

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

County: **Douglas**
 Month/Year: **May-23**

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	0.016	0.016	P/O	0.033	0.020	0.018	0.066
2	0.018	P/O	0.019	0.032	P/O	0.022	0.068
3	0.020	0.021	P/O	0.028	0.020	0.018	0.045
4	0.028	0.024	0.023	0.028	0.019	0.019	0.038
5	0.023	P/O	0.022	0.021	0.022	0.019	0.036
6	0.027	P/O	0.039	0.057	0.026	0.019	0.088
7	0.027	P/O	0.025	0.027	0.019	0.021	0.051
8	0.019	0.020	0.032	0.029	0.022	0.034	0.047
9	0.024	P/O	0.062	0.023	0.019	0.024	0.077
10	0.019	P/O	0.056	0.021	0.018	0.018	0.068
11	0.018	0.018	P/O	0.032	0.020	0.018	0.069
12	0.018	P/O	0.046	0.030	0.018	0.018	0.051
13	0.018	0.018	P/O	0.023	0.018	0.018	0.033
14	0.018	P/O	0.018	0.022	0.019	0.018	0.084
15	0.018	P/O	0.022	0.021	0.022	0.021	0.387
16	0.020	0.023	P/O	0.024	0.021	0.023	0.031
17	0.020	P/O	0.025	0.022	0.025	0.028	0.044
18	0.039	0.034	0.024	0.025	0.029	0.036	0.068
19	0.048	0.026	0.025	0.024	0.032	0.045	0.055
20	0.025	P/O	0.024	0.027	0.034	0.028	0.056
21	0.029	0.032	0.036	0.031	0.028	0.034	0.064
22	0.044	0.029	0.028	0.034	0.034	0.028	0.055
23	P/O	P/O	0.027	0.030	0.030	0.029	0.058
24	0.033	0.030	0.032	0.031	0.034	0.034	0.058
25	0.032	P/O	0.038	0.034	0.033	0.039	0.062
26	0.035	0.034	0.036	0.039	0.025	0.019	0.056
27	0.020	P/O	0.019	0.020	0.020	0.019	0.038
28	0.024	0.020	0.020	0.020	0.022	0.020	0.036
29	0.020	0.024	0.021	0.022	0.026	0.025	0.044
30	0.028	0.024	0.023	0.023	0.022	0.024	0.044
31	0.023	0.022	0.022	0.021	0.019	0.019	0.060

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? ²	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back)	<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 Cl2 residual at entry point ≥ 0.2 mg/l?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
All turbidity readings < IFE ² triggers	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	PRINTED NAME: Jonathan Woody	
Notes: P/O = PLANT OFF DV = DIVERTED		SIGNATURE: <i>John Woody</i>	DATE: 6/9/23
		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: **May-23** 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]
5/1/2023 7:55	0.9	150	136	10	7.8	52	Yes	175
5/2/2023 22:58	0.9	150	136	9	7.9	56	Yes	175
5/3/2023 11:33	0.9	150	130	10	7.9	54	Yes	175
5/4/2023 7:43	0.8	150	127	10	7.9	51	Yes	175
5/5/2023 7:11	0.9	150	128	10	7.9	52	Yes	175
5/6/2023 7:33	0.8	150	126	10	7.9	54	Yes	175
5/7/2023 6:43	0.8	150	127	9	7.9	55	Yes	175
5/8/2023 23:08	0.5	150	82	10	7.9	51	Yes	175
5/9/2023 7:31	0.5	150	79	9	8.0	54	Yes	175
5/10/2023 9:35	0.9	150	131	10	7.9	52	Yes	175
5/11/2023 10:18	0.8	150	121	11	8.0	51	Yes	175
5/12/2023 10:42	0.8	150	127	12	8.0	47	Yes	175
5/13/2023 8:19	0.8	150	125	12	7.9	45	Yes	175
5/14/2023 6:26	0.8	150	125	12	7.8	43	Yes	175
5/15/2023 22:54	0.8	150	113	13	7.8	42	Yes	175
5/16/2023 9:12	0.7	150	100	12	7.8	44	Yes	175
5/17/2023 23:16	0.5	150	78	12	8.0	45	Yes	175
5/18/2023 5:54	0.5	150	75	13	7.9	42	Yes	175
5/19/2023 23:32	0.8	150	121	13	7.9	43	Yes	175
5/20/2023 6:28	0.7	150	109	13	8.0	43	Yes	175
5/21/2023 9:21	0.7	150	112	12	7.8	43	Yes	175
5/22/2023 7:23	0.8	150	115	12	8.0	47	Yes	175
5/23/2023 7:48	0.8	150	124	12	8.0	48	Yes	175
5/24/2023 7:54	0.8	150	125	12	8.0	48	Yes	175
5/25/2023 9:14	0.9	150	136	13	8.0	45	Yes	175
5/26/2023 22:21	0.9	150	132	14	8.0	42	Yes	175
5/27/2023 8:51	0.8	150	116	14	8.0	41	Yes	175
5/28/2023 9:36	0.8	150	116	14	8.0	41	Yes	175
5/29/2023 8:39	0.7	150	108	14	8.0	40	Yes	175
5/30/2023 7:25	0.7	150	107	15	7.9	38	Yes	175
5/31/2023 15:43	0.7	150	109	15	8.0	39	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.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350