

OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Yamhill Conventional or Direct Filtration

System Name: Carlton, City of ID #: 4100171 WTP-: A

Month/Year March 2024

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	.04	.04	/	.02	.07	.06	.41
2	.07	/	/	.09	.10	.13	.19
3	.09	/	/	.11	.11	.12	.14
4	.11	.13	/	.15	.13	.13	.17
5	.13	.17	/	.15	.15	.16	.19
6	.14	.15	/	.17	.16	.16	.18
7	.16	.17	/	.17	.17	.17	.17
8	.17	.17	/	.19	.19	.18	.19
9	.18	.18	/	.19	.19	.19	.22
10	.20	.19	/	/	.20	.20	.21
11	.20	.21	/	.21	.08	.08	.80
12	.09	.07	/	.12	.07	.06	.11
13	.06	.07	/	.09	.07	.07	.09
14	.08	.08	.08	.10	.10	.10	.10
15	.10	.10	/	.10	.04	.04	.12
16	.04	.04	/	.05	.05	.05	.08
17	.05	/	/	.05	.05	.05	.09
18	.05	.06	/	.06	.05	.05	.10
19	.07	.06	/	/	.07	.06	.11
20	.06	.07	/	/	.08	.07	.15
21	.10	.11	/	/	/	/	.84
22	/	/	/	.02	/	.06	.33
23	.09	.02	.04	.02	.02	.02	.46
24	.02	/	/	/	.03	.02	.14
25	.02	/	/	.02	.06	.02	.12
26	.02	.02	/	.04	.02	.02	.78
27	.02	/	.02	/	.03	.02	.05
28	/	.02	/	.03	.04	.08	.09
29	.04	.02	/	/	.03	.04	.29
30	.03	.02	/	/	.03	.05	.09
31	.07	.04	/	/	.03	.03	.66

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of the 4-hour turbidity readings ≤ 0.3 NTU? Yes / No
 All the 4-hour turbidity readings ≤ 1 NTU? Yes / No
 All turbidity readings < IFE triggers? Yes / No²

CT's met everyday?
(see back)
 Yes / No

All Cl₂ residuals at entry point ≥ 0.2 m
 Yes / No

Notes:

PRINTED NAME: Bryan W. Burnham

SIGNATURE: *Bryan W Burnham*

DATE: 4-1-24

PHONE #: (503) 852-3104

CERT #: 6201

¹ Including continuous turbidity 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. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program – Surface Water Quality Data Form - *Giardia* Inactivation

System Name: Carlton, City of ID #: 4100171	WTP-: A	Month/Year: March 2024	Log Requirement (Circle One): 0.5 <input type="radio"/> 1.0 <input checked="" type="radio"/>
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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]	C X T	[° C]		Use tables	Yes / No	[GPM]
1 /2:00	1.3	72	93	10	7.2	47	YES	366
2 /9:00	1.3	72	93	10	7.2	47	YES	358
3 /9:00	1.3	72	93	10	7.2	47	YES	403
4 /9:00	1.3	72	93	9	7.5	55	YES	431
5 /9:00	1.5	72	108	10	7.4	51	YES	364
6 /9:00	1.4	72	100	10	7.2	48	YES	455
7 /9:30	1.4	72	100	9	7.4	54	YES	373
8 /10:30	1.4	72	100	9	7.4	54	YES	405
9 /10:00	1.4	72	100	9	7.4	54	YES	413
10 /10:00	1.4	72	100	9	7.4	54	YES	369
11 /11:30	1.4	72	100	9	7.4	54	YES	388
12 /3:30	1.4	72	100	10	7.4	51	YES	468
13 /11:30	1.4	72	100	9	7.2	51	YES	364
14 /11:00	1.5	72	108	9	7.4	54	YES	399
15 /2:00	1.3	72	93	11	7.6	51	YES	401
16 /9:00	1.3	72	93	11	7.6	52	YES	409
17 /9:00	1.4	72	100	11	7.6	52	YES	432
18 /10:30	1.4	72	100	11	7.6	52	YES	1449
19 /12:00	1.4	72	100	11	7.6	52	YES	366
20 /9:00	1.4	72	100	11	7.6	52	YES	465
21 /11:00	1.4	72	100	11	7.6	52	YES	413
22 /10:00	1.2	72	86	11	7.6	51	YES	362
23 /9:00	1.5	72	108	11	7.5	50	YES	381
24 /9:00	1.5	72	108	11	7.5	50	YES	358
25 /11:30	1.6	72	115	11	7.4	51	YES	415
26 /11:30	1.4	72	100	11	7.4	48	YES	430
27 /11:30	1.5	72	108	10	7.3	49	YES	425
28 /9:30	1.2	72	86	10	7.2	47	YES	394
29 /9:30	1.5	72	108	10	7.3	49	YES	399
30 /9:00	1.5	72	108	10	7.3	49	YES	366
31 /9:00	1.5	72	100	11	7.3	46	YES	418

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

Revised January 2014