

**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:** March 2026

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	----	----	0.38	----	0.00	0.04	0.38
2	----	----	0.47	0.51	----	----	0.51
3	0.47	----	0.31	0.33	----	0.60	0.60
4	----	----	0.33	----	----	----	0.33
5	----	----	----	----	----	----	----
6	----	----	----	----	----	----	----
7	----	0.28	----	0.08	----	----	0.28
8	0.50	----	0.56	0.21	----	----	0.56
9	----	----	----	----	----	----	----
10	----	----	----	----	----	----	----
11	----	----	----	----	----	----	----
12	----	----	0.22	0.20	0.30	----	0.30
13	0.15	0.20	0.20	----	----	0.25	0.25
14	----	0.25	----	----	0.25	----	0.25
15	----	----	----	----	----	0.26	0.26
16	0.25	0.30	----	----	----	----	0.30
17	----	----	0.15	0.35	----	----	0.35
18	----	0.15	----	0.15	0.20	----	0.20
19	0.15	----	0.20	----	----	----	0.20
20	----	0.25	----	----	----	----	0.25
21	----	0.21	0.25	----	0.35	----	0.35
22	----	----	----	0.20	0.15	0.21	0.21
23	----	----	----	0.30	----	0.20	0.30
24	----	----	0.20	----	----	0.20	0.20
25	----	----	----	----	----	----	----
26	----	0.20	----	0.20	----	0.20	0.20
27	----	----	----	----	----	----	----
28	----	----	----	----	----	----	----
29	----	----	----	----	----	----	----
30	----	----	----	----	----	----	----
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 <sub>2</sub> 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 <sup>2</sup> triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No <sup>2</sup>		
Notes:	PRINTED NAME: <i>Ryan A. Sherman</i>	
	SIGNATURE: <i>Ryan A. Sherman</i>	DATE: April 9, 2026
	PHONE #: (541) 260-2436	CERT #: 9184

<sup>1</sup> 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.

<sup>2</sup> 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: March 2026**

**Required Log Inactivation: 1**

Date / Time	Min. Cl <sub>2</sub> Residual At 1 <sup>st</sup> 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]	S.U.	Formula	Yes / No	[GPM]
1/ 11 AM	1.2	45	54	12.0	8.2	53	Yes	50
2/ 11 AM	1.1	45	50	13.0	8.1	47	Yes	50
3/ 11 AM	1.1	45	50	13.0	8.1	47	Yes	50
4/ 11 AM	1.2	45	54	11.0	8.0	53	Yes	50
5/ 11 AM	1.1	45	50	11.0	7.2	39	Yes	50
6/ 11 AM	0.8	45	38	15.0	7.0	27	Yes	50
7/ 11 AM	1.2	45	54	19.0	7.3	24	Yes	50
8/ 11 AM	1.2	45	54	14.0	7.6	37	Yes	50
9/ 11 AM	1.2	45	54	11.0	7.9	51	Yes	50
10/ 11 AM	1.2	45	54	12.0	8.0	49	Yes	50
11/ 11 AM	1.9	45	86	12.0	8.1	55	Yes	50
12/ 11 AM	1.4	45	63	14.0	8.1	46	Yes	50
13/ 11 AM	1.2	45	54	13.0	8.2	50	Yes	50
14/ 11 AM	1.3	45	59	14.0	8.0	44	Yes	50
15/ 11 AM	1.0	45	45	14.0	8.1	44	Yes	50
16/ 11 AM	1.0	45	45	13.0	7.7	40	Yes	50
17/ 11 AM	1.0	45	45	18.0	8.1	34	Yes	50
18/ 11 AM	1.0	45	45	16.0	8.1	38	Yes	50
19/ 11 AM	1.0	45	45	15.0	8.0	39	Yes	50
20/ 11 AM	1.0	45	45	16.0	8.3	41	Yes	50
21/ 11 AM	1.0	45	45	15.0	8.1	41	Yes	50
22/ 11 AM	1.0	45	45	15.0	8.1	41	Yes	50
23/ 11 AM	1.1	45	50	13.0	8.1	47	Yes	50
24/ 11 AM	1.1	45	50	13.0	8.1	47	Yes	50
25/ 11 AM	1.1	45	50	13.0	8.2	49	Yes	50
26/ 11 AM	1.2	45	54	13.0	8.4	53	Yes	50
27/ 11 AM	1.1	45	50	13.0	8.2	49	Yes	50
28/ 11 AM	1.1	45	50	15.0	8.4	46	Yes	50
29/ 11 AM	1.0	45	45	15.0	8.2	42	Yes	50
30/ 11 AM	1.1	45	50	14.0	8.3	48	Yes	50
31/ 11 AM	1.1	45	50	12.0	7.5	41	Yes	50

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.

Revised February 2012