

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

County: Douglas  
Month/Year: Sep-23  
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 <sup>1</sup> [NTU]
1	0.023	0.023	0.023	0.024	0.022	0.025	0.042
2	0.023	0.023	0.023	0.023	0.024	0.024	0.042
3	0.024	P/O	0.028	0.025	0.020	0.021	0.047
4	0.023	0.021	0.021	0.020	0.020	0.023	0.040
5	0.021	0.022	0.020	0.021	0.020	0.019	0.042
6	0.020	0.022	0.021	0.020	0.020	0.022	0.044
7	0.020	P/O	0.020	0.022	0.020	0.020	0.060
8	0.021	0.022	0.022	0.020	0.021	0.021	0.040
9	0.020	0.020	0.024	0.022	0.020	0.022	0.044
10	0.022	0.021	0.022	0.022	0.023	0.022	0.038
11	0.022	0.023	0.026	0.023	0.022	0.025	0.046
12	0.025	0.025	0.027	0.027	0.025	0.029	0.056
13	0.029	P/O	0.030	0.033	0.025	0.023	0.051
14	0.022	P/O	0.022	0.024	0.022	0.023	0.048
15	0.022	0.022	0.022	0.023	0.022	0.022	0.046
16	0.023	0.022	0.022	0.023	0.022	0.022	0.048
17	0.023	0.022	0.022	0.023	0.022	0.022	0.047
18	0.023	0.023	0.023	0.022	0.024	0.023	0.038
19	0.022	0.026	0.025	0.023	0.022	0.025	0.049
20	0.023	P/O	0.023	0.026	0.023	0.023	0.047
21	0.025	P/O	0.024	0.021	0.022	0.020	0.040
22	0.020	0.020	0.022	0.020	0.020	0.021	0.055
23	0.021	0.020	0.020	0.019	0.020	0.020	0.040
24	0.019	0.019	0.018	0.020	0.020	0.018	0.042
25	0.040	0.040	0.030	POL	0.030	POL	0.040
26	POL	0.040	0.050	0.030	0.030	0.070	0.070
27	0.030	0.070	0.070	0.040	0.080	POL	0.070
28	0.040	0.020	0.020	0.020	P/O	POL	0.040
29	POL	0.020	0.040	P/O	P/O	P/O	0.030
30	0.030	Pol	0.040	0.020	0.020	P/O	0.040
31							

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <sup>2</sup>	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back)	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
All turbidity readings < IFE <sup>2</sup> triggers	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	PRINTED NAME: Jonathan Woody	
Notes: P/O = PLANT OFF      DV = DIVERTED		SIGNATURE: <i>Jonathan Woody</i>	DATE: 10-9-23
		PHONE #: ( 541 ) 643-6137	CERT #: 7232

<sup>1</sup> 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. <sup>2</sup> 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: **Sep-23** Disinfection: **Giardia Log Inactive: 1.0**

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup> [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? <sup>3</sup> Yes / No	Peak Hourly Demand Flow [GPM]
9/1/2023 6:39	0.9	150	131	17	8.4	40	Yes	175
9/2/2023 10:33	0.9	150	140	17	8.3	39	Yes	175
9/3/2023 19:50	0.8	150	118	17	8.2	37	Yes	175
9/4/2023 10:52	0.7	150	109	16	8.4	40	Yes	175
9/5/2023 20:59	0.8	150	116	16	8.3	41	Yes	175
9/6/2023 10:29	0.7	150	104	16	8.4	41	Yes	175
9/7/2023 11:22	0.8	150	113	16	8.3	40	Yes	175
9/8/2023 13:36	0.6	150	87	16	8.4	41	Yes	175
9/9/2023 9:31	0.6	150	85	16	8.4	40	Yes	175
9/10/2023 10:21	0.6	150	85	16	8.4	39	Yes	175
9/11/2023 6:32	0.6	150	91	16	8.5	41	Yes	175
9/12/2023 13:24	0.7	150	110	16	8.4	41	Yes	175
9/13/2023 10:20	0.6	150	88	16	8.5	41	Yes	175
9/14/2023 15:56	0.7	150	108	16	8.5	41	Yes	175
9/15/2023 23:47	0.7	150	100	16	8.5	41	Yes	175
9/16/2023 8:40	0.5	150	82	16	8.4	40	Yes	175
9/17/2023 10:15	0.9	150	130	16	8.5	44	Yes	175
9/18/2023 15:22	0.9	150	130	16	8.5	43	Yes	175
9/19/2023 13:50	0.8	150	118	15	8.4	46	Yes	175
9/20/2023 20:35	0.8	150	113	14	8.3	46	Yes	175
9/21/2023 9:06	0.7	150	101	13	8.3	48	Yes	175
9/22/2023 9:33	0.8	150	116	13	8.3	49	Yes	175
9/23/2023 11:29	0.8	150	118	13	8.4	50	Yes	175
9/24/2023 19:49	0.8	150	116	13	8.0	44	Yes	175
25	0.8	150	114	14	7.8	39	Yes	175
26	0.7	150	108	13	7.8	41	Yes	175
27	1.0	150	146	13	7.8	41	Yes	175
28	0.9	150	128	12	7.8	43	Yes	175
29	0.9	150	137	15	8.0	40	Yes	175
30	0.9	150	135	14	8.1	43	Yes	175
31	#N/A	150	#N/A	#N/A	#N/A	#N/A	#N/A	175

<sup>3</sup> If Cl<sub>2</sub> 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:  
[wdp.dnce@state.or.us](mailto:wdp.dnce@state.or.us); 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350