

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

County: **Lincoln**
 Month/Year: **Mar-24**

System Name: **City of Depoe Bay** ID#: **4100254** WTP : TP - **Depoe Bay**

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	OFF	OFF	OFF	0.049	OFF	OFF	0.049
2	OFF	OFF	OFF	OFF	0.068	0.065	0.068
3	0.055	OFF	OFF	0.062	0.074	OFF	0.074
4	OFF	OFF	OFF	0.052	0.055	OFF	0.055
5	OFF	OFF	OFF	0.044	0.041	OFF	0.044
6	OFF	OFF	OFF	0.043	0.044	OFF	0.044
7	OFF	OFF	OFF	0.057	0.076	OFF	0.076
8	OFF	OFF	OFF	0.046	0.044	0.053	0.053
9	OFF	OFF	OFF	0.041	0.045	OFF	0.045
10	OFF	OFF	OFF	0.049	0.040	OFF	0.049
11	OFF	OFF	0.034	0.030	OFF	OFF	0.034
12	OFF	OFF	0.031	0.029	0.030	OFF	0.031
13	OFF	OFF	OFF	0.032	OFF	OFF	0.032
14	OFF	OFF	OFF	0.034	0.039	OFF	0.039
15	OFF	OFF	OFF	0.039	0.055	OFF	0.055
16	OFF	OFF	OFF	0.035	0.032	0.031	0.035
17	0.031	OFF	OFF	0.031	0.031	OFF	0.031
18	OFF	OFF	OFF	0.031	0.031	OFF	0.031
19	OFF	OFF	OFF	0.033	0.032	0.033	0.033
20	OFF	OFF	OFF	0.031	OFF	OFF	0.031
21	OFF	OFF	OFF	0.032	0.038	OFF	0.038
22	OFF	OFF	OFF	0.035	0.044	OFF	0.044
23	OFF	OFF	OFF	0.035	0.046	0.071	0.071
24	OFF	OFF	OFF	OFF	OFF	OFF	0.000
25	OFF	OFF	OFF	0.031	0.077	OFF	0.077
26	OFF	OFF	OFF	0.052	0.096	OFF	0.096
27	OFF	OFF	OFF	0.044	0.062	OFF	0.062
28	OFF	OFF	OFF	0.051	0.093	OFF	0.093
29	OFF	OFF	OFF	0.047	0.063	0.033	0.063
30	OFF	OFF	OFF	0.067	0.042	OFF	0.067
31	OFF	OFF	OFF	0.043	0.042	0.034	0.043

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings ≤ 0.3 NTU? Yes / No
 All 4-hour turbidity readings ≤ 1 NTU? Yes / No
 All turbidity readings < IFE² triggers Yes / No

CF's met everyday? (see back) Yes / No

All GZ residual at entry point > 0.2 mg/l? Yes / No

Notes:

PRINTED NAME: **PAUL CARVER**

SIGNATURE: *[Signature]*

DATE: **4-8-24**

PHONE #: **(541) 961-0787**

CERT #: **09093**

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : Depoe Bay

System Name:	City of Depoe Bay	ID#: 4100254	Month/Year:	Mar-24	Disinfection <i>Giardia</i> Log Inactive:	0.5
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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]		formula	Yes / No	[GPM]
1/8:41	1.0	290	276	10.4	7.1	19	YES	298
2/20:24	1.0	290	280	9.4	7.1	21	YES	360
3/11:8	1.0	290	278	9.2	7.1	21	YES	329
4/10:44	1.0	290	278	9.1	7.2	22	YES	294
5/10:19	1.0	290	286	9.2	7.2	22	YES	287
6/9:30	0.9	290	261	9.1	7.1	21	YES	351
7/9:28	0.9	290	262	9.2	7.1	21	YES	304
8/11:8	1.0	290	276	9.2	7.4	23	YES	302
9/17:30	1.5	290	448	10.1	7.6	25	YES	303
10/17:33	1.2	290	360	10.2	7.8	26	YES	315
11/7:26	1.1	290	326	9.8	7.8	26	YES	302
12/11:39	1.2	290	346	10.4	7.6	24	YES	293
13/8:47	1.2	290	350	10.5	7.3	22	YES	313
14/12:10	1.2	290	348	10.2	7.2	21	YES	287
15/8:49	1.2	290	336	10.3	7.3	22	YES	295
16/23:5	1.2	290	346	11.7	7.4	21	YES	360
17/12:1	1.0	290	298	11.2	7.2	19	YES	344
18/9:20	1.1	290	318	11.3	7.3	20	YES	302
19/19:13	1.1	290	310	11.7	7.4	20	YES	269
20/9:5	1.0	290	302	11.6	7.4	20	YES	292
21/13:48	1.1	290	330	11.4	7.3	20	YES	287
22/9:54	1.1	290	310	11.4	7.3	20	YES	321
23/22:17	1.0	290	290	11.8	7.2	18	YES	336
24/10:12	1.0	290	290	11.4	7.2	19	YES	364
25/9:12	1.0	290	292	11.2	7.2	19	YES	385
26/9:5	1.0	290	286	11.2	7.2	19	YES	362
27/10:18	0.9	290	248	11.3	7.2	19	YES	304
28/18:41	0.9	290	261	10.9	7.3	20	YES	315
29/10:45	0.8	290	232	10.7	7.1	19	YES	448
30/9:42	1.0	290	290	10.6	7.2	20	YES	362
31/10:14	1.2	290	348	10.7	7.3	21	YES	357

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