

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: Jun-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 ¹ [NTU]
1	---	0.02	0.02	0.02	0.02	0.02	0.02
2	0.02	0.02	0.02	0.02	0.02	0.02	0.02
3	---	---	0.02	0.02	---	0.04	0.04
4	---	---	---	---	---	---	0.00
5	---	---	0.03	0.02	0.03	0.04	0.04
6	0.02	---	0.04	0.02	---	0.02	0.04
7	0.02	0.02	0.02	0.02	0.02	0.02	0.02
8	0.02	0.02	0.02	0.02	0.02	0.02	0.02
9	0.02	0.02	0.02	0.02	0.02	0.02	0.02
10	---	0.02	0.02	0.02	0.02	0.02	0.02
11	0.02	---	0.02	0.02	0.02	---	0.02
12	---	---	0.02	0.02	0.02	0.02	0.02
13	0.02	---	0.02	---	0.02	0.02	0.02
14	---	0.02	0.02	0.02	0.02	---	0.02
15	---	---	---	---	---	---	0.00
16	---	---	0.06	0.02	0.03	0.02	0.06
17	0.02	0.02	0.02	---	0.02	0.02	0.02
18	---	---	0.02	0.02	---	0.02	0.02
19	0.02	0.02	0.02	0.02	0.02	0.02	0.02
20	0.02	---	0.02	0.02	0.02	---	0.02
21	---	---	0.02	0.02	0.02	0.02	0.02
22	0.02	0.02	0.02	---	---	---	0.02
23	---	---	0.02	0.02	0.02	0.02	0.02
24	---	---	0.02	0.02	0.02	0.02	0.02
25	0.02	0.02	0.02	0.02	0.02	0.02	0.02
26	0.02	0.02	0.02	0.02	0.07	0.02	0.07
27	0.02	0.03	0.04	0.03	0.03	---	0.04
28	0.02	0.02	0.02	0.02	0.03	0.02	0.03
29	---	---	0.03	---	0.03	0.02	0.03
30	---	0.02	---	---	---	0.02	0.02
<div> <div> Conventional or Direct Filtration </div> <div> 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 < IFE² triggers Yes / No </div> </div> <div> Monthly Summary (Answer Yes or No) </div> <div> <div> CT's met everyday? (see back) Yes / No </div> <div> All Cl2 residual at entry point \geq 0.2 mg/l? Yes / No </div> </div> <div> 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 </div> <div> PRINTED NAME: Michael Bollweg SIGNATURE: Michael Bollweg PHONE #: (541) 415-1117 </div> <div> DATE: 7.11.24 CERT #: 5296 </div>							

Max
0.07

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 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-24	Disinfection <i>Giardia</i> Log Inactive:	1

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.90	57	108	15.8	7.8	38	YES	428
2	1.71	51	88	15.5	7.8	38	YES	426
3	1.79	56	99	14.7	7.9	42	YES	411
4								Off
5	1.65	52	86	16.1	7.8	37	YES	403
6	1.49	45	67	14.5	7.8	40	YES	420
7	1.80	54	97	14.2	7.8	42	YES	428
8	1.78	53	95	16.4	7.8	36	YES	427
9	2.06	62	127	15.1	7.8	41	YES	426
10	1.76	53	93	16.9	7.9	37	YES	424
11	1.82	55	101	15.0	7.8	40	YES	419
12	1.69	52	88	15.3	7.8	39	YES	413
13	1.66	50	83	16.5	7.9	37	YES	422
14	1.67	51	85	15.2	7.8	39	YES	418
15								
16	1.57	49	77	14.7	7.8	40	YES	408
17	1.51	45	68	14.1	7.8	41	YES	426
18	1.60	48	77	14.1	7.9	43	YES	424
19	1.59	48	76	13.1	7.8	44	YES	426
20	1.64	50	82	15.0	7.9	41	YES	416
21	1.56	47	74	14.6	7.7	39	YES	421
22	1.60	48	78	15.8	7.8	37	YES	421
23	1.46	46	67	14.9	7.7	37	YES	404
24	1.43	44	63	15.6	7.9	38	YES	416
25	1.64	49	81	14.8	7.8	40	YES	425
26	1.62	48	78	14.7	7.8	40	YES	427
27	1.58	48	75	15.3	7.8	38	YES	424
28	1.54	46	71	15.9	7.8	37	YES	424
29	1.46	45	66	16.3	7.6	33	YES	412
30	1.55	49	77	17.1	7.8	34	YES	400

³ If Cl₂ 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:
dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350