

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Columbia**

Conventional or Direct Filtration

Aug-2025

System Name: 		ID#: 4100194					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	OFF	0.07	0.07	OFF	0.05	0.05	0.10
2	0.06	0.05	OFF	0.06	0.04	0.04	0.08
3	0.04	OFF	OFF	0.07	0.04	0.03	0.08
4	0.04	OFF	OFF	0.06	0.05	0.07	0.15
5	0.06	0.05	0.05	OFF	0.04	0.04	0.10
6	0.04	OFF	OFF	0.05	0.08	0.05	0.20
7	0.05	0.05	0.05	0.05	0.07	0.05	0.10
8	0.05	0.05	OFF	0.05	0.04	0.04	0.12
9	0.04	0.04	0.04	0.03	0.03	0.04	0.07
10	OFF	0.07	0.04	0.03	0.03	0.03	0.08
11	OFF	0.04	0.04	0.03	0.11	0.06	0.16
12	0.07	0.07	0.06	0.06	0.05	0.05	0.08
13	0.06	0.06	OFF	0.12	0.06	0.09	0.18
14	0.09	0.08	OFF	0.13	0.05	0.05	0.16
15	0.07	OFF	OFF	0.11	0.09	0.06	0.21
16	0.05	0.07	OFF	OFF	0.11	0.10	0.11
17	0.38	0.30	0.19	0.12	0.08	0.08	0.38
18	0.08	0.08	OFF	0.12	0.07	0.05	0.18
19	0.05	OFF	OFF	0.05	0.04	0.04	0.11
20	0.05	OFF	OFF	0.05	0.05	0.04	0.10
21	0.05	0.05	OFF	0.10	0.14	0.08	0.17
22	0.08	0.08	0.10	0.09	0.09	0.09	0.21
23	0.11	0.10	0.09	0.07	0.06	0.06	0.12
24	0.08	0.08	OFF	0.08	0.06	0.06	0.13
25	OFF	OFF	0.08	0.05	0.05	0.05	0.10
26	0.05	OFF	OFF	0.07	0.09	0.09	0.13
27	0.10	0.09	OFF	0.07	0.13	0.12	0.20
28	0.09	0.10	0.07	0.06	0.06	OFF	0.14
29	OFF	OFF	0.09	0.07	0.05	0.06	0.15
30	0.06	OFF	OFF	0.10	0.06	0.05	0.11
31	OFF	OFF	OFF	0.06	0.04	0.05	0.10

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings $\leq$ 0.3 NTU? **YES** / NoAll 4-hour turbidity readings $\leq$ 1 NTU? **YES** / NoAll turbidity readings < IFE² triggers **YES** / NoCT's met everyday?
See page 2All Cl₂ residual at entry point
 $\geq$ 0.2 mg/l? **YES** / NO

Notes:

PRINTED NAME: DANIEL W SMITH

SIGNATURE: 

DATE: 9/2/25

PHONE #: (503) 741 - 0799

CERT #:8732

OHA - Drinking Water Program - Surface Water Quality Data Form							WTP - :	
System Name: CITY OF CLATSKANIE			ID#: 4100194		Aug-2025		Disinfection Giardia Log Inactiv:	1
Day	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	0.65	90	58.5	14.3	7.40	31.8	YES	460
2	0.65	90	58.5	14.6	7.40	31.2	YES	460
3	0.65	90	58.5	14.5	7.40	31.4	YES	460
4	0.61	90	54.9	14.3	7.50	32.9	YES	460
5	0.61	90	54.9	13.9	7.50	33.7	YES	460
6	0.61	90	54.9	14.1	7.40	32.1	YES	460
7	0.64	90	57.6	13.9	7.40	32.6	YES	460
8	0.6	90	54.0	13.5	7.40	33.4	YES	460
9	0.64	90	57.6	13.9	7.40	32.6	YES	460
10	0.65	90	58.5	14.1	7.40	32.2	YES	460
11	0.61	90	54.9	14.8	7.40	30.6	YES	460
12	0.6	90	54.0	15.5	7.40	29.2	YES	460
13	0.61	90	54.9	15.9	7.30	27.4	YES	460
14	0.62	90	55.8	15.8	7.40	28.7	YES	460
15	0.61	90	54.9	15.4	7.40	29.4	YES	460
16	0.46	90	41.4	15.4	7.40	28.9	YES	460
17	0.62	90	55.8	15.2	7.40	29.9	YES	460
18	0.51	90	45.9	14.8	7.30	29.2	YES	460
19	0.48	90	43.2	14.5	7.40	30.8	YES	460
20	0.5	90	45.0	14.7	7.40	30.4	YES	460
21	0.52	90	46.8	14.4	7.40	31.1	YES	460
22	0.54	90	48.6	14.2	7.40	31.6	YES	460
23	0.53	90	47.7	14.6	7.40	30.8	YES	460
24	0.59	90	53.1	14.9	7.40	30.4	YES	460
25	0.54	90	48.6	15.3	7.40	29.4	YES	460
26	0.54	90	48.6	15.5	7.50	30.1	YES	460
27	0.54	90	48.6	15.5	7.50	30.1	YES	460
28	0.52	90	46.8	15.4	7.50	30.2	YES	460
29	0.54	90	48.6	15.2	7.50	30.7	YES	460
30	0.53	90	47.7	14.9	7.50	31.3	YES	460
31	0.54	90	48.6	14.9	7.50	31.3	YES	460