

OHA - Drinking Water Services – Turbidity Monitoring Report
Conventional or Direct Filtration

County: *polk*

Name: *City of Dallas* ID #41: *60248* WTP-: Month/Year: *April 2023*

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	.091	.658	.055	.055	.054	.054	.091
2	.069	.055	.054	.059	.059	.074	.074
3	.055	.054	.055	.056	.104	.054	.104
4	.054	.070	.055	.065	.059	.054	.070
5	.055	.055	.055	.055	.053	.060	.060
6	.051	.073	.055	.056	.055	.051	.073
7	.091	.059	.060	.070	.069	.060	.084
8	.064	.055	off	.066	.056	.058	.064
9	.055	.049	.059	off	off	off	.059
10	off	.055	.055	.075	.133	.062	.133
11	.063	.074	.090	.060	.070	.060	.090
12	.089	off	.067	.062	.055	.054	.089
13	.054	.054	.111	.059	.055	off	.111
14	off	off	.056	.056	.055	.055	.063
15	.056	.054	.060	.054	.049	.056	.060
16	.055	.067	.055	.050	.056	.055	.067
17	.100	.055	.055	.056	.054	.055	.100
18	.062	.055	.075	.055	.055	.070	.075
19	.070	.085	.062	.062	.072	.072	.085
20	.114	.068	.062	.075	.062	.067	.114
21	.067	.062	.102	.067	.067	.071	.102
22	.062	.046	.061	.062	.064	.060	.066
23	.172	.067	.062	.058	.062	.100	.172
24	.055	.056	.064	.057	.055	.055	.064
25	.053	.078	.051	.054	.054	.055	.078
26	.079	.054	.053	.062	.055	.053	.079
27	.049	.051	.056	.050	.050	.053	.056
28	.046	.078	.050	.050	.050	.053	.078
29	.070	.050	.050	.050	.051	.050	.078
30	.050	.050	.054	.051	.050	.054	.054
31							

Conventional or Direct Filtration Monthly Summary 95% of the 4-hour turbidity readings ≤ 0.3 NTU? <u>Yes</u> / No All the 4-hour turbidity readings ≤ 1 NTU? <u>Yes</u> / No All turbidity readings < IFE ² triggers? <u>Yes</u> / No ²		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <u>Yes</u> / No All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <u>Yes</u> / No	
Notes:		PRINTED NAME: <i>Dennis Schlegel</i> SIGNATURE: <i>[Signature]</i> DATE: <i>5/01/23</i> PHONE #: <i>(803) 1623-2175</i> CERT #: <i>7023</i>	

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

OHA - Drinking Water Program – Surface Water Quality Data Form - *Giardia* Inactivation

Name: City of Dallas

ID #41: 06248

WTP-: Month/Year: April 2023

Log Requirement
(Circle One): 0.5 1.0

Date / Time	Minimum 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]		Use tables	Yes / No	[GPM]
1/0900	1.21	112	135	8.6	7.22	61	Yes	1279.6
2/0915	1.16	112	129	8.8	7.27	61	Yes	1276.7
3/0810	1.15	112	128	8.4	7.21	61	Yes	11140.6
4/0845	1.21	112	135	8.0	7.13	61	Yes	1494.2
5/1100	1.23	112	137	8.8	7.09	61	Yes	1477.0
6/0745	1.26	112	141	8.3	7.24	61	Yes	1387.1
7/0815	1.30	112	145	9.2	7.09	62	Yes	1350.3
8/0900	1.12	112	125	9.6	7.33	61	Yes	1244.4
9/0830	1.05	112	118	10.0	7.43	45	Yes	1288.1
10/0830	1.10	112	123	10.8	7.08	46	Yes	2192.2
11/0800	1.20	112	134	9.1	7.01	61	Yes	1668.2
12/0815	1.19	112	133	9.2	7.07	61	Yes	1677.6
13/0755	1.20	112	134	9.1	7.10	61	Yes	1625.5
14/0920	1.29	112	144	10.7	7.09	46	Yes	2354.6
15/0745	1.33	112	148	9.5	7.20	62	Yes	2301.4
16/0745	1.26	112	141	9.8	7.44	62	Yes	1289.5
17/0810	1.26	112	141	10.4	7.08	46	Yes	1407.3
18/0800	1.17	112	131	10.2	7.15	46	Yes	1336.8
19/0750	1.16	112	129	10.1	7.17	46	Yes	1281.4
20/0745	1.16	112	129	10.1	7.15	46	Yes	1279.6
21/0749	1.22	112	136	10.1	7.15	46	Yes	1284.0
22/0730	1.16	112	129	10.0	7.16	46	Yes	1296.0
23/0750	1.19	112	133	10.1	7.20	46	Yes	1325.5
24/0850	1.11	112	124	9.9	7.10	61	Yes	1341.7
25/0900	1.09	112	122	9.7	7.12	60	Yes	1434.6
26/0830	.98	112	109	10.7	7.17	45	Yes	1426.9
27/0840	1.01	112	113	12.6	7.06	45	Yes	1435.9
28/0800	1.01	112	113	11.8	6.96	37	Yes	1435.2
29/0715	.93	112	104	12.4	7.25	45	Yes	1429.3
30/0735	.94	112	105	12.5	7.23	45	Yes	1420.4
31/								

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

Revised September 2016

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf

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

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