OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Clackamas

Month/Year: Jul-25

System Name: Colton Water District **ID#:** 41 00202 **WTP :** TP - A

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	No Flow	No Flow	0.22	0.25		0.21	0.25
2	No Flow	No Flow	0.18	0.10	0.09	0.22	0.18
3	No Flow	No Flow	0.30	0.30	0.30	0.30	0.30
4	No Flow	No Flow	0.26	0.27	0.26	0.26	0.27
5	No Flow	No Flow	0.23	No Flow	No Flow	No Flow	0.23
6	No Flow	No Flow	0.12	0.12	No Flow	0.13	0.13
7	No Flow	No Flow	0.23	0.16	0.18	0.16	0.23
8	No Flow	No Flow	0.14	0.24	0.19	0.15	0.24
9	No Flow	No Flow	0.13	0.13	0.15	0.13	0.15
10	No Flow	No Flow	0.16	0.17	0.14	0.14	0.17
11	No Flow	No Flow	No Flow	0.17	0.14	No Flow	0.17
12	No Flow	No Flow	No Flow	0.19	0.10	0.12	0.19
13	No Flow	No Flow	No Flow	0.11	0.15	0.13	0.15
14	No Flow	No Flow	0.22	0.12	0.13	0.14	0.22
15	No Flow	No Flow	0.13	0.12	0.13	0.11	0.13
16	No Flow	No Flow	0.19	0.12	0.12	0.10	0.19
17	No Flow	No Flow	0.14	0.11	0.12	0.12	0.14
18	No Flow	No Flow	0.17	0.12	0.12	0.11	0.17
19	No Flow	No Flow	0.14	0.10	0.10	0.10	0.14
20	No Flow	No Flow	0.11	0.11	0.11	0.11	0.11
21	No Flow	No Flow	0.15	0.11	0.11	0.11	0.15
22	No Flow	No Flow	No Flow	0.09	0.09	0.10	0.10
23	No Flow	No Flow	No Flow	0.11	0.10	0.10	0.11
24	No Flow	No Flow	0.10	0.09	0.10	0.09	0.10
25	No Flow	No Flow	No Flow	0.15	0.12	0.09	0.15
26	No Flow	No Flow	No Flow	0.09	0.09	0.09	0.09
27	No Flow	No Flow	No Flow	0.09	0.11	0.10	0.11
28	No Flow	No Flow	0.16	0.10	0.10	0.09	0.16
29	No Flow	No Flow	0.12	0.09	0.10	0.12	0.12
30	No Flow	No Flow	0.15	0.09	0.10	0.09	0.15
31	No Flow	No Flow	0.10	0.10	0.10	0.11	0.11

Conventional or Direct Filtration

95% of 4-hour turbidity readings ≤ 0.3 NTU? (Yes) / No

All 4-hour turbidity readings ≤ 1 NTU? (Yes) / no

All turbidity readings < IFE2 triggers (Yes) / No

Monthly Summary (Answer Yes or No)

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

All Cl2 residual at entry point ≥ 0.2 mg/l? (Yes) / No

Notes:

PRINTED NAME: Pete Rostein

SIGNATURE: Pete Rostein DATE: Aug 6 2025

PHONE #: (503) 824-2500 CERT #: 2775

1 Including continuous NTU 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. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :A

System Name:	Colton Water District	ID#: 41	00202	Month/Year:	July/2025	Disinfection *Giardia* Log Inactive:	1

Date / Time	Minimum Cl2 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	0.89	50	44.5	13.0	6.80	28.5	YES	245
2	1.06	50	53.0	13.0	6.80	29.1	YES	210
3	0.77	50	38.5	14.5	6.80	25.5	YES	185
4	0.99	50	49.5	13.0	6.80	28.9	YES	240
5	0.85	50	42.5	13.0	6.80	28.4	YES	185
6	1.1	50	55.0	13.0	6.80	29.2	YES	210
7	0.82	50	41.0	13.0	6.80	28.3	YES	235
8	0.94	50	47.0	13.0	6.80	28.7	YES	200
9	0.91	50	45.5	13.0	6.80	28.6	YES	190
10	0.95	50	47.5	13.0	6.80	28.7	YES	204
11	0.89	50	44.5	13.0	6.80	28.5	YES	207
12	1.04	50	52.0	13.0	6.80	29.0	YES	235
13	0.88	50	44.0	13.0	6.80	28.5	YES	210
14	0.84	50	42.0	14.0	6.80	26.5	YES	224
15	0.78	50	39.0	13.0	6.80	28.2	YES	197
16	1.05	50	52.5	14.0	6.80	27.2	YES	225
17	1.03	50	51.5	14.0	6.80	27.1	YES	240
18	1.07	50	53.5	14.0	6.80	27.3	YES	242
19	0.99	50	49.5	14.0	6.80	27.0	YES	252
20	1.01	50	50.5	13.0	6.80	28.9	YES	254
21	0.96	50	48.0	13.0	6.80	28.8	YES	224
22	0.92	50	46.0	13.0	6.80	28.6	YES	200
23	0.97	50	48.5	13.0	6.80	28.8	YES	202
24	1.01	50	50.5	13.0	6.80	28.9	YES	263
25	1.02	50	51.0	13.0	6.80	29.0	YES	306
26	1.02	50	51.0	13.0	6.80	29.0	YES	264
27	1.03	50	51.5	13.0	6.80	29.0	YES	276
28	1.01	50	50.5	13.0	6.80	28.9	YES	302
29	1.07	50	53.5	13.0	6.80	29.1	YES	255
30	1.11	50	55.5	13.0	6.80	29.3	YES	266
31	1.11	50	55.5	13.0	6.80	29.3	YES	237

3 If Cl2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350