

**OHA - Drinking Water Program - Surface Water Quality Data Form**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

County: **Tillamook**  
 Month/Year: **Jan-21**

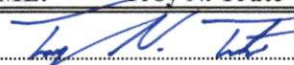
System Name: **Beaver Water District** ID#: **4100199** WTP: **TP - WTP-A**

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
1/1/2021			0.042	0.054	0.053	0.055	0.055
1/2/2021			0.037	0.034	0.189	0.078	0.189
1/3/2021							Off
1/4/2021							Off
1/5/2021			0.089	0.169	0.221	0.249	0.249
1/6/2021		0.070	0.070	0.033	0.031	0.030	0.070
1/7/2021		0.087	0.043	0.061	0.070	0.035	0.087
1/8/2021			0.080	0.062	0.054	0.097	0.097
1/9/2021			0.046	0.060	0.060	0.057	0.060
1/10/2021			0.050	0.038	0.036	0.042	0.050
1/11/2021			0.030	0.034	0.030	0.031	0.034
1/12/2021							Off
1/13/2021							Off
1/14/2021			0.034	0.085	0.194	0.199	0.199
1/15/2021			0.041	0.101	0.037	0.030	0.101
1/16/2021			0.208	0.096	0.046	0.036	0.208
1/17/2021			0.082	0.103	0.153	0.032	0.153
1/18/2021			0.062	0.044	0.034	0.032	0.062
1/19/2021			0.056	0.030	0.031	0.055	0.056
1/20/2021			0.030	0.035	0.035	0.036	0.036
1/21/2021			0.029	0.033	0.026	0.035	0.035
1/22/2021			0.031	0.076	0.082	0.041	0.082
1/23/2021			0.029	0.033	0.031	0.054	0.054
1/24/2021			0.029	0.054	0.042	0.045	0.054
1/25/2021			0.196	0.190	0.138	0.031	0.196
1/26/2021			0.029	0.029	0.029	0.030	0.030
1/27/2021			0.029	0.028	0.047	0.029	0.047
1/28/2021			0.086	0.042	0.032	0.038	0.086
1/29/2021			0.038	0.028	0.029	0.036	0.038
1/30/2021			0.028	0.028	0.026	0.028	0.028
1/31/2021			0.089	0.108	0.104	0.108	0.108

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>	<b>Monthly Summary (Answer Yes or No)</b> Rev. 7-2-18 T.N.T	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> <input checked="" type="radio"/> Yes / No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / No
All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / No		

**Notes:**

**PRINTED NAME:** Troy N. Trute

**SIGNATURE:** 

**PHONE #:** (541)992-1655

**DATE:** 2-3-2021

**CERT #:** D-08123 T-08076

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM correspond to continuous readings' maximum. <sup>2</sup> Filtered systems only. Page 1 of 2

System Name:  
Beaver Water  
District

ID#: 4100199

Month/Year: January-21

Disinfectio  
n *Giardia*  
Log 1.0

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/l]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.2	97	116.4	12.1	6.62	30.3	Yes	70
2	1.14	97	110.58	11.4	5.96	25.3	Yes	72
3	Off	97	Off			Off	Off	
4	Off	97	Off			Off	Off	
5	1.2	97	116.4	12.6	5.30	17.3	Yes	70
6	1.2	97	116.4	12.1	5.40	20.5	Yes	71
7	1.21	97	117.37	11.4	5.94	25.3	Yes	70
8	1.2	97	116.4	11.2	6.10	27.0	Yes	70
9	1.17	97	113.49	13.2	5.41	17.3	Yes	69
10	1.36	97	131.92	13.2	4.90	14.6	Yes	70
11	1.24	97	120.28	11.9	4.72	16.9	Yes	70
12	Off	97	Off			Off	Off	
13	Off	97	Off			Off	Off	
14	1.15	97	111.55	11.8	6.62	30.7	Yes	69
15	1.13	97	109.61	12.2	5.81	23.0	Yes	70
16	1.22	97	118.34	12.1	5.24	19.5	Yes	71
17	1.47	97	142.59	13.7	8.07	46.5	Yes	71
18	1.42	97	137.74	11.7	6.85	34.4	Yes	70
19	1.29	97	125.13	10.9	7.09	38.8	Yes	71
20	1.21	97	117.37	11.6	7.42	41.2	Yes	69
21	1.21	97	117.37	12	7.37	39.4	Yes	69
22	1.21	97	117.37	10.2	7.27	42.8	Yes	70
23	1.08	97	104.76	10.8	7.42	42.8	Yes	70
24	1.13	97	109.61	10.6	7.98	53.2	Yes	69
25	1.18	97	114.46	10.2	6.97	38.5	Yes	70
26	1.25	97	121.25	11.4	7.27	39.8	Yes	70
27	0.93	97	90.21	9.4	8.14	59.7	Yes	70
28	1.19	97	115.43	10.3	7.86	52.3	Yes	70
29	1.2	97	116.4	11.2	7.67	46.1	Yes	70
30	1.2	97	116.4	11.4	7.20	38.6	Yes	71
31	1.11	97	107.67	12.1	7.96	47.6	Yes	70

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Return by 10th of following month by email, fax, or mail to:

twp.dmce@state.or.us 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350