

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: 2025

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	-----	-----	-----	-----	-----	0.02	0.02
2	-----	0.01	0.01	0.03	-----	0.03	0.03
3	-----	-----	0.03	0.03	-----	-----	0.03
4	-----	0.03	-----	-----	-----	-----	0.03
5	-----	0.02	0.03	-----	0.02	-----	0.03
6	-----	-----	-----	0.03	0.05	-----	0.05
7	-----	-----	0.03	0.03	-----	0.03	0.03
8	-----	0.02	-----	0.02	0.01	0.01	0.02
9	-----	0.01	0.01	-----	0.01	0.01	0.01
10	-----	-----	0.01	-----	0.02	0.01	0.02
11	-----	0.01	0.01	-----	0.01	0.01	0.01
12	-----	0.01	0.01	-----	0.02	0.01	0.02
13	-----	0.01	0.01	0.01	0.01	0.01	0.01
14	-----	0.01	0.01	0.01	0.03	0.03	0.03
15	-----	-----	-----	0.02	-----	0.01	0.02
16	-----	-----	0.02	0.02	-----	0.02	0.02
17	-----	-----	0.02	0.02	-----	0.02	0.02
18	-----	0.02	0.02	0.02	-----	0.02	0.02
19	-----	-----	0.02	0.02	0.04	-----	0.04
20	-----	0.03	0.02	0.02	-----	0.02	0.03
21	-----	-----	0.02	-----	0.02	-----	0.02
22	-----	-----	0.02	0.02	0.02	0.02	0.02
23	-----	-----	0.02	0.02	-----	-----	0.02
24	-----	-----	0.03	0.02	0.01	-----	0.03
25	-----	0.01	-----	-----	0.03	-----	0.03
26	-----	0.02	0.01	0.01	0.01	0.02	0.02
27	-----	0.02	0.02	0.01	0.02	-----	0.02
28	-----	-----	0.02	0.01	0.02	-----	0.02
29	-----	-----	-----	-----	-----	-----	-----
30	-----	-----	-----	-----	-----	-----	-----
31	-----	-----	-----	-----	-----	-----	-----

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4 hour turbidity readings $\leq$ 0.3 NTU? <u>Yes</u> / No All the 4 hour turbidity readings $\leq$ 1 NTU? <u>Yes</u> / No All turbidity readings < IFE ² triggers? <u>Yes</u> / No ²	CT's met everyday? (see back) Yes / <u>No</u>	All Cl ₂ residual at entry point $\geq$ 0.2 mg/l? <u>Yes</u> / No	
Notes: 		PRINTED NAME: <u>Ryan A. Sherman</u> SIGNATURE: <u>Ryan A. Sherman</u> PHONE #: (541) 260-2436	
		DATE: March 10, 2025 CERT #: <u>9184</u>	

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: 2025								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	0.9	45	41	9.0	7.5	49	No	50
2 / 11 AM	1.0	45	45	9.0	7.7	53	No	50
3 / 11 AM	1.0	45	45	9.0	7.8	55	No	50
4 / 11 AM	1.5	45	68	8.0	7.6	58	Yes	50
5 / 11 AM	0.8	45	36	8.0	8.0	61	No	50
6 / 11 AM	1.1	45	50	8.0	7.7	57	No	50
7 / 11 AM	1.3	45	59	8.0	7.6	56	Yes	50
8 / 11 AM	1.0	45	45	8.0	8.1	65	No	50
9 / 11 AM	0.8	45	36	9.0	7.7	52	No	50
10 / 11 AM	0.8	45	36	7.0	7.8	61	No	50
11 / 11 AM	0.8	45	36	7.0	7.7	59	No	50
12 / 11 AM	0.8	45	36	6.0	8.2	76	No	50
13 / 11 AM	1.3	45	57	8.0	7.9	63	No	50
14 / 11 AM	1.1	45	50	7.0	8.0	68	No	50
15 / 11 AM	1.0	45	45	9.0	8.0	59	No	50
16 / 11 AM	1.2	45	54	11.0	8.1	54	No	50
17 / 11 AM	1.6	45	72	10.0	8.4	68	Yes	50
18 / 11 AM	1.3	45	59	11.0	8.3	59	No	50
19 / 11 AM	1.6	45	72	11.0	7.9	53	Yes	50
20 / 11 AM	1.3	45	59	12.0	8.2	53	Yes	50
21 / 11 AM	1.4	45	63	11.0	7.8	50	Yes	50
22 / 11 AM	0.9	45	41	12.0	7.6	41	No	50
23 / 11 AM	1.4	45	63	12.0	7.5	42	Yes	50
24 / 11 AM	1.2	45	54	12.0	7.6	43	Yes	50
25 / 11 AM	1.3	45	59	12.0	7.5	42	Yes	50
26 / 11 AM	1.3	45	59	15.0	7.3	32	Yes	50
27 / 11 AM	1.4	45	63	14.0	7.5	37	Yes	50
28 / 11 AM	1.3	45	59	14.0	7.3	34	Yes	50
29 / 11 AM	----	45	----	----	----	----	----	50
30 / 11 AM	----	45	----	----	----	----	----	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