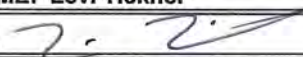


OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Wallowa**
 Month/Year: **Jan-24**

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			0.14				0.14
3			0.12				0.12
4			0.15				0.15
5			0.12				0.12
6			0.12				0.12
7			0.10				0.10
8			0.11				0.11
9			0.13				0.13
10			0.11				0.11
11			0.17				0.17
12			0.15				0.15
13			0.14				0.14
14			0.14				0.14
15			0.15				0.15
16			0.13				0.13
17			0.10				0.10
18			0.13				0.13
19			0.18				0.18
20			0.09				0.09
21			0.13				0.13
22			0.10				0.10
23			0.12				0.12
24			0.16				0.16
25			0.15				0.15
26			0.14				0.14
27			0.11				0.11
28			0.12				0.12
29			0.10				0.10
30			0.12				0.12
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) Yes	All Cl2 residual at entry point ≥ 0.2 mg/l? Yes
All daily turbidity readings ≤ 5 NTU? Yes		
Notes:	PRINTED NAME: Levi Tickner	
	SIGNATURE: 	DATE: 2/9/2024
	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- :

System Name: City of Joseph ID#: 41 00414 Month/Year: Jan-24

Disinfection *Giardia* Log Inactiv: 1.0

Date / Time	Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	0.67	1707	1143.7	7.8	7.98	60.9	YES	302
2	0.66	1489	982.7	7.9	7.76	55.8	YES	350
3	0.73	1300	949.0	7.8	7.77	56.9	YES	400
4	0.7	1406	984.2	7.6	7.80	58.1	YES	370
5	0.69	1385	955.7	7.7	7.74	56.4	YES	375
6	0.72	1268	913.0	7.5	7.77	58.0	YES	410
7	0.71	1385	983.4	7.5	7.72	56.9	YES	375
8	0.68	1386	942.5	7.2	7.80	59.5	YES	375
9	0.59	1388	818.9	7.3	7.71	56.6	YES	375
10	0.67	1388	930.0	7.0	7.74	59.0	YES	375
11	0.62	1600	992.0	7.1	7.77	58.9	YES	325
12	0.6	2079	1247.4	7.2	7.76	58.1	YES	250
13	0.62	1733	1074.5	6.7	8.24	71.8	YES	300
14	0.56	1736	972.2	6.2	7.83	63.5	YES	300
15	0.65	1509	980.9	6.1	7.79	63.7	YES	343
16	0.66	1420	937.2	6.0	7.60	59.9	YES	365
17	0.6	1215	729.0	5.9	7.74	63.0	YES	425
18	0.62	1475	914.5	6.3	7.71	60.8	YES	350
19	0.65	1588	1032.2	6.4	7.70	60.4	YES	325
20	0.68	1629	1107.7	6.4	7.73	61.3	YES	320
21	0.66	1733	1143.8	6.6	7.71	59.9	YES	300
22	0.6	1368	820.8	6.5	7.69	59.4	YES	380
23	0.68	1385	941.8	6.6	7.66	58.9	YES	375
24	0.71	1482	1052.2	6.8	7.71	59.4	YES	350
25	0.7	1650	1155.0	6.4	7.71	61.0	YES	315
26	0.7	1502	1051.4	6.6	7.75	61.0	YES	345
27	0.65	1599	1039.4	6.6	7.73	60.2	YES	325
28	0.68	1464	995.5	6.7	7.69	59.2	YES	355
29	0.7	2097	1467.9	6.6	7.79	61.9	YES	247
30	0.69	1301	897.7	6.9	7.72	59.1	YES	400
31	0.68	1368	930.2	7.1	7.69	57.6	YES	380

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