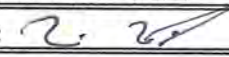


OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Wallowa**
 Month/Year: **Feb-25**

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			0.15				0.15
3			0.11				0.11
4			0.11				0.11
5			0.13				0.13
6			0.14				0.14
7			0.12				0.12
8			0.10				0.10
9			0.09				0.09
10			0.13				0.13
11			0.10				0.10
12			0.15				0.15
13			0.16				0.16
14			0.10				0.10
15			0.12				0.12
16			0.10				0.10
17			0.09				0.09
18			0.07				0.07
19			0.09				0.09
20			0.08				0.08
21			0.11				0.11
22			0.12				0.12
23			0.08				0.08
24			0.16				0.16
25			0.08				0.08
26			0.18				0.18
27			0.09				0.09
28			0.11				0.11
29							
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 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: 3/10/2025
	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-25

Date / Time	Minimum 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	0.65	3029	1968.9	5.8	7.72	63.4	YES	175
2	0.75	3534	2650.5	4.9	7.68	67.2	YES	150
3	0.68	3313	2252.8	5.2	7.70	65.8	YES	160
4	0.67	3534	2367.8	5.0	7.29	57.4	YES	150
5	0.64	3420	2188.8	4.9	7.68	66.3	YES	155
6	0.49	2573	1260.8	4.6	7.57	63.9	YES	206
7	0.5	2387	1193.5	4.9	7.76	67.2	YES	222
8	0.5	2227	1113.5	5.3	7.73	64.7	YES	238
9	0.47	2585	1215.0	5.4	7.73	64.0	YES	205
10	0.42	2052	861.8	5.1	7.60	61.9	YES	250
11	0.4	2015	806.0	4.8	7.81	68.1	YES	260
12	0.46	2005	922.3	4.2	7.81	71.4	YES	260
13	0.38	1931	733.8	4.5	7.53	62.6	YES	270
14	0.39	2370	924.3	5.2	7.83	66.6	YES	220
15	0.44	2086	917.8	5.0	8.88	100.1	YES	250
16	0.46	2086	959.6	5.1	7.71	64.8	YES	250
17	0.43	2370	1019.1	4.9	7.70	65.2	YES	220
18	0.55	2086	1147.3	5.3	7.82	67.2	YES	250
19	0.59	3259	1922.8	5.1	7.80	67.9	YES	160
20	0.6	2945	1767.0	5.1	7.72	66.1	YES	180
21	0.66	2945	1943.7	6.0	7.77	63.7	YES	180
22	0.7	2370	1659.0	5.6	7.71	64.4	YES	220
23	0.72	2208	1589.8	5.9	8.11	73.1	YES	240
24	0.72	2120	1526.4	5.9	7.54	59.4	YES	250
25	0.71	2650	1881.5	6.0	7.80	64.8	YES	200
26	0.68	2038	1385.8	5.8	8.03	71.2	YES	260
27	0.63	2039	1284.6	6.5	7.77	61.4	YES	260
28	0.65	2038	1324.7	7.0	7.79	59.9	YES	260
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