

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: Jul-25

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
2	0.02	---	0.02	0.02	---	0.02	0.02
3	---	---	0.02	---	0.02	0.02	0.02
4	0.02	---	0.02	0.02	0.02	0.02	0.02
5	---	---	0.02	0.02	0.02	0.02	0.02
6	0.03	---	0.02	0.02	---	0.03	0.03
7	---	0.02	0.02	---	0.02	---	0.02
8	---	---	0.02	0.02	---	0.02	0.02
9	0.02	---	0.03	0.04	0.02	0.02	0.04
10	---	---	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
14	0.02	0.02	0.02	0.02	---	0.02	0.02
15	---	0.02	0.02	0.02	---	0.02	0.02
16	0.02	0.02	0.02	0.02	0.02	0.02	0.02
17	---	0.02	0.02	0.02	0.02	0.02	0.02
18	0.02	0.02	0.02	0.02	0.02	0.02	0.02
19	0.02	---	0.02	0.02	---	0.02	0.02
20	0.02	---	0.02	0.02	0.02	0.02	0.02
21	0.03	---	0.02	---	---	0.02	0.03
22	0.02	0.02	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
26	---	---	0.02	0.04	---	0.02	0.04
27	0.02	---	0.03	0.02	0.02	0.02	0.03
28	---	0.05	0.02	0.02	---	0.02	0.05
29	0.02	---	---	---	0.04	0.02	0.04
30	0.02	---	0.02	0.05	0.02	0.02	0.05
31	0.03	---	0.02	0.02	0.02	0.02	0.03

Conventional or Direct Filtration

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

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

Monthly Summary (Answer Yes or No)

CT's met everyday?
(see back)

Yes / No

All Cl₂ residual at entry point
 \geq 0.2 mg/l?

Yes / No

PRINTED NAME: Michael Bollweg

SIGNATURE: Michael Bollweg

DATE: 8.10.25

PHONE #: (541) 415-1117

CERT #: 5296

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

System Name: City of Gold Hill				ID#: 41-00333	Month/Year: May-25	WTP - : Disinfection <i>Giardia</i> Log Inactive:	WTP-A 1
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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	1.8	48.8	87.9	20.9	7.8	27.1	YES	470
2	1.79	51.9	92.9	20.6	7.7	26.6	YES	440
3	1.7	48.3	82.1	19.1	7.7	29.1	YES	449
4	1.73	47.5	82.3	20.0	7.5	25.5	YES	464
5	1.63	46.1	75.1	21.2	7.6	24.2	YES	451
6	1.52	42.3	64.3	20.9	7.8	26.2	YES	458
7	1.67	46.5	77.7	20.0	7.8	28.3	YES	458
8	1.71	49.4	84.6	22.7	7.7	22.9	YES	441
9	1.78	48.2	85.8	22.0	7.7	24.2	YES	471
10	1.79	50.6	90.6	21.2	7.6	24.6	YES	451
11	1.77	47.9	84.8	23.1	7.6	21.6	YES	471
12	1.39	37.9	52.6	21.7	7.7	23.6	YES	468
13	1.49	42.9	63.9	22.4	7.7	22.8	YES	443
14	1.73	48.2	83.3	23.3	7.8	22.9	YES	458
15	1.64	45.2	74.1	23.5	7.8	22.3	YES	463
16	1.5	41.3	62.0	24.6	7.7	19.6	YES	463
17	1.67	46.2	77.1	25.5	7.6	18.1	YES	461
18	1.71	46.6	79.7	25.9	7.7	18.4	YES	468
19	1.53	42.7	65.3	18.0	7.9	33.1	YES	457
20	1.59	44.9	71.3	17.3	8.0	36.2	YES	452
21	1.49	43.1	64.2	18.9	8.0	32.2	YES	441
22	1.59	42.9	68.2	17.5	8.1	37.1	YES	473
23	1.69	47.5	80.2	17.6	8.0	35.9	YES	454
24	1.66	46.1	76.6	17.3	8.1	37.9	YES	459
25	1.61	44.5	71.7	17.7	8.2	38.0	YES	461
26	1.64	45.3	74.2	17.6	7.9	34.4	YES	462
27	1.64	45.1	73.9	17.7	7.9	34.2	YES	464
28	1.6	44.0	70.4	18.4	8.0	33.7	YES	464
29	1.5	44.6	66.9	19.7	8.1	31.7	YES	429
30	1.75	48.3	84.5	19.8	7.9	30.1	YES	462
31	1.6	44.5	71.1	21.7	7.8	25.1	YES	459

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

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

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350