

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

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

System Name: Glide Water Association ID#: 4100326

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	0.020	0.023	0.022	0.020	0.021	0.033
2	0.022	0.020	0.021	0.022	0.022	0.021	0.031
3	0.021	0.024	0.023	0.021	0.023	0.022	0.051
4	0.021	0.025	0.026	0.025	0.024	0.027	0.034
5	0.028	0.029	0.031	0.021	0.022	0.022	0.042
6	0.023	0.024	0.028	0.022	0.020	0.020	0.037
7	0.021	0.020	0.021	0.022	0.020	0.022	0.031
8	0.021	0.020	0.019	0.022	0.019	0.021	0.042
9	0.022	0.020	0.022	0.021	0.020	0.020	0.036
10	0.021	0.021	0.023	0.021	0.020	0.020	0.033
11	0.020	0.023	0.022	0.021	0.023	0.024	0.073
12	0.021	0.021	0.022	0.023	0.022	0.020	0.044
13	0.020	0.025	0.025	0.021	0.021	0.023	0.108
14	0.026	0.023	0.024	0.024	0.025	0.025	0.036
15	0.026	0.025	0.033	0.031	0.029	0.030	0.073
16	0.033	0.033	0.036	0.019	0.019	0.018	0.045
17	0.018	0.018	0.022	0.019	0.018	0.020	0.038
18	0.018	P/O	0.022	0.019	0.018	0.018	0.031
19	0.018	0.023	0.025	0.019	0.019	0.018	0.033
20	0.019	P/O	0.023	0.019	0.019	0.018	0.038
21	0.018	0.018	0.024	0.022	0.018	0.019	0.031
22	0.018	0.018	0.020	0.025	0.018	0.018	0.036
23	0.019	0.020	0.021	0.020	0.019	0.018	0.031
24	0.019	0.022	0.020	0.020	0.020	0.020	0.081
25	0.019	0.022	0.028	0.021	0.021	0.021	0.034
26	0.023	P/O	0.023	0.023	0.023	0.025	0.036
27	0.025	0.026	0.027	0.030	0.029	0.031	0.046
28	0.034	P/O	0.040	0.045	0.039	0.040	0.051
29	0.040	0.047	0.054	0.056	0.052	0.052	0.147
30	0.055	0.058	0.062	0.018	0.018	0.019	0.077
31	No Data	No Data	No Data	No Data	No Data	No Data	0.000

<p>Conventional or Direct Filtration</p> <p>95% of 4-hour turbidity readings ≤ 0.3 NTU? ² <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No</p> <p>All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No</p> <p>All turbidity readings < IFE² triggers <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No</p> <p>Notes: P/O = PLANT OFF DV = DIVERTED</p>		<p>Monthly Summary (Answer Yes or No)</p> <p>CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No</p> <p>All Cl₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No</p>	
<p>PRINTED NAME: Jonathan Woody</p> <p>SIGNATURE: <i>Jonathan Woody</i></p> <p>PHONE #: (541) 643-6137</p>		<p>DATE: 10-9-24</p> <p>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

System Name: **Glide Water Association**

ID#: 4100326

Month/Year: Sep-24

WTP : A

Disinfection
Giardia Log Inactive: 1.0

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow [GPM]
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	
9/1/2024 11:50	0.8	150	115	18	8.1	33	Yes	175
9/2/2024 16:26	0.8	150	116	18	8.2	34	Yes	175
9/3/2024 11:54	0.7	150	109	17	8.2	36	Yes	175
9/4/2024 10:14	0.7	150	101	17	8.2	37	Yes	175
9/5/2024 10:33	0.7	150	103	17	8.1	35	Yes	175
9/6/2024 12:21	0.6	150	93	17	8.1	34	Yes	175
9/7/2024 10:44	0.6	150	97	17	8.0	33	Yes	175
9/8/2024 12:17	0.7	150	101	17	8.2	36	Yes	175
9/9/2024 12:18	0.7	150	100	17	8.1	34	Yes	175
9/10/2024 12:23	0.7	150	101	17	7.9	33	Yes	175
9/11/2024 22:01	0.6	150	97	16	7.8	33	Yes	175
9/12/2024 13:52	0.6	150	92	15	7.8	35	Yes	175
9/13/2024 6:53	0.7	150	98	15	7.9	37	Yes	175
9/14/2024 7:04	0.7	150	103	15	7.9	36	Yes	175
9/15/2024 9:48	0.7	150	104	15	7.9	36	Yes	175
9/16/2024 8:30	0.7	150	110	15	7.9	37	Yes	175
9/17/2024 19:32	0.6	150	89	14	7.8	36	Yes	175
9/18/2024 5:32	0.6	150	85	14	7.8	36	Yes	175
9/19/2024 20:52	0.6	150	85	14	8.0	39	Yes	175
9/20/2024 6:54	0.5	150	82	14	7.9	39	Yes	175
9/21/2024 5:53	0.6	150	89	14	7.9	40	Yes	175
9/22/2024 6:51	0.6	150	97	14	8.0	40	Yes	175
9/23/2024 10:12	0.7	150	100	15	8.0	39	Yes	175
9/24/2024 8:12	0.7	150	100	15	8.0	38	Yes	175
9/25/2024 17:57	0.6	150	95	15	8.2	40	Yes	175
9/26/2024 13:14	0.7	150	98	14	8.4	45	Yes	175
9/27/2024 22:18	0.7	150	101	14	8.3	44	Yes	175
9/28/2024 13:09	0.6	150	97	15	8.2	42	Yes	175
9/29/2024 12:15	0.6	150	97	14	8.3	44	Yes	175
9/30/2024 11:55	0.6	150	95	13	8.2	46	Yes	175
31	#N/A	150	#N/A	#N/A	#N/A	#N/A	#N/A	175

² If Cl₂ at entry point < 0.2 mg/l or CT not met, DWS within 24 hours.

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

Revised July 2018