

## OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

## Conventional or Direct Filtration

Month/Year: Jun-23

System Name:	City of Gold Hill			ID#: 41-00333			WTP : TP -	WTP-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	---	0.02	0.04	---	---	0.02	0.04	
2	---	0.02	0.04	---	---	---	0.04	
3	0.02	---	---	---	0.05	---	0.05	
4	---	---	0.09	0.04	0.02	---	0.09	
5	0.03	0.02	0.02	0.03	0.02	0.02	0.03	
6	---	---	0.04	0.03	0.02	---	0.04	
7	0.02	---	0.06	0.08	---	---	0.08	
8	---	---	0.05	0.04	0.03	---	0.05	
9	0.02	---	0.02	0.02	---	---	0.02	
10	---	---	0.03	---	---	0.02	0.03	
11	---	---	0.02	0.03	0.02	0.02	0.03	
12	0.02	0.02	---	---	0.02	0.02	0.02	
13	---	---	0.05	---	---	0.02	0.05	
14	---	---	0.07	0.02	0.03	0.04	0.07	
15	0.02	---	0.02	---	0.02	0.02	0.02	
16	---	0.02	0.03	0.02	0.02	0.02	0.03	
17	---	0.02	0.02	0.02	0.02	0.02	0.02	
18	---	---	0.02	0.02	0.02	0.02	0.02	
19	0.02	---	---	0.02	---	---	0.02	
20	---	---	0.03	0.03	0.03	0.02	0.03	
21	---	0.02	0.02	0.02	0.02	0.03	0.03	
22	0.03	---	0.02	0.02	0.02	0.02	0.03	
23	---	0.02	0.02	---	0.02	---	0.02	
24	---	---	---	---	---	---	0.00	
25	---	---	0.02	0.02	0.02	---	0.02	
26	0.03	---	0.02	---	0.02	0.02	0.03	
27	0.02	0.02	0.02	---	0.02	0.02	0.02	
28	0.02	0.02	0.02	0.02	0.02	---	0.02	
29	---	---	---	0.03	0.02	0.04	0.04	
30	0.02	0.02	0.02	0.02	0.02	0.02	0.02	

## Conventional or Direct Filtration

## Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings  $\leq$  0.3 NTU?

Yes / No

All 4-hour turbidity readings  $\leq$  1 NTU?

Yes / No

All turbidity readings < IFE<sup>2</sup> triggers

Yes / No

CT's met everyday?  
(see back)

Yes / No

All Cl<sub>2</sub> residual at entry point  
 $\geq$  0.2 mg/l?

Yes / No

Notes: Contact Time (T) is based on 8' in Clearwell with a 0.3 baffling factor  
(8x3400x0.3) PLUS 10' (min depth) in Reservoir #3 (10x37,800 gal)  
Sample CT: (8x3400x0.3)+(10x37800)/500 gpm

$$8160 + 378000 = 386,160 \text{ gal} / 500 \text{ gpm} = 772 \text{ min}$$

PRINTED NAME: Michael Bollweg

SIGNATURE: Michael Bollweg

DATE: 7.10.23

PHONE #: ( 541 ) 415-1117

CERT #: 5296

<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 Effl. (333-061-0040(1)(d)(B&C))

# OHA - Drinking Water Program - Surface Water Quality Data Form

				WTP - : WTP-A	
System Name:	City of Gold Hill	ID#: 41-00333	Month/Year:	Jun-23	Disinfection <i>Giardia</i> Log Inactive: 1

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.7	836	1379	14.2	7.8	42	YES	462
2	1.5	872	1334	15.4	7.8	38	YES	443
3	1.7	847	1440	14.9	7.8	40	YES	456
4	1.4	832	1148	14.1	7.7	39	YES	464
5	1.3	813	1049	14.3	7.8	40	YES	475
6	0.8	836	669	14.3	7.8	38	YES	462
7	1.0	830	806	14.2	7.7	37	YES	465
8	1.2	811	949	15.2	7.7	36	YES	476
9	1.4	810	1158	14.4	7.7	39	YES	477
10	1.1	815	896	16.0	7.9	36	YES	474
11	0.9	829	762	14.6	7.9	39	YES	466
12	1.2	810	939	16.5	7.9	35	YES	477
13	1.4	818	1137	15.8	7.8	36	YES	472
14	1.7	813	1390	14.0	7.8	42	YES	475
15	1.6	816	1306	15.5	8.0	41	YES	473
16	1.3	811	1038	14.0	8.1	45	YES	476
17	1.1	810	858	15.0	8.0	40	YES	477
18	1.2	822	978	15.0	8.0	40	YES	470
19	1.6	810	1320	13.5	8.1	49	YES	477
20	1.8	811	1485	13.6	7.9	46	YES	476
21	1.6	839	1377	13.8	8.0	46	YES	460
22	1.9	836	1563	14.5	8.1	47	YES	462
23	1.7	834	1401	16.3	7.9	38	YES	463
24								
25	1.7	834	1451	15.2	7.7	38	YES	463
26	1.6	843	1349	15.2	8.0	42	YES	458
27	1.3	815	1084	16.6	8.1	38	YES	474
28	1.2	811	933	14.9	8.0	40	YES	476
29	1.3	913	1159	15.5	7.9	38	YES	423
30	2.0	896	1747	15.6	8.1	44	YES	431

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

Return by 10th of following month by email, fax, or mail to:

[dpw.dnce@state.or.us](mailto:dpw.dnce@state.or.us); 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350