

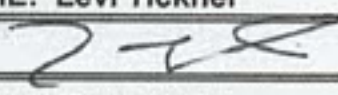
OHA - Drinking Water Services - Surface Water Quality Data Form  
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Wallowa**  
 Month/Year: **Mar-22**

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 <sup>1</sup> [NTU]
1			0.16				0.16
2			0.11				0.11
3			0.14				0.14
4			0.16				0.16
5			0.17				0.17
6			0.07				0.07
7			0.08				0.08
8			0.14				0.14
9			0.09				0.09
10			0.08				0.08
11			0.10				0.10
12			0.17				0.17
13			0.18				0.18
14			0.19				0.19
15			0.14				0.14
16			0.11				0.11
17			0.13				0.13
18			0.17				0.17
19			0.16				0.16
20			0.17				0.17
21			0.18				0.18
22			0.15				0.15
23			0.16				0.16
24			0.16				0.16
25			0.15				0.15
26			0.13				0.13
27			0.09				0.09
28			0.12				0.12
29			0.15				0.15
30			0.16				0.16
31			0.16				0.16

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings $\leq$ 1 NTU? <sup>2</sup> <b>Yes</b>	CT's met everyday? (see back) <b>Yes</b>	All Cl <sub>2</sub> residual at entry point $\geq$ 0.2 mg/l? <b>Yes</b>
All daily turbidity readings $\leq$ 5 NTU? <b>Yes</b>		

Notes:	PRINTED NAME: <b>Levi Tickner</b>	
	SIGNATURE: 	DATE: <b>4/10/2022</b>
	PHONE #: ( <b>541</b> )398-1804	T <b>008780</b>

<sup>1</sup> 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. <sup>2</sup> Filtered systems only.



OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :  
 Disinfection *Giardia* Log  
 Inactiv: 1.0

System Name: City of Joseph ID#: 41 00414 Month/Year: Mar-22

Date / Time	Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.51	2569	1310.2	7.5	8.21	66.3	YES	198
2	0.47	2523	1185.8	7.0	8.18	67.6	YES	197
3	0.51	2337	1191.9	7.3	7.70	55.9	YES	199
4	0.58	2330	1351.4	7.3	7.87	59.9	YES	199
5	0.57	2348	1338.4	7.3	7.40	50.6	YES	201
6	0.51	2365	1206.2	7.4	7.41	50.1	YES	201
7	0.5	2296	1148.0	7.3	7.46	51.2	YES	201
8	0.55	2394	1316.7	7.5	7.38	49.4	YES	200
9	0.52	2463	1280.8	7.5	7.25	47.0	YES	199
10	0.49	2440	1195.6	6.9	7.34	50.4	YES	198
11	0.52	2422	1259.4	7.1	7.56	54.0	YES	201
12	0.51	2438	1243.4	7.3	8.54	75.9	YES	201
13	0.52	2476	1287.5	8.1	8.06	60.4	YES	202
14	0.51	2504	1277.0	7.9	8.06	61.1	YES	202
15	0.49	2222	1088.8	8.7	8.10	58.6	YES	202
16	0.51	2211	1127.6	8.3	7.63	51.0	YES	203
17	0.49	2179	1067.7	8.6	7.94	55.7	YES	206
18	0.49	2158	1057.4	8.8	7.72	50.8	YES	208
19	0.43	2342	1007.1	8.5	7.45	46.8	YES	200
20	0.51	2345	1196.0	8.3	7.76	53.4	YES	200
21	0.45	2318	1043.1	8.6	7.21	42.8	YES	201
22	0.53	2295	1216.4	8.2	7.45	48.2	YES	203
23	0.51	2284	1164.8	8.5	7.51	48.2	YES	204
24	0.52	2387	1241.2	8.8	7.38	45.2	YES	205
25	0.51	2208	1126.1	8.7	7.73	51.4	YES	211
26	0.53	1973	1045.7	9.1	7.51	46.4	YES	219
27	0.47	2210	1038.7	9.7	7.33	41.6	YES	203
28	0.5	2353	1176.5	9.5	7.49	44.7	YES	198
29	0.44	2305	1014.2	8.9	6.45	32.3	YES	203
30	0.48	2273	1091.0	9.2	7.35	43.3	YES	205
31	0.49	2281	1117.7	9.0	7.33	43.7	YES	205

<sup>3</sup> If Cl<sub>2</sub> 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](mailto:dwp.dmce@state.or.us); 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350