

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: Nov-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	0.04	0.03	---	0.04
2	---	---	0.01	---	---	0.03	0.03
3	---	---	0.04	---	---	---	0.04
4	0.04	---	0.02	0.03	0.03	---	0.04
5	---	---	---	---	---	---	0.00
6	---	---	0.02	0.05	0.05	0.05	0.05
7	---	---	---	---	---	---	0.00
8	---	---	---	---	---	---	0.00
9	---	---	---	---	---	---	0.00
10	---	---	---	---	---	---	0.00
11	---	---	---	0.04	0.04	0.04	0.04
12	0.03	0.04	0.13	0.03	0.04	0.03	0.13
13	0.04	---	0.04	0.03	---	---	0.04
14	---	---	0.04	0.04	---	---	0.04
15	---	---	---	0.05	0.03	0.04	0.05
16	---	---	0.06	0.04	---	---	0.06
17	---	---	0.04	---	---	---	0.04
18	---	---	0.04	0.09	---	---	0.09
19	---	---	---	---	---	---	0.00
20	---	---	---	0.03	---	0.04	0.04
21	---	---	---	---	---	---	0.00
22	---	---	0.03	0.03	---	---	0.03
23	---	---	---	---	---	---	0.00
24	---	---	0.04	0.03	---	---	0.04
25	0.04	---	0.04	0.04	---	0.03	0.04
26	---	---	0.03	0.03	0.04	---	0.04
27	---	---	---	---	---	---	0.00
28	---	---	---	---	---	---	0.00
29	---	---	0.04	0.04	0.03	0.03	0.04
30	---	---	---	---	---	---	0.00

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings $\leq$ 0.3 NTU?	☒ Yes / No	CT's met everyday? (see back)	All Cl ₂ residual at entry point $\geq$ 0.2 mg/l?
All 4-hour turbidity readings $\leq$ 1 NTU?	☒ Yes / No	☒ Yes / No	☒ Yes / No
All turbidity readings < IFE ² 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		PRINTED NAME: Michael Bollweg SIGNATURE: <i>Michael Bollweg</i> PHONE #: (541) 415-1117	
		DATE: 12.9.25 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 = Indiv. 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:	Nov-25	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	1.57	42.2	66.3	12.6	8.0	49.5	YES	474
2	1.68	49.4	82.9	12.9	7.9	47.5	YES	434
3	1.6	55.0	88.0	13.1	8.0	47.9	YES	371
4	1.55	45.2	70.1	11.4	7.9	51.4	YES	437
5								Off
6	1.74	51.2	89.2	10.8	8.1	58.8	YES	433
7								Off
8								Off
9								Off
10								Off
11	1.51	41.0	61.9	11.9	7.8	47.7	YES	470
12	1.75	46.4	81.2	12.1	8.1	53.9	YES	481
13	1.94	51.8	100.4	15.6	7.9	40.6	YES	478
14	1.66	51.9	86.1	16.2	7.8	36.5	YES	408
15	1.92	53.6	102.9	10.7	7.7	52.3	YES	457
16	1.79	54.5	97.5	13.0	7.9	47.6	YES	419
17	1.63	48.5	79.0	13.1	7.8	44.6	YES	429
18	1.46	46.8	68.3	12.9	7.7	42.8	YES	398
19								Off
20	1.67	52.2	87.2	12.6	7.8	46.3	YES	408
21								Off
22	1.56	43.2	67.5	11.4	7.9	50.5	YES	460
23								Off
24	1.61	46.9	75.5	12.9	7.8	45.1	YES	438
25	1.62	48.6	78.7	12.8	7.8	46.1	YES	425
26	1.65	48.3	79.6	12.9	7.9	47.0	YES	436
27								Off
28								Off
29	1.62	47.0	76.1	9.7	8.1	62.4	YES	440
30								Off

³ If Cl₂ 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:

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