

OHA - Drinking Water Services - Surface Water Quality Data Form
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: Lincoln
 Month/Year: August 2021
 WTP: TP - Drift & Side Creek

System Name:	Kernville Gleneden Beach Lincoln Beach WD		ID#:	OR4100324			WTP: TP -	Drift & Side Creek
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			.03				.03	
2			.03				.03	
3			.03				.03	
4			.03				.03	
5			.03				.03	
6			.03				.03	
7			.04				.05	
8			.03				.03	
9			.03				.03	
10			.03				.03	
11			.03				.03	
12			.03				.03	
13			.03				.03	
14			.03				.03	
15			.03				.03	
16			.03				.03	
17			.03				.03	
18			.03				.05	
19			.03				.04	
20			.03				.03	
21			.03				.03	
22			.03				.03	
23			.03				.03	
24			.03				.03	
25			.03				.03	
26			.03				.11	
27			.03				.03	
28			.03				.03	
29			.03				.03	
30			.03				.03	
31			.03				.03	

Slow Sand/Membrane/DE Filtration/Unfiltered 95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	Monthly Summary (Answer Yes or No)	
	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
Notes:	PRINTED NAME: Bill Neal	
	SIGNATURE: Bill Neal	DATE: 9-1-2021
	PHONE #: (541) 764-2475	CERT #: 5160

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP - : Drift & Side Creek

Disinfection Giardia Log

System Name: K-GB-LB Water District ID#: 4100324

Month/Year: August 2021

Inactiv:

1.0

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	1.4	74	104	11	7.1	47	Yes	800
2	1.2	74	89	11	7.1	46	Yes	800
3	1.4	74	104	11	7.1	47	Yes	800
4	1.3	74	96	11	7.2	47	Yes	800
5	1.4	74	104	11	7.2	47	Yes	800
6	1.4	74	104	11	7.2	47	Yes	800
7	1.4	74	104	11	7.2	47	Yes	800
8	1.4	74	104	11	7.2	47	Yes	800
9	1.2	74	89	10.8	7.2	46	Yes	400
10	1.4	74	104	10.8	7.2	47	Yes	800
11	1.4	74	104	10.8	7.3	47	Yes	800
12	1.3	74	96	10.9	7.3	47	Yes	800
13	1.2	74	89	10.9	7.3	46	Yes	800
14	1.2	74	89	11	7.3	46	Yes	800
15	1.3	74	96	11.2	7.3	47	Yes	800
16	1.3	74	96	11.1	7.3	47	Yes	800
17	1.2	74	89	11	7.2	46	Yes	400
18	1.4	74	104	10.8	7.2	47	Yes	400
19	1.3	74	96	10.7	7.2	47	Yes	800
20	1.3	74	96	10.7	7.2	47	Yes	800
21	1.4	74	104	10.7	7.2	47	Yes	800
22	1.4	74	104	10.8	7.2	47	Yes	800
23	1.3	74	96	10.5	7.2	47	Yes	800
24	1.3	74	96	10.2	7.2	47	Yes	800
25	1.3	74	96	10.2	7.2	47	Yes	400
26	1.1	74	81	10.3	7.2	46	Yes	800
27	1.1	74	81	10.4	7.2	46	Yes	800
28	1.4	74	104	10.5	7.2	47	Yes	800
29	1.4	74	104	10.4	7.2	47	Yes	800
30	1.2	74	89	10.4	7.2	46	Yes	800
31	1.5	74	111	10.3	7.2	48	Yes	800

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

Revised July 2018

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