

OHA • Drinking Water Program - Turbidity Monitoring Report Form County:

Slow Sand Membrane Diatomaceous Earth Filtration or Unfiltered Systems

System Name: ROCK CREEK WATER DISTRICT		OR4100337:			WTP-:		MonthNear: 12-21
DAY	12 AM [NTU]	4AM [NTU]	8AM [NTU]	NOON [NTU]	4 PM [NTU]	8PM [NTU]	Highest Reading of the Day ¹ [NTU]
1					0.13		0.13
2					0.12		0.12
3					0.14		0.14
4					0.15		0.15
5					0.14		0.14
6					0.12		0.12
7					0.13		0.13
8					0.14		0.14
9					0.13		0.13
10					0.14		0.14
11					0.21		0.21
12					0.25		0.25
13					0.28		0.28
14					0.26		0.26
15					0.27		0.27
16					0.26		0.26
17				0.25			0.25
18					0.24		0.24
19					0.23		0.23
20					0.22		0.22
21					0.23		0.23
22					0.22		0.22
23					0.24		0.24
24					0.23		0.23
25					0.25		0.25
26					0.26		0.26
27					0.23		0.23
28					0.25		0.25
29					0.27		0.27
30					0.29		0.29
31					0.30		0.30

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	Notes:	
PRINTED NAME: Leonard Fischer		DATE: 1-8-22
SIGNATURE: Leonard A. Fischer		CERT#: 6302
PHONE: #503-879-5497		

OHA - Drinking Water Program – Surface Water Quality Data Form

System Name: ROCK CREEK WATER DIST. ID #: OR 4100337 WTP: _____ Month/Year: 12-21

Date / Time	Minimum Cl ₂ Residual at 1 st 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]		Use tables	Yes / No	[GPM]
1/1/2000	0.5	226	113	9	7.5	43	Yes	34
2/1/215	0.7		158	9	7.5	44		33
3/1/600	0.6		136	9	7.5	43		34
4/1/6.30	0.6		136	9	7.4	43		36
5/1/530	0.5		113	9	7.4	43		35
6/1/600	0.4		90	9	7.4	42		33
7/1/630	0.4		90	9	7.4	42		31
8/1/700	0.3		68	9	7.4	68		32
9/1/630	0.5		113	9	7.5	43		33
10/1/715	0.7		158	9	7.5	44		34
11/1/600	0.5		113	9	7.5	43		35
12/1/530	0.4		90	9	7.5	42		34
13/1/500	0.4		90	9	7.4	42		35
14/1/515	0.5		113	9	7.4	43		33
15/1/530	0.5		113	9	7.4	43		32
16/1/600	0.6		136	9	7.4	43		30
17/1/200	0.6		136	9	7.4	43		28
18/1/530	0.5		113	9	7.4	43		25
19/1/600	0.5		113	9	7.4	43		27
20/1/530	0.4		90	9	7.4	42		29
21/1/600	0.4		90	9	7.4	42		31
22/1/530	0.4		90	9	7.5	42		32
23/1/600	0.4		90	9	7.5	42		30
24/1/530	0.4		90	9	7.5	42		35
25/1/500	0.4		90	9	7.4	42		33
26/1/530	0.5		113	9	7.4	43		34
27/1/545	0.5		113	9	7.4	43		30
28/1/600	0.4		90	9	7.4	42		23
29/1/500	0.3		68	9	7.4	42		25
30/1/530	0.3		68	9	7.4	42		24
31/1/600	0.3	✓	68	9	7.4	42	✓	25

³If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWP by end of next business day. Revised February 2012
 Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf