


OHA - Drinking Water Services - Surface Water Quality Data Form
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Wallowa**
 Month/Year: **May-21**

System Name: **City of Joseph** ID#: **41** **00414**

WTP: **TP -**

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			0.12				0.12
2			0.15				0.15
3			0.13				0.13
4			0.12				0.12
5			0.15				0.15
6			0.13				0.13
7			0.16				0.16
8			0.14				0.14
9			0.12				0.12
10			0.15				0.15
11			0.11				0.11
12			0.13				0.13
13			0.14				0.14
14			0.12				0.12
15			0.12				0.12
16			0.15				0.15
17			0.11				0.11
18			0.11				0.11
19			0.13				0.13
20			0.12				0.12
21			0.12				0.12
22			0.13				0.13
23			0.15				0.15
24			0.12				0.12
25			0.15				0.15
26			0.15				0.15
27			0.12				0.12
28			0.14				0.14
29			0.13				0.13
30			0.15				0.15
31			0.15				0.15

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ²	Yes	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes	Yes	Yes
Notes:	PRINTED NAME: Levi Tickner		
	SIGNATURE: 		DATE: 6/4/2021
	PHONE #: (541)398-1804		CERT #: T-008780

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 Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :

System Name: City of Joseph ID#: 41 00414 Month/Year: May-21 Disinfection *Giardia* Log Inactiv: 1.0

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	0.5	2013	1006.5	9.4	7.59	46.7	YES	260
2	0.52	1934	1005.7	9.8	7.65	46.5	YES	270
3	0.53	1711	906.8	10.3	7.64	44.9	YES	305
4	0.52	1959	1018.7	10.2	7.63	45.0	YES	295
5	0.52	1762	916.2	10.9	7.60	42.5	YES	295
6	0.51	1581	806.3	11.1	7.57	41.5	YES	330
7	0.49	1896	929.0	11.6	7.71	42.0	YES	275
8	0.49	1649	808.0	11.8	7.64	40.5	YES	315
9	0.55	1642	903.1	11.9	7.58	39.7	YES	315
10	0.53	1729	916.4	11.8	7.51	38.9	YES	300
11	0.52	1137	591.2	11.4	7.67	42.1	YES	455
12	0.51	1393	710.4	11.9	7.69	41.0	YES	370
13	0.51	1066	543.7	11.8	7.65	40.7	YES	470
14	0.53	1060	561.8	12.6	7.34	34.4	YES	475
15	0.52	1060	551.2	12.9	7.58	36.8	YES	475
16	0.53	1011	535.8	12.7	7.53	36.6	YES	475
17	0.51	999	509.5	13.1	7.66	37.3	YES	475
18	0.53	1265	670.5	12.2	7.49	37.6	YES	400
19	0.52	1332	692.6	13.0	7.63	37.2	YES	385
20	0.51	1400	714.0	12.7	7.58	37.2	YES	370
21	0.52	1596	829.9	12.4	7.57	38.1	YES	325
22	0.52	1647	856.4	12.3	7.61	38.9	YES	315
23	0.52	1545	803.4	12.4	7.52	37.5	YES	335
24	0.46	1644	756.2	12.8	7.46	35.2	YES	315
25	0.51	1642	837.4	12.6	7.51	36.5	YES	315
26	0.51	1642	837.4	12.5	7.57	37.6	YES	315
27	0.52	1496	777.9	13.1	7.68	37.7	YES	345
28	0.51	1331	678.8	12.9	7.52	35.9	YES	382
29	0.5	1066	533.0	13.4	7.56	35.2	YES	465
30	0.52	1042	541.8	13.1	7.46	34.7	YES	477
31	0.53	1040	551.2	14.5	7.59	33.2	YES	475

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
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