

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

County: Polk

Name: City of Dallas

ID #41: 00248

WTP-:

Month/Year: June 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	.056	.055	.055	.055	.055	.049	.056
2	.050	.055	.055	.054	.056	.079	.079
3	.050	.056	.056	.050	.050	.052	.056
4	.054	.055	.073	.050	.055	.049	.073
5	.049	.056	.056	.085	.050	.050	.085
6	.050	.051	.051	.050	.055	.050	.055
7	.050	.050	.056	.050	.050	.050	.056
8	.051	.112	.055	.055	.050	.050	.112
9	.050	.049	.051	.056	.051	.040	.056
10	.055	.050	.055	.055	.049	.054	.055
11	.051	.050	.051	.056	.050	.050	.056
12	.050	.050	.055	.050	.051	.050	.055
13	.061	.060	.059	.051	.051	.050	.061
14	.050	.051	.050	.061	.056	.052	.061
15	.050	.056	.055	.055	.050	.050	.056
16	.075	.055	.056	.050	.055	.056	.075
17	.056	.050	.050	.039	.056	.055	.056
18	.055	.055	.056	.055	.056	.055	.056
19	.055	.095	.060	.056	.056	.055	.095
20	.054	.054	.056	.056	.055	.060	.060
21	.060	.054	.056	.054	.055	.056	.060
22	.050	.050	.069	.050	.050	.050	.069
23	.050	.050	.049	.055	.050	.044	.055
24	.056	.050	.049	.049	.050	.050	.056
25	.050	.051	.049	.056	.055	.060	.060
26	.051	.050	.049	.049	.050	.049	.051
27	.051	.055	.055	.055	.050	.055	.055
28	.050	.051	.050	.045	.050	.050	.051
29	.050	.055	.056	.049	.050	.051	.056
30	.051	.056	.055	.050	.055	.061	.061
31							

Conventional or Direct Filtration Monthly Summary 95% of the 4-hour turbidity readings $\leq$ 0.3 NTU? <u>Yes / No</u> All the 4-hour turbidity readings $\leq$ 1 NTU? <u>Yes / No</u> All turbidity readings < IFE ² triggers? <u>Yes / No</u> ²		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <u>Yes / No</u> All Cl ₂ residuals at entry point $\geq$ 0.2 mg/l? <u>Yes / No</u>	
Notes:		PRINTED NAME: <u>Dennis Schlager</u> SIGNATURE: <u>[Signature]</u> DATE: <u>6/20/23</u> PHONE #: (505) <u>623-2175</u> CERT #: <u>7023</u>	

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: 60248

WTP-: Month/Year: June 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]
1/0945	1.54	112	172	14.1	7.00	48	yes	2778.0
2/0835	1.42	112	159	14.5	7.05	47	yes	2751.6
3/0800	1.12	112	125	14.5	7.17	45	yes	2769.7
4/0800	1.33	112	148	15.4	7.18	31	yes	2818.4
5/0830	1.29	112	144	15.8	6.91	25	yes	3139.2
6/0800	1.34	112	150	15.5	6.90	26	yes	3251.3
7/0915	1.25	112	140	17.0	6.99	25	yes	3207.2
8/0820	1.28	112	143	17.0	6.94	25	yes	3146.0
9/0745	1.26	112	141	16.5	6.97	25	yes	2879.5
10/0835	1.27	112	142	15.7	6.99	25	yes	2813.4
11/0845	1.17	112	131	16.8	6.96	25	yes	2947.4
12/0815	1.10	112	123	17.5	6.89	25	yes	3100.2
13/0820	1.16	112	129	18.4	6.99	25	yes	3160.8
14/0815	1.28	112	143	17.5	6.97	25	yes	3115.0
15/0800	1.23	112	137	16.6	6.99	25	yes	2878.0
16/0750	1.18	112	132	17.4	7.02	30	yes	2804.4
17/0830	1.14	112	127	17.5	7.17	30	yes	2843.8
18/0900	1.26	112	141	16.5	7.18	31	yes	2806.1
19/0900	1.24	112	148	15.2	7.15	31	yes	2802.3
20/1100	1.35	112	151	15.6	7.04	31	yes	2757.0
21/0805	.98	112	109	15.2	7.07	30	yes	2864.7
22/0730	1.17	112	131	16.7	7.06	31	yes	3182.9
23/0800	1.21	112	135	18.3	7.01	31	yes	3301.0
24/0900	1.45	112	162	17.5	7.33	32	yes	3235.0
25/0900	1.18	112	132	17.5	7.27	31	yes	3079.8
26/0800	1.15	112	128	18.4	6.96	25	yes	3113.7
27/0755	1.18	112	132	18.6	7.05	31	yes	3124.6
28/0805	1.08	112	120	19.0	7.08	30	yes	3107.5
29/0750	1.06	112	118	19.2	7.08	30	yes	3322.3
30/1000	1.10	112	123	19.1	7.10	30	yes	3418.8
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