

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: Apr-24

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	---	---	---	---	---	---	0.00
2	---	---	---	---	---	---	0.00
3	---	---	0.01	0.02	0.01	0.01	0.02
4	---	---	---	---	---	---	0.00
5	---	---	0.01	0.01	0.01	---	0.01
6	---	---	0.01	0.01	0.02	0.01	0.02
7	---	---	---	0.01	0.01	---	0.01
8	---	---	0.01	---	---	0.01	0.01
9	0.01	---	0.01	---	---	0.02	0.02
10	---	---	0.01	---	0.02	0.01	0.02
11	---	---	0.02	0.02	---	---	0.02
12	0.02	---	0.01	0.01	---	---	0.02
13	---	---	---	---	---	---	0.00
14	---	---	---	---	---	---	0.00
15	---	---	0.01	0.02	0.02	0.02	0.02
16	0.01	0.02	---	0.02	0.02	0.01	0.02
17	---	---	---	---	---	---	0.00
18	---	---	0.01	0.02	---	0.01	0.02
19	---	---	---	0.01	0.01	0.01	0.01
20	---	---	---	---	---	---	0.00
21	---	---	0.01	0.01	0.01	0.01	0.01
22	0.01	---	0.01	0.01	0.01	0.01	0.01
23	---	---	---	---	---	---	0.00
24	---	---	---	0.01	0.01	0.01	0.01
25	0.01	0.01	---	---	0.01	0.01	0.01
26	---	---	0.01	---	---	0.01	0.01
27	---	---	---	---	---	---	0.00
28	---	---	---	---	---	---	0.00
29	---	---	0.02	0.02	0.01	0.02	0.02
30	0.01	0.02	---	0.02	0.02	---	0.02

Max  
0.02

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <span style="float:right">Yes / No</span>	CT's met everyday? (see back)  Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l?  Yes / No
All 4-hour turbidity readings ≤ 1 NTU? <span style="float:right">Yes / No</span>		
All turbidity readings < IFE <sup>2</sup> triggers <span style="float:right">Yes / No</span>		
Notes: Variable Contact Time is based on "effective volumes" based on the tracer study parameters reflected on page 6 of the report 12752 (gal) / peak flow rate * lowest cl2 residual. Eg: 12,752(gal) / 480 gpm * 1.5 mg/L	PRINTED NAME: Michael Bollweg SIGNATURE: <i>Michael Bollweg</i> DATE: <i>5.9.24</i> 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

<b>System Name:</b> City of Gold Hill				<b>ID#:</b> 41-00333	<b>Month/Year:</b> Apr-24	<b>WTP - :</b> Disinfection <i>Giardia</i> Log Inactive:	<b>WTP-A</b> 1
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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]
1								Off
2								Off
3	2.10	64	135	11.5	7.8	52	YES	418
4								Off
5	2.20	70	155	12.3	7.6	47	YES	398
6	1.92	61	118	12.8	7.7	45	YES	400
7	1.57	53	84	12.8	7.7	44	YES	376
8	1.87	64	119	12.8	7.7	45	YES	375
9	1.87	63	117	12.8	7.9	48	YES	381
10	1.88	61	115	12.2	7.8	49	YES	393
11	1.83	61	112	14.1	7.7	41	YES	383
12	1.83	62	114	13.9	7.9	44	YES	375
13								Off
14								Off
15	1.76	53	94	13.0	7.7	43	YES	421
16	1.58	48	75	13.1	7.7	42	YES	423
17								Off
18	1.64	53	87	13.3	7.7	42	YES	396
19	1.71	53	91	13.2	7.7	43	YES	409
20								Off
21	2.13	65	138	14.1	8.0	48	YES	419
22	1.74	53	91	13.2	7.9	47	YES	422
23								Off
24	1.83	57	104	13.8	8.0	46	YES	412
25	1.92	59	112	13.8	8.0	47	YES	418
26	1.84	60	111	13.3	8.0	48	YES	388
27								Off
28								Off
29	1.69	52	88	14.4	7.8	42	YES	412
30	1.90	57	108	13.4	8.0	48	YES	425

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

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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