

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

County: Douglas
 Month/Year: Apr-23
 WTP : TP - A

System Name	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	0.023	0.023	0.021	0.023	0.029	0.034	0.071
2	0.025	0.028	P/O	0.043	0.060	0.032	0.103
3	0.041	0.046	0.079	0.037	0.041	0.054	0.112
4	0.090	0.085	0.103	0.038	0.030	0.029	0.154
5	0.034	P/O	0.033	0.043	0.033	0.026	0.086
6	0.025	0.024	0.024	0.041	0.031	0.027	0.093
7	0.027	0.027	0.025	0.039	0.031	0.040	0.095
8	0.065	P/O	0.060	0.040	0.045	0.039	0.110
9	0.055	0.033	P/O	0.030	0.035	0.043	0.077
10	0.029	0.029	0.027	0.034	0.056	0.031	0.086
11	0.050	P/O	0.057	0.043	P/O	0.058	0.101
12	0.041	0.095	0.079	0.037	0.052	0.038	0.223
13	0.048	P/O	0.075	0.037	0.029	0.029	0.093
14	0.031	0.037	0.062	0.035	0.028	0.026	0.084
15	0.027	P/O	0.026	0.028	0.030	0.033	0.068
16	0.037	0.029	P/O	0.027	0.026	0.026	0.031
17	0.026	P/O	0.027	0.033	0.038	0.030	0.062
18	0.029	0.031	0.031	0.036	0.033	0.029	0.069
19	0.029	P/O	0.030	0.037	0.031	0.028	0.067
20	0.029	P/O	0.028	0.036	0.033	0.029	0.069
21	0.029	0.029	0.030	0.036	0.036	0.031	0.071
22	0.030	0.030	0.032	0.038	0.039	0.034	0.069
23	0.035	0.040	P/O	0.041	0.036	0.047	0.069
24	0.061	0.091	0.052	0.029	0.027	0.033	0.119
25	0.045	0.069	0.076	0.023	0.020	0.019	0.106
26	0.021	0.023	0.022	0.025	0.037	0.041	0.238
27	0.038	0.049	P/O	0.046	0.048	0.072	0.093
28	0.033	P/O	0.035	0.062	0.037	0.074	0.125
29	0.042	0.051	P/O	0.052	0.051	0.060	0.077
30	0.034	0.038	P/O	0.024	0.018	0.016	0.047
31	No Data	No Data	No Data	No Data	No Data	No Data	0.000

Conventional or Direct Filtration 95% of 4-hour turbidity readings ≤ 0.3 NTU? ² <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All turbidity readings < IFE ² triggers <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
Notes: P/O = PLANT OFF DV = DIVERTED		PRINTED NAME: Jonathan Woody SIGNATURE: <i>Jonathan Woody</i> DATE: 5-9-23 PHONE #: (541) 643-6137 CERT #: 7232	

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: **Disinfection**
 Giardia Log Inactive: **1.0**

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
4/1/2023 23:24	0.8	150	117	8	7.5	53	Yes	175
4/2/2023 9:28	0.8	150	113	7	7.9	63	Yes	175
4/3/2023 21:30	0.7	150	108	6	7.7	62	Yes	175
4/4/2023 9:07	0.7	150	98	6	7.8	62	Yes	175
4/5/2023 7:57	0.8	150	125	7	8.0	66	Yes	175
4/6/2023 11:36	0.9	150	129	8	8.0	63	Yes	175
4/7/2023 10:50	0.9	150	131	8	8.1	62	Yes	175
4/8/2023 7:26	1.0	150	155	8	8.1	65	Yes	175
4/9/2023 15:05	1.0	150	153	8	8.0	62	Yes	175
4/10/2023 20:46	0.8	150	126	9	7.9	57	Yes	175
4/11/2023 23:02	0.7	150	104	8	7.8	57	Yes	175
4/12/2023 23:47	0.5	150	82	8	7.9	58	Yes	175
4/13/2023 9:25	0.4	150	67	7	8.1	65	Yes	175
4/14/2023 23:41	0.6	150	85	8	8.0	60	Yes	175
4/15/2023 7:37	0.5	150	76	8	7.4	47	Yes	175
4/16/2023 12:34	0.6	150	83	9	7.4	45	Yes	175
4/17/2023 23:42	0.8	150	122	8	7.9	59	Yes	175
4/18/2023 7:45	0.8	150	114	8	8.0	62	Yes	175
4/19/2023 7:06	0.8	150	125	8	7.9	62	Yes	175
4/20/2023 4:37	0.8	150	126	8	8.0	61	Yes	175
4/21/2023 7:23	0.9	150	128	9	7.9	57	Yes	175
4/22/2023 9:16	0.9	150	140	10	7.9	54	Yes	175
4/23/2023 20:26	0.9	150	134	9	7.8	55	Yes	175
4/24/2023 9:45	0.8	150	118	9	7.9	54	Yes	175
4/25/2023 6:36	0.8	150	125	9	7.9	57	Yes	175
4/26/2023 7:14	0.8	150	124	9	7.9	54	Yes	175
4/27/2023 8:17	0.7	150	112	10	7.9	52	Yes	175
4/28/2023 11:37	1.0	150	146	10	8.2	59	Yes	175
4/29/2023 20:24	0.9	150	135	10	7.7	49	Yes	175
4/30/2023 8:57	0.9	150	128	10	7.7	50	Yes	175
31	#N/A	150	#N/A	#N/A	#N/A	#N/A	#N/A	175

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

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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