

OHA - Drinking Water Program - Surface Water Quality Data Form

Corvallis, City of ID#: 41 00225 WTP-: WTP - B **Month/Year: Jul / 2021** Required Log Inactivation: 0.5

Date / Time	Minimum Cl ₂ 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]		Use tables	Yes / No	[GPM]
01 / 2000	0.94	64	60	17	7.5	15	Yes	1597
02 / 1600	0.91	64	58	17	7.5	15	Yes	1597
03 / 2000	0.94	64	60	17	7.5	15	Yes	1597
04 / 1600	0.91	64	58	18	7.5	15	Yes	1597
05 / 1600	0.95	64	61	17	7.5	15	Yes	1597
06 / 1600	0.97	64	62	18	7.5	15	Yes	1597
07 / 2000	0.91	64	58	18	7.4	15	Yes	1597
08 / 2000	1.00	64	64	17	7.2	15	Yes	1597
09 / 2000	0.92	64	59	17	7.2	15	Yes	1597
10 / 2000	0.96	64	61	17	7.2	15	Yes	1597
11 / 1200	0.95	64	61	18	7.3	15	Yes	1597
12 / 2000	0.97	64	62	18	7.2	15	Yes	1597
13 / 1600	0.96	64	61	18	7.2	15	Yes	1597
14 / 2000	0.88	64	56	18	7.2	15	Yes	1597
15 / 1600	0.93	64	60	18	7.3	15	Yes	1597
16 / 1200	0.99	64	63	17	7.3	15	Yes	1597
17 / 1600	0.95	64	61	17	7.3	15	Yes	1597
18 / 2000	0.93	64	60	17	7.3	15	Yes	1597
19 / 1600	1.01	64	65	17	7.3	15	Yes	1597
20 / 1200	0.96	64	61	18	7.2	15	Yes	1597
21 / 1600	0.97	64	62	17	7.3	15	Yes	1597
22 / 1600	0.96	64	61	17	7.3	15	Yes	1597
23 / 1200	0.94	62	58	17	7.2	15	Yes	1667
24 / 1200	0.96	64	61	17	7.3	15	Yes	1597
25 / 1200	0.97	62	60	18	7.2	15	Yes	1667
26 / 1200	0.95	64	61	18	7.2	15	Yes	1597
27 / 1200	0.95	64	61	18	7.2	15	Yes	1597
28 / 0800	0.95	64	61	18	7.2	15	Yes	1597
29 / 1200	0.97	64	62	19	7.2	15	Yes	1597
30 / 1200	1.00	64	64	19	7.2	15	Yes	1597
31 / 1200	1.01	64	65	19	7.1	15	Yes	1597

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