

OHA - Drinking Water Program - Turbidity Monitoring Report Form County:COOS Conventional or Direct Filtration

System Name:Garden Valley Water Assn. **F ID:**OR4100214 **WTP-:**WTP-A **Month/Year:** November 2024

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	----	----	----	----	----	----	----
2	----	----	----	----	----	----	----
3	----	----	----	----	----	----	----
4	----	----	----	0.26	----	----	0.26
5	----	----	----	0.20	----	----	0.20
6	----	----	----	0.19	----	----	0.19
7	----	----	0.20	0.20	----	----	0.20
8	0.17	0.18	----	0.17	0.05	0.01	0.18
9	----	0.18	0.25	0.20	0.19	0.20	0.25
10	----	0.20	0.10	0.20	----	----	0.20
11	----	0.20	0.21	0.20	----	----	0.21
12	----	----	0.24	0.23	0.10	----	0.24
13	----	0.21	0.21	0.22	0.28	----	0.28
14	----	----	----	0.13	0.18	----	0.18
15	0.15	----	----	0.18	----	0.16	0.18
16	----	----	0.16	0.18	----	----	0.18
17	0.20	----	----	0.18	0.24	----	0.24
18	----	----	0.28	0.18	----	0.40	0.40
19	----	----	0.24	0.15	----	----	0.24
20	----	0.10	0.18	----	0.14	0.19	0.19
21	----	----	----	0.13	----	0.50	0.50
22	----	----	0.29	0.10	----	----	0.29
23	0.20	----	----	0.14	----	----	0.20
24	0.15	----	----	0.09	----	----	0.15
25	0.20	----	----	0.06	----	----	0.20
26	0.17	----	----	0.10	----	----	0.17
27	0.11	----	----	0.18	----	----	0.18
28	----	----	----	0.10	----	0.54	0.54
29	----	----	----	0.15	----	----	0.15
30	----	----	----	0.10	0.22	0.28	0.28
31	----	----	----	----	----	----	----

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of the 4 hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All the 4 hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
All turbidity readings < IFE ² triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No ²		
Notes:	PRINTED NAME: <i>Ryan A. Sherman</i>	
	SIGNATURE: <i>Ryan A. Sherman</i>	DATE: December 10, 2024
	PHONE #: (541) 260-2436	CERT #: <i>9184</i>

¹ Including continuous data, if applicable, for optimizing recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum.

² IFE=Individual Filter Effluent (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

Garden Valley Water Assn ID #: OR4100214 WTP-: WTP-A Month/Year: November 2024 Required Log Inactivation: 1

Date / Time	Min. 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]	S.U.	Formula	Yes / No	[GPM]
1 / 11 AM	1.3	45	56	11.0	7.5	44	Yes	50
2 / 11 AM	1.3	45	56	15.0	7.4	33	Yes	50
3 / 11 AM	2.3	45	104	14.0	7.4	39	Yes	50
4 / 11 AM	1.3	45	59	11.0	7.6	46	Yes	50
5 / 11 AM	1.6	45	72	12.0	7.6	45	Yes	50
6 / 11 AM	1.7	45	77	12.0	7.5	44	Yes	50
7 / 11 AM	1.7	45	77	18.0	7.4	28	Yes	50
8 / 11 AM	1.3	45	56	15.0	7.6	35	Yes	50
9 / 11 AM	2.6	45	117	14.0	7.4	40	Yes	50
10 / 11 AM	2.4	45	108	14.0	7.6	43	Yes	50
11 / 11 AM	2.3	45	104	15.0	7.5	38	Yes	50
12 / 11 AM	1.3	45	56	17.0	7.4	28	Yes	50
13 / 11 AM	1.3	45	59	18.0	7.7	30	Yes	50
14 / 11 AM	2.3	45	104	15.0	7.6	39	Yes	50
15 / 11 AM	1.3	45	59	14.0	7.6	38	Yes	50
16 / 11 AM	1.3	45	59	18.0	7.5	28	Yes	50
17 / 11 AM	1.2	45	54	13.0	7.4	37	Yes	50
18 / 11 AM	1.4	45	63	14.0	7.6	38	Yes	50
19 / 11 AM	1.6	45	72	15.0	7.6	36	Yes	50
20 / 11 AM	1.0	45	45	16.0	7.6	32	Yes	50
21 / 11 AM	1.3	45	59	13.0	7.5	39	Yes	50
22 / 11 AM	1.3	45	56	17.0	7.4	28	Yes	50
23 / 11 AM	1.2	45	54	14.0	7.4	35	Yes	50
24 / 11 AM	1.5	45	68	18.0	7.6	29	Yes	50
25 / 11 AM	1.3	45	56	13.0	7.5	39	Yes	50
26 / 11 AM	1.2	45	54	13.0	7.4	37	Yes	50
27 / 11 AM	1.2	45	54	13.0	7.4	37	Yes	50
28 / 11 AM	1.4	45	63	16.0	7.4	31	Yes	50
29 / 11 AM	1.3	45	59	13.0	7.6	40	Yes	50
30 / 11 AM	1.3	45	56	17.0	7.6	31	Yes	50
31 / 11 AM	-----	45	-----	-----	-----	-----	-----	50

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.

Revised February 2012