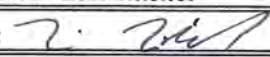


OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Wallowa**
 Month/Year: **Feb-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			0.09				0.09
2			0.18				0.18
3			0.16				0.16
4			0.11				0.11
5			0.11				0.11
6			0.13				0.13
7			0.25				0.25
8			0.13				0.13
9			0.13				0.13
10			0.10				0.10
11			0.12				0.12
12			0.18				0.18
13			0.13				0.13
14			0.17				0.17
15			0.12				0.12
16			0.16				0.16
17			0.13				0.13
18			0.10				0.10
19			0.12				0.12
20			0.14				0.14
21			0.12				0.12
22			0.09				0.09
23			0.15				0.15
24			0.16				0.16
25			0.13				0.13
26			0.15				0.15
27			0.12				0.12
28			0.10				0.10
29			0.07				0.07
30							
31							

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: On February 28th, 2024 we started running solely on well.	PRINTED NAME: Levi Tikcner		
	SIGNATURE: 		DATE: 3-7-2024
	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- :
 Disinfection *Giardia* Log
 Inactiv: 1.0

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

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	0.71	1506	1069.3	7.2	7.71	57.8	YES	345
2	0.73	1672	1220.6	7.4	7.73	57.6	YES	310
3	0.69	1702	1174.4	7.0	7.74	59.1	YES	305
4	0.68	1460	992.8	7.0	7.73	58.8	YES	355
5	0.63	1483	934.3	7.0	7.69	57.6	YES	350
6	0.66	2028	1338.5	7.1	7.74	58.5	YES	255
7	0.65	1503	977.0	7.2	7.68	56.8	YES	345
8	0.61	1673	1020.5	7.0	7.82	60.3	YES	310
9	0.56	1959	1097.0	6.8	7.74	59.0	YES	264
10	0.65	1850	1202.5	6.7	7.94	64.5	YES	280
11	0.61	1298	791.8	6.8	7.79	60.4	YES	375
12	0.69	1501	1035.7	6.8	7.76	60.3	YES	315
13	0.69	1462	1008.8	6.6	7.71	60.1	YES	318
14	0.6	1354	812.4	6.6	7.73	59.9	YES	325
15	0.75	1365	1023.8	6.4	7.72	61.5	YES	375
16	0.75	1491	1118.3	6.6	7.83	63.2	YES	325
17	0.66	1727	1139.8	6.3	7.70	60.9	YES	300
18	0.87	1526	1327.6	6.4	7.80	64.2	YES	300
19	0.75	1238	928.5	6.5	7.67	60.0	YES	380
20	0.78	1110	865.8	6.8	7.74	60.5	YES	425
21	0.8	1370	1096.0	6.5	7.76	62.4	YES	340
22	0.77	1357	1044.9	6.9	7.82	61.8	YES	340
23	0.74	1331	984.9	6.9	7.75	60.1	YES	350
24	0.75	1846	1384.5	6.8	7.75	60.5	YES	250
25	0.7	1331	931.7	6.8	7.74	60.0	YES	350
26	0.71	1350	958.5	7.5	7.72	56.9	YES	345
27	0.72	1664	1198.1	7.0	7.71	58.7	YES	280
28								
29								
30								
31								

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