

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-: Month Near: 7-22

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					0.10		0.10
2					0.07		0.07
3					0.08		0.08
4					0.09		0.09
5					0.06		0.06
6					0.07		0.07
7				0.09			0.09
8				0.08			0.08
9				0.07			0.07
10				0.10			0.10
11				0.11			0.11
12				0.10	0.10		0.10
13				0.09	0.09		0.09
14				0.10	0.10		0.10
15					0.09		0.09
16					0.08		0.08
17					0.09		0.09
18					0.08		0.08
19					0.09		0.09
20					0.08		0.08
21					0.08		0.08
22					0.09		0.09
23					0.09		0.10
24					0.08		0.08
25					0.09		0.09
26					0.08		0.08
27					0.09		0.09
28					0.08		0.08
29					0.09		0.09
30					0.08		0.08
31					0.10		0.10

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No	
All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No			
Notes:	PRINTED NAME: Leonard Fischer		
	SIGNATURE: Leonard Fischer	DATE: 8-10-22	
	PHONE #: 503-879-5497	CERT#: 6302	

OHA - Drinking Water Program – Surface Water Quality Data Form

System Name: ROCK CREEK WATER DIST. ID #: OR 4100337 WTP: _____ Month/Year: 7-22

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]	CXT	[°C]		Use tables	Yes / No	[GPM]
11/520	0.9	226	203	9	7.5	60	Yes	48
21/600	0.8		181	9	7.5	58		47
31/530	0.8		181	9	7.5	58		45
41/600	0.7		158	9	7.5	58		43
51/630	0.7		158	9	7.5	58		42
61/575	0.6		136	9	7.5	57		44
71/130	0.6		136	9	7.4	57		45
81/230	0.5		113	9	7.4	57		43
91/200	0.5		113	9	7.4	57		44
101/130	0.4		90	9	7.4	55		45
111/100	0.4		90	9	7.4	55		43
121/630	0.6		136	9	7.5	57		42
131/600	0.5		115	9	7.5	57		41
141/520	0.5		115	9	7.5	57		42
151/530	0.5		115	9	7.5	57		46
161/600	0.5		115	9	7.5	57		51
171/630	0.5		115	9	7.5	57		54
181/530	0.5		115	9	7.5	57		49
191/520	0.4		90	9	7.5	55		44
201/550	0.4		90	9	7.5	55		42
211/600	0.4		90	9	7.5	55		45
221/530	0.4		90	9	7.5	55		36
231/430	0.4		90	9	7.5	55		31
241/520	0.4		90	9	7.5	55		29
251/600	0.3		68	9	7.5	55		55
261/530	0.4		90	9	7.5	55		46
271/600	0.4		90	9	7.5	55		40
281/630	0.4		90	9	7.5	55		42
291/520	0.5		113	9	7.5	57		48
301/575	0.6		136	9	7.5	57		53
311	0.6		136	9	7.5	57		49

³ If 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