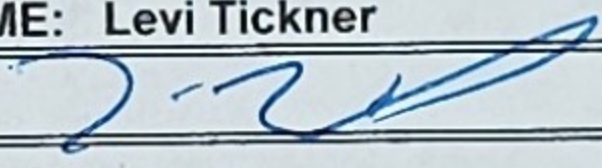


OHA - Drinking Water Services - Surface Water Quality Data Form  
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

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

System Name: <b>City of Joseph</b>		ID#: <b>41 00414</b>		WTP : <b>TP -</b>			
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			0.09				0.09
2			0.07				0.07
3			0.11				0.11
4			0.09				0.09
5			0.08				0.08
6			0.08				0.08
7			0.17				0.17
8			0.17				0.17
9			0.06				0.06
10			0.08				0.08
11			0.06				0.06
12			0.09				0.09
13			0.07				0.07
14			0.08				0.08
15			0.08				0.08
16			0.06				0.06
17			0.09				0.09
18			0.07				0.07
19			0.07				0.07
20			0.08				0.08
21			0.08				0.08
22			0.15				0.02
23			0.06				0.06
24			0.09				0.09
25			0.14				0.14
26			0.15				0.15
27			0.09				0.09
28			0.09				0.09
29			0.08				0.08
30			0.09				0.09
31							

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>	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: <b>Levi Tickner</b>	
	SIGNATURE: 	DATE: <b>10/9/2024</b>
	PHONE #: <b>(541)760-9362</b>	CERT #: <b>T-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- :

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

Disinfection *Giardia* Log Inactiv: 1.0

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	0.52	1307	679.6	19.1	7.59	24.4	YES	365
2	0.52	1797	934.4	19.1	7.61	24.6	YES	275
3	0.56	1279	716.2	19.2	7.71	25.5	YES	401
4	0.57	955	544.4	18.6	7.50	24.5	YES	510
5	0.57	1005	572.9	19.2	7.52	23.7	YES	510
6	0.55	1096	602.8	19.6	7.62	23.9	YES	460
7	0.53	1008	534.2	19.5	7.49	22.9	YES	500
8	0.57	1096	624.7	19.6	7.69	24.6	YES	460
9	0.56	1044	584.6	19.0	7.49	23.8	YES	475
10	0.57	917	522.7	19.2	7.65	24.9	YES	550
11	0.52	1486	772.7	18.9	7.39	22.9	YES	344
12	0.55	2005	1102.8	18.4	7.64	26.1	YES	260
13	0.56	1215	680.4	18.0	7.56	26.1	YES	429
14	0.53	1245	659.9	17.7	7.68	27.7	YES	412
15	0.59	1538	907.4	17.9	7.60	26.8	YES	339
16	0.56	1768	990.1	17.8	7.69	27.8	YES	290
17	0.59	1583	934.0	17.8	7.70	28.0	YES	324
18	0.55	1654	909.7	17.6	7.75	28.7	YES	310
19	0.51	1574	802.7	17.7	7.63	27.2	YES	315
20	0.51	1599	815.5	18.0	7.64	26.7	YES	310
21	0.53	1325	702.3	17.3	7.58	27.5	YES	400
22	0.52	1465	761.8	17.1	7.62	28.2	YES	350
23	0.54	1288	695.5	19.3	7.37	22.2	YES	398
24	0.52	1126	585.5	16.8	7.57	28.3	YES	410
25	0.47	1755	824.9	16.9	7.69	29.2	YES	263
26	0.51	2066	1053.7	16.7	7.63	29.0	YES	240
27	0.52	2028	1054.6	17.0	7.52	27.4	YES	255
28	0.53	1480	784.4	17.1	7.72	29.3	YES	335
29	0.5	1922	961.0	17.3	7.60	27.6	YES	258
30	0.5	1549	774.5	16.9	7.57	28.0	YES	320
31								

<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; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350