DW

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Douglas

Month/Year: Nov, 2025

System Name: City of Canyonville ID 41-00169 WTP : TP -

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	–	–	–	–	–	–	–
2	–	–	.043	–	–	–	.043
3	.139	.252	.193	.166	.121	.092	.252
4	.079	.109	–	–	–	.082	.109
5	.125	.041	.090	.051	.105	.131	.131
6	.131	.057	.039	.048	.030	.027	.131
7	.028	–	–	–	–	–	.028
8	–	–	–	–	–	–	–
9	–	–	.027	.020	.018	.017	.027
10	.018	.022	.023	.022	.039	.018	.039
11	.018	.019	.017	.033	–	–	.033
12	–	–	–	–	–	–	–
13	–	–	–	.019	.069	.024	.069
14	–	–	–	.019	.019	.017	.019
15	.017	.017	.018	.026	–	.021	.026
16	.018	.018	.017	.026	.021	.063	.063
17	–	–	–	–	–	–	–
18	–	–	–	–	–	–	–
19	–	–	.019	.021	.017	.019	.021
20	.017	.017	.015	.017	–	.017	.017
21	.017	.017	.015	.016	.026	–	.026
22	–	–	–	–	–	–	–
23	–	–	–	–	–	–	–
24	–	–	.031	.021	.018	.017	.031
25	.020	.016	.017	.017	–	.028	.028
26	.025	.028	.028	–	.017	–	.028
27	–	–	–	–	–	–	–
28	–	–	–	–	–	–	–
29	–	–	–	.042	.045	.045	.045
30	.033	.031	.042	.049	.050	–	.050
31							

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	(Yes) / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	(Yes) / No	(Yes) / No	(Yes) / No
All turbidity readings < IFE[2] triggers	(Yes) / No		

Notes:

PRINTED NAME: RAYMOND C PAGE

SIGNATURE: [signature] DATE: 12-2-25

PHONE #: (541) 621-1745 CERT #: 6358

[1] Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. [2] IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :	
Disinfection *Giardia* Log Inactive:	0

System Name: City of Canyonville ID#: 41 00169 Month/Year: NOV. 2025

Date / Time	Minimum Cl_2 Residual at 1st User (C) [3]	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? [3]	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1			Plant	off				
2 0906	1.29	21	27.39	12.8	7.36	23	yes	370
3 0829	1.37	21	28.77	11.99	7.35	23	yes	370
4 1731	1.4	21	29	12.39	7.39	23	Yes	275
5 1145	1.46	21	30.66	13.6	7.37	24	yes	275
6 11:56	1.53	21	32.13	12.17	7.13	24	yes	275
7 0021	1.47	21	30	12.69	7.11	24	Yes	275
8				Plant	off			
9 0641	1.25	21	26	13.1	7.2	23	Yes	275
10 0805	1.51	21	31.7	11.36	7.2	24	yes	275
11 1000	1.53	21	32	11.42	7.2	24	yes	300
12				Plant	off			
13 1041	1.48	21	31	12.03	7.17	24	Yes	275
14 0923	1.41	21	29	12.38	7.17	24	Yes	275
15 0728	1.47	21	30	11.42	7.15	24	Yes	275
16 0728	1.46	21	30	10.98	7.15	24	Yes	275
17				Plant	off			
18				Plant	off			
19 0655	1.26	21	26	11.4	7.16	23	Yes	275
20 0800	1.82	21	38	10.88	7.15	25	Yes	275
21 0803	1.35	21	28	10.11	7.23	23	Yes	300
22				Plant	off			
23				Plant	off			
24 0849	1.42	21	29	10.6	7.23	24	Yes	275
25 0843	1.63	21	34	9.43	7.15	32	Yes	275
26 0816	1.77	21	37	9.61	7.14	33	Yes	275
27				plant	off			
28				plant	off			
29 0928	1.65	21	35	10.69	7.17	24	yes	275
30 0902	1.81	21	38	8.54	7.22	33	yes	275
31								

[3] If Cl_2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

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