

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

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

System Name: Canyonville, City Of ID#: 41 00169

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	.020	.030	X	X	X	X	.030
2	.022	.026	.023	.022	.022	.023	.040
3	.020	.020	.030	.020	X	X	.030
4	X	X	X	X	X	X	off
5	X	X	X	.031	.026	.026	.038
6	.026	.025	.025	.029	.022	.023	.045
7	.025	.023	.024	.024	.023	.023	.030
8	.021	.022	.024	.027	.037	.037	.076
9	X	X	X	.030	.025	.027	.038
10	.029	.025	.025	.040	.040	.037	.080
11	X	X	X	.024	.024	.025	.079
12	.024	.026	.024	.025	.034	X	.076
13	X	X	X	X	.022	.025	.168
14	.022	.025	.023	.028	.025	.024	.046
15	.028	X	X	X	.026	.025	.031
16	.026	.042	X	X	X	X	.750
17	X	X	X	.027	.029	.029	.050
18	.028	.030	.049	.032	.029	.028	.085
19	.029	.033	.035	.048	.049	.044	.107
20	X	X	X	X	X	.033	.059
21	.036	.034	.038	.036	.033	.030	.049
22	.030	.032	.035	.029	.044	.045	.050
23	.039	X	X	.031	.029	.028	.040
24	.040	.020	.020	.030	.040	X	.040
25	X	X	X	.029	.031	.033	.064
26	.033	.034	X	X	X	.032	.049
27	.030	.030	X	X	X	X	.030
28	X	X	X	.040	X	.037	.057
29	.037	X	X	.035	.036	.036	.048
30	.038	.038	.040	.042	X	X	.047
31							

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 <sup>2</sup> triggers <input checked="" type="checkbox"/> Yes / No		

Notes:

PRINTED NAME: BRUN KELLY  
SIGNATURE: *BRUN KELLY* DATE: 7-3-24  
PHONE #: (541) 580-2581 CERT #: 9-25441

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 correspond to continuous readings' maximum. <sup>2</sup> 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: June 2024

Required Log Inactivation: 0

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT			Use tables	Yes / No	[GPM]
1/ 0700	1.59	21	33	16.3	7.55	16	yes	370
2/ 11:05	1.52	21	32	16.3	7.57	16	yes	370
3/ 1530	1.43	21	30	16.5	7.55	16	yes	370
4/ off								
5/ 0918	1.48	21	31	16.6	7.60	19	yes	370
6/ 1152	1.42	21	30	17.8	7.59	16	yes	370
7/ 1105	1.47	21	31	17.7	7.59	16	yes	370
8/ 0630	1.52	21	32	19.1	7.61	19	yes	370
9/ 1206	1.40	21	30	19.2	7.66	19	yes	370
10/ 0800	1.51	21	32	18.6	7.63	19	yes	370
11/ 1125	1.52	21	32	19.1	7.63	19	yes	370
12/ 0830	1.47	21	31	18.6	7.63	19	yes	370
13/ 0955	1.48	21	31	18.1	7.70	19	yes	370
14/ 1522	1.50	21	31	16.8	7.63	19	yes	370
15/ 1520	1.33	21	27	16.8	7.58	16	yes	370
16/ 0300	1.46	21	30	15.9	7.61	19	yes	370
17/ 0855	1.47	21	30	15.8	7.61	19	yes	370
18/ 1107	1.41	21	29	14.9	7.60	28	yes	370
19/ 0930	1.48	21	31	15.4	7.56	16	yes	370
20/ 1657	1.51	21	31	17.2	7.50	16	yes	370
21/ 1608	1.45	21	30	18.9	7.44	16	yes	370
22/ 0946	1.54	21	32	19.0	7.50	16	yes	370
23/ 1142	1.51	21	32	19.5	7.58	16	yes	370
24/ 1126	1.48	21	31	17.9	7.51	16	yes	370
25/ 1128	1.69	21	35	18.6	7.58	32	yes	500
26/ 1703	2.54	21	53	19.5	7.71	43	yes	500
27/ 0500	2.48	21	52	18.2	7.75	43	yes	500
28/ 1056	2.37	21	49	18.4	7.75	42	yes	500
29/ 1003	2.85	21	59	18.7	7.78	44	yes	500
30/ 1031	2.37	21	49	18.6	7.71	42	yes	500
31/								

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.