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 November 2025**

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	OFF		.09	.16	.28	.32
2	.18		.06	.06	.04	.05	.15
3	.03		.08	.04	.05		.11
4		.05	.04	.05	.05	.02	.09
5			.08	.05	.03	.05	.09
6	.06	.04		.02	.04	.06	.77
7	.08	.32	.11	.05	.03	.04	.69
8	.03	.04	.03		.03	.03	.42
9	.02	.08	.04	.02	.03	.04	.23
10	.02		.06	.04	.05	.02	.09
11	.02			.03	.03	.02	.13
12	.05	.02		.04	.02		.11
13	.05	.05		.06	.07		.12
14	.02			.03	.03	.03	.16
15	.02	.02		.03	.03	.03	.16
16			.03	.03	.03	.03	.12
17	.04			.04	.05	.02	.15
18			.03	.10	.02	.02	.18
19	.03			.03	.02		.19
20			.02	.02	.04		.11
21		.03	.03	.03		.03	.26
22	.04			.06	.04	.04	.24
23	.03			.05	.04	.03	.29
24	.03			.04	.05	.03	.26
25			.05	.06	.04		.24
26			.04		.07	.04	.47
27			.07	.08	.06	.04	.78
28				.07	.04		.24
29			.06	.04		.04	.43
30			.07	.05	.04	.04	.44
31							

Conventional or Direct Filtration

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?[2] **Yes / No**[3]

Monthly Summary (Answer Yes or No)

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

All Cl_2 residuals at entry point ≥ 0.2 m **Yes / No**

Notes:

PRINTED NAME: Bryan W. Burnham

SIGNATURE: Bryan W Burnham **DATE: 12/4/2025**

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: November 2025** **Log Requirement (Circle One): 0.5 / 1.0**

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]		Use tables	Yes / No	[GPM]
1 /9:00	1.7	72	122	10	7.4	52	YES	257
2 /9:00	1.7	72	122	11	7.4	49	YES	262
3 /9:30	1.6	72	115	11	7.5	49	YES	1,970
4 /11:30	1.8	72	129	11	7.4	50	YES	274
5 /3:00	1.8	72	129	11	7.4	50	YES	246
6 /9:00	1.6	72	115	11	7.6	53	YES	266
7 /10:00	1.5	72	108	13	7.5	43	YES	243
8 /12:00	1.5	72	108	14	7.2	36	YES	236
9 /9:00	1.4	72	100	14	7.2	36	YES	263
10 /7:30	1.8	72	129	13	7.2	39	YES	235
11 /7:30	1.5	72	108	11	7.3	46	YES	249
12 /9:30	1.5	72	108	11	7.5	50	YES	252
13 /11:30	1.6	72	115	11	7.3	45	YES	307
14 /9:30	1.8	72	129	12	7.6	51	YES	299
15 /9:00	1.9	72	136	12	7.5	49	YES	305
16 /9:00	1.9	72	136	12	7.4	47	YES	237
17 /10:30	2.0	72	144	12	7.3	46	YES	299
18 /9:30	1.9	72	136	11	7.3	48	YES	272
19 /9:00	1.5	72	108	10	7.2	48	YES	283
20 /9:00	1.9	72	136	10	7.2	50	YES	228
21 /10:00	1.6	72	115	10	7.4	51	YES	241
22 /9:30	1.4	72	100	9	7.3	53	YES	227
23 /9:30	1.4	72	100	9	7.3	53	YES	225
24 /9:30	1.4	72	100	9	7.3	53	YES	232
25 /11:00	1.9	72	136	9	7.2	53	YES	264
26 /9:30	1.8	72	129	9	7.3	55	YES	247
27 /10:00	1.8	72	129	10	7.3	51	YES	243
28 /9:00	1.8	72	129	10	7.3	51	YES	252
29 /10:30	1.8	72	129	10	7.3	51	YES	240
30 /9:30	1.9	72	136	9	7.5	59	YES	224
31 /								

[3] If Cl_2 at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.