

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

County: Douglas
Month/Year: Aug-24
WTP : TP - A

System Name Glide Water Association

ID#: 4100326

WTP : TP - A

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	0.021	0.023	0.033	0.021	0.022	0.023	0.052
2	0.022	0.023	0.026	0.023	0.022	0.023	0.046
3	0.023	0.023	0.025	0.023	0.024	0.026	0.031
4	0.027	0.025	0.041	0.030	0.029	0.031	0.047
5	0.033	0.034	0.035	0.022	0.021	0.021	0.042
6	0.021	0.020	0.021	0.021	0.020	0.021	0.033
7	0.020	0.022	0.021	0.020	0.021	0.020	0.031
8	0.019	0.021	0.054	0.021	0.020	0.023	0.075
9	0.022	0.020	0.020	0.022	0.020	0.021	0.033
10	0.022	0.021	0.023	0.022	0.023	0.025	0.038
11	0.026	0.028	0.027	0.027	0.030	0.033	0.042
12	0.034	0.033	0.035	0.020	0.018	0.022	0.051
13	0.020	0.020	0.020	0.020	0.019	0.019	0.034
14	0.020	0.020	0.021	0.019	0.020	0.020	0.033
15	0.020	0.020	0.020	0.020	0.020	0.019	0.038
16	0.020	0.023	0.022	0.020	0.020	0.023	0.034
17	0.021	0.022	0.040	0.030	0.025	0.029	0.086
18	0.029	0.031	0.033	0.036	0.038	0.044	0.066
19	0.049	0.051	0.047	0.020	0.020	0.020	0.058
20	0.019	0.018	0.021	0.020	0.018	0.019	0.033
21	0.020	0.019	0.020	0.020	0.019	0.019	0.027
22	0.020	0.019	0.020	0.019	0.019	0.019	0.027
23	0.018	0.018	0.024	0.020	0.019	0.018	0.071
24	0.020	0.020	0.019	0.018	0.018	0.021	0.031
25	0.019	0.018	0.018	0.018	0.020	0.021	0.031
26	0.020	0.020	0.023	0.020	0.020	0.022	0.034
27	0.021	0.023	0.025	0.026	0.025	0.028	0.033
28	0.029	0.033	0.034	0.034	0.034	0.041	0.047
29	0.044	0.047	0.049	0.020	0.019	0.020	0.062
30	0.021	0.020	0.020	0.020	0.019	0.019	0.031
31	0.020	0.020	0.022	0.025	0.019	0.019	0.031

<p>Conventional or Direct Filtration</p> <p>95% of 4-hour turbidity readings ≤ 0.3 NTU? ² <input checked="" type="radio"/> Yes / <input type="radio"/> No</p> <p>All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No</p> <p>All turbidity readings < IFE² triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No</p>		<p>Monthly Summary (Answer Yes or No)</p> <p>CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No</p> <p>All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No</p>	
<p>Notes: P/O = PLANT OFF DV = DIVERTED</p>		<p>PRINTED NAME: Jonathan Woody</p> <p>SIGNATURE: <i>Jonathan Woody</i> DATE: 9-7-24</p> <p>PHONE #: (541) 643-6137 CERT #: 7232</p>	

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 IFE = Individ Filter Eff. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP : A

System Name: **Glide Water Association** ID#: **4100326** Month/Year: **Aug-24**
 Disinfection Giardia Log Inactive: **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]
8/1/2024 7:50	0.7	150	110	20	8.3	32	Yes	175
8/2/2024 23:24	0.7	150	108	20	8.3	31	Yes	175
8/3/2024 13:31	0.6	150	96	20	8.2	29	Yes	175
8/4/2024 8:10	0.7	150	101	19	8.2	31	Yes	175
8/5/2024 11:21	0.7	150	104	20	8.2	31	Yes	175
8/6/2024 12:39	0.7	150	103	19	8.3	32	Yes	175
8/7/2024 11:29	0.7	150	109	19	8.2	32	Yes	175
8/8/2024 10:52	0.7	150	109	18	8.2	33	Yes	175
8/9/2024 12:26	0.8	150	116	18	8.2	33	Yes	175
8/10/2024 12:55	0.8	150	116	18	8.2	33	Yes	175
8/11/2024 10:31	0.8	150	119	18	8.2	33	Yes	175
8/12/2024 13:00	0.7	150	104	18	8.2	33	Yes	175
8/13/2024 12:24	0.7	150	104	18	8.1	33	Yes	175
8/14/2024 10:07	0.7	150	106	18	8.2	34	Yes	175
8/15/2024 13:22	0.7	150	109	18	8.2	34	Yes	175
8/16/2024 13:47	0.7	150	110	18	8.2	34	Yes	175
8/17/2024 12:38	0.7	150	109	18	7.9	30	Yes	175
8/18/2024 12:32	0.7	150	109	17	8.1	35	Yes	175
8/19/2024 12:54	0.7	150	103	17	8.1	35	Yes	175
8/20/2024 10:17	0.7	150	98	17	8.1	33	Yes	175
8/21/2024 11:42	0.7	150	103	18	8.1	33	Yes	175
8/22/2024 17:51	0.7	150	107	16	8.0	35	Yes	175
8/23/2024 8:22	0.7	150	107	16	7.8	34	Yes	175
8/24/2024 7:06	0.7	150	107	16	8.0	36	Yes	175
8/25/2024 8:50	0.8	150	113	15	8.1	39	Yes	175
8/26/2024 9:06	0.7	150	112	16	8.0	36	Yes	175
8/27/2024 11:35	0.7	150	109	16	8.1	36	Yes	175
8/28/2024 11:56	0.7	150	110	16	8.1	37	Yes	175
8/29/2024 11:23	0.7	150	112	16	8.1	37	Yes	175
8/30/2024 9:36	0.8	150	118	17	8.0	34	Yes	175
8/31/2024 13:22	0.8	150	118	17	8.1	34	Yes	175

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

Revised July 2018

Return by 10th of following month by email, fax, or mail to:
 dwp.dnce@state.or.us: 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350