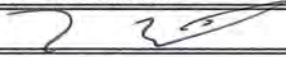


OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Wallowa**
 Month/Year:

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			0.20				0.20
2			0.14				0.14
3			0.10				0.10
4			0.18				0.18
5			0.15				0.15
6			0.12				0.12
7			0.12				0.12
8			0.12				0.12
9			0.09				0.09
10			0.13				0.13
11			0.14				0.14
12			0.14				0.14
13			0.20				0.20
14			0.19				0.19
15			0.10				0.10
16			0.16				0.16
17			0.18				0.18
18			0.14				0.14
19			0.24				0.24
20			0.19				0.19
21			0.14				0.14
22			0.14				0.14
23			0.13				0.13
24			0.16				0.16
25			0.11				0.11
26			0.13				0.13
27			0.18				0.18
28			0.13				0.13
29			0.13				0.13
30			OFF				OFF
31							

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings \leq 1 NTU? ² Yes	CT's met everyday? (see back) Yes	All Cl ₂ residual at entry point \geq 0.2 mg/l? Yes
All daily turbidity readings \leq 5 NTU? Yes		
Notes:	PRINTED NAME: Levi Tickner	
	SIGNATURE: 	DATE: 5/9/2024
	PHONE #: (541) 760-9362	CERT #: T-0008780

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: Apr-24

Date / Time	Minimum 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	0.55	1516	833.8	12.5	7.97	43.7	YES	310
2	0.7	1343	940.1	9.4	8.01	55.4	YES	350
3	0.54	1704	920.2	9.5	7.99	53.7	YES	305
4	0.47	1737	816.4	9.5	7.71	48.2	YES	300
5	0.49	1737	851.1	9.3	7.65	47.9	YES	300
6	0.5	2085	1042.5	9.2	7.71	49.3	YES	250
7	0.49	1585	776.7	9.0	7.64	48.7	YES	330
8	0.58	1734	1005.7	8.9	7.72	51.0	YES	300
9	0.51	1732	883.3	9.2	7.71	49.4	YES	300
10	0.52	1738	903.8	9.2	7.66	48.6	YES	300
11	0.55	1738	955.9	9.2	7.61	47.9	YES	300
12	0.53	2647	1402.9	9.8	7.58	45.4	YES	200
13	0.61	2395	1461.0	10.0	7.58	45.2	YES	220
14	0.64	2337	1495.7	10.2	7.67	46.2	YES	225
15	0.58	1908	1106.6	10.5	7.67	45.0	YES	275
16	0.61	1908	1163.9	10.5	7.66	45.0	YES	275
17	0.68	1739	1182.5	9.9	7.66	47.2	YES	300
18	0.72	1995	1436.4	9.6	7.59	47.2	YES	261
19	0.72	1958	1409.8	9.8	7.57	46.3	YES	262
20	0.7	1964	1374.8	10.1	7.60	45.7	YES	265
21	0.61	1758	1072.4	10.4	7.63	44.8	YES	298
22	0.4	1711	684.4	10.4	7.63	43.8	YES	304
23	0.69	1485	1024.7	11.0	7.62	43.3	YES	350
24	0.5	1777	888.5	11.5	7.66	41.6	YES	295
25	0.49	2017	988.3	10.8	7.67	43.7	YES	260
26	0.52	2009	1044.7	10.9	7.65	43.2	YES	260
27	0.55	1908	1049.4	10.6	7.68	44.7	YES	275
28	0.58	2012	1167.0	10.9	7.66	43.7	YES	260
29	0.66	1803	1190.0	10.8	7.68	44.7	YES	290
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