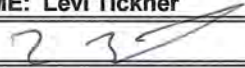


OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Wallowa**
 Month/Year: **Aug-23**

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			0.13			0.13	
2			0.11			0.11	
3			0.08			0.08	
4			0.12			0.12	
5			0.13			0.13	
6			0.10			0.10	
7			0.08			0.08	
8			0.15			0.15	
9			0.07			0.07	
10			0.16			0.16	
11			0.08			0.08	
12			0.13			0.13	
13			0.06			0.06	
14			0.14			0.14	
15			0.09			0.09	
16			0.06			0.06	
17			0.15			0.15	
18			0.11			0.11	
19			0.10			0.10	
20			0.19			0.19	
21			0.15			0.15	
22			0.16			0.16	
23			0.10			0.10	
24			0.07			0.07	
25			0.14			0.14	
26			0.11			0.11	
27			0.10			0.10	
28			0.11			0.11	
29			0.32			0.32	
30			0.15			0.15	
31			0.11			0.11	

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 Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes	Yes	Yes
Notes:	PRINTED NAME: Levi Tickner		
	SIGNATURE: 		DATE: 9/8/2023
	PHONE #: (541)760-9362		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- :
 Disinfection *Giardia* Log
 Inactiv: 1.0

System Name: City of Joseph ID#: 41 00414 Month/Year: Aug-23

Date / Time	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	0.49	589	288.6	18.5	7.67	26.1	YES	825
2	0.53	642	340.3	17.9	7.77	28.3	YES	760
3	0.54	626	338.0	18.0	7.56	26.0	YES	780
4	0.52	739	384.3	17.8	7.64	27.1	YES	660
5	0.54	744	401.8	17.6	7.72	28.4	YES	630
6	0.48	772	370.6	17.6	7.58	26.8	YES	600
7	0.44	653	287.3	17.7	7.56	26.3	YES	720
8	0.46	1132	520.7	17.4	7.77	29.0	YES	445
9	0.43	835	359.1	17.8	7.48	25.3	YES	600
10	0.48	703	337.4	17.8	7.51	25.7	YES	705
11	0.51	800	408.0	18.1	7.20	22.5	YES	600
12	0.52	681	354.1	18.3	7.65	26.3	YES	690
13	0.76	628	477.3	18.5	8.18	32.5	YES	770
14	0.63	624	393.1	18.8	7.60	25.3	YES	780
15	0.62	581	360.2	19.2	7.48	23.5	YES	840
16	0.58	641	371.8	19.5	7.65	24.5	YES	760
17	0.54	562	303.5	19.8	7.53	22.8	YES	870
18	0.56	570	319.2	19.5	7.48	22.9	YES	840
19	0.58	754	437.3	19.1	7.48	23.6	YES	635
20	0.42	789	331.4	19.6	7.58	23.2	YES	617
21	0.36	823	296.3	19.3	7.69	24.5	YES	600
22	0.26	431	112.1	18.9	8.13	29.3	YES	1080
23	0.34	1055	358.7	18.6	7.45	23.5	YES	480
24	0.38	964	366.3	18.9	7.68	25.2	YES	525
25	0.44	1059	466.0	19.0	7.43	22.9	YES	480
26	0.64	992	634.9	19.0	7.64	25.4	YES	510
27	0.55	855	470.3	19.1	7.65	25.0	YES	585
28	0.48	923	443.0	19.4	7.54	23.4	YES	540
29	0.53	651	345.0	19.6	7.17	20.2	YES	768
30	0.55	741	407.6	19.1	7.33	22.2	YES	669
31	0.51	923	470.7	18.9	7.39	22.9	YES	540

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