.95	7.64	30	yes	370
11/ off	X	X	X	X	X	X	X	off
12/ 1118	1.96	21	41	12.1	7.65	30	yes	370
13/ 0830	1.92	21	40	11.1	7.63	30	yes	370
14/ off	X	X	X	X	X	X	X	off
15/ 0952	1.98	21	41	11.6	7.67	30	yes	370
16/ 0640	1.845	21	38	11.49	7.59	25	yes	370
17/ off	X	X	X	X	X	X	X	off
18/ 1143	1.74	21	36	12.0	7.54	25	yes	370
19/ 1200	1.86	21	39	11.9	7.59	25	yes	370
20/ off	X	X	X	X	X	X	X	off
21/ off	X	X	X	X	X	X	X	off
22/ 1101	1.74	21	36	12.4	7.58	25	yes	370
23/ 1249	1.98	21	41	11.4	7.67	30	yes	370
24/ 2430	2.06	21	43	12.5	7.54	25	yes	370
25/ off	X	X	X	X	X	X	X	370
26/ 0857	1.91	21	40	12.7	7.53	25	yes	370
27/ 0200	1.85	21	38	10.9	7.58	25	yes	370
28/ 1207	1.86	21	39	11.2	7.58	25	yes	370
29/ 0900	1.94	21	40	11.4	7.60	30	yes	370
30/								
31/								

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