

**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 2026

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	OFF	.06	/	.09	.06	.06	.25
2	/	/	.08	.08	.10	/	.17
3	.08	/	/	.09	.10	.15	.24
4	/	.10	/	/	.06	.06	.13
5	/	.07	/	.10	.07	.07	.15
6	/	.10	.09	.10	.08	/	.16
7	/	/	/	.10	.09	/	.22
8	.10	.07	/	.10	.09	.10	.16
9	/	/	/	.09	.09	/	.25
10	.10	.07	/	.10	.08	.08	.21
11	/	.08	/	.09	.09	.08	.84
12	/	.15	/	.81	.13	.08	.81
13	/	/	.09	/	.12	.08	.18
14	.14	/	/	.17	.09	/	.20
15	/	.13	/	.12	.11	.11	.20
16	/	/	.21	.11	.12	/	.58
17	/	.10	/	.06	.06	.03	.33
18	/	.07	/	.04	.08	.03	.23
19	/	.06	.03	/	.06	.03	.25
20	/	.12	.13	/	.06	.03	.30
21	/	/	/	.03	/	/	.23
22	.03	.03	/	.07	.03	/	.19
23	.06	.03	/	.07	.03	.06	.17
24	/	.10	/	.06	.03	.05	.23
25	/	.08	/	.06	.04	.08	.18
26	/	.10	.04	/	.04	.04	.19
27	/	/	.04	.04	/	/	.20
28	.08	/	.07	.04	.10	/	.23
29	.06	/	/	.08	.09	.07	.18
30	.04	/	/	.05	.06	.06	.20
31	/	/	.08	.04	/	.07	.19

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of the 4-hour turbidity readings \leq 0.3 NTU? Yes / No
 All the 4-hour turbidity readings \leq 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 \geq 0.2 m
Yes / No

Notes:

PRINTED NAME: Bryan W. Burnham

SIGNATURE: 

DATE: 4/1/2026

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 Eff. (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 2026** Log Requirement (Circle One): 0.5 / 1.0

S

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 /10:00	1.5	72	108	11	7.4	48	YES	216
2 /10:00	1.5	72	108	11	7.4	48	YES	195
3 /10:00	1.5	72	108	10	7.6	55	YES	218
4 /10:00	1.4	72	100	11	7.5	50	YES	204
5 /3:00	1.4	72	100	11	7.5	50	YES	225
6 /9:00	1.6	72	115	10	7.5	55	YES	215
7 /2:00	1.4	72	100	11	7.4	48	YES	226
8 /2:00	1.4	72	100	11	7.4	48	YES	218
9 /2:00	1.4	72	100	11	7.4	48	YES	208
10 /8:00	1.5	72	108	11	7.6	52	YES	239
11 /12:00	1.8	72	129	11	7.5	52	YES	222
12 /10:00	1.5	72	108	11	7.5	50	YES	215
13 /10:00	1.5	72	108	11	7.6	52	YES	185
14 /9:30	1.5	72	108	11	7.4	48	YES	154
15 /9:30	1.5	72	108	11	7.4	48	YES	167
16 /9:30	1.5	72	108	11	7.4	48	YES	687
17 /10:00	1.5	72	108	11	7.6	52	YES	192
18 /1:30	1.7	72	122	16	7.3	32	YES	158
19 /10:30	1.4	72	100	11	7.5	50	YES	210
20 /11:00	1.5	72	108	12	7.6	49	YES	210
21 /9:00	1.5	72	108	12	7.6	49	YES	194
22 /9:00	1.5	72	108	11	7.6	52	YES	197
23 /10:00	1.5	72	108	11	7.6	52	YES	211
24 /9:00	1.5	72	108	11	7.3	46	YES	225
25 /10:30	1.6	72	115	11	7.6	53	YES	223
26 /10:30	1.6	72	115	12	7.6	50	YES	224
27 /10:00	1.6	72	115	12	7.3	44	YES	217
28 /9:00	1.6	72	115	12	7.3	44	YES	225
29 /9:00	1.7	72	122	12	7.2	46	YES	204
30 /11:30	1.7	72	122	12	7.2	46	YES	214
31 / 10:30	1.5	72	108	10	7.6	55	YES	216

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