

OHA - Drinking Water Services -Turbidity Monitoring Report Form
Conventional or Direct Filtration

County: Coos
Month/Year: Nov-23

System Name:	Lakeside Water District		ID#4100	463		WTP : TP - A	
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	OFF	OFF	OFF	0.03	0.03	0.03	0.03
2	OFF	OFF	OFF	0.03	OFF	OFF	0.03
3	OFF	OFF	OFF	0.03	0.03	OFF	0.03
4	OFF	OFF	OFF	0.03	OFF	OFF	0.03
5	OFF	OFF	OFF	0.03	0.03	OFF	0.03
6	OFF	OFF	OFF	0.03	0.03	OFF	0.03
7	OFF	OFF	OFF	0.03	0.03	0.03	0.03
8	OFF	OFF	OFF	0.03	0.03	OFF	0.03
9	OFF	OFF	OFF	0.03	0.03	OFF	0.03
10	OFF	OFF	OFF	0.03	0.03	OFF	0.03
11	OFF	OFF	OFF	0.03	0.03	OFF	0.03
12	OFF	OFF	OFF	0.03	0.03	OFF	0.03
13	OFF	OFF	OFF	0.03	0.03	OFF	0.03
14	OFF	OFF	OFF	0.03	0.03	OFF	0.03
15	OFF	OFF	OFF	OFF	0.03	0.03	0.03
16	OFF	OFF	OFF	0.03	0.03	OFF	0.03
17	OFF	OFF	OFF	0.03	0.03	OFF	0.03
18	OFF	OFF	OFF	0.03	0.03	OFF	0.03
19	OFF	OFF	OFF	0.03	0.03	OFF	0.03
20	OFF	OFF	OFF	0.03	0.03	OFF	0.03
21	OFF	OFF	OFF	0.03	0.03	0.03	0.03
22	OFF	OFF	OFF	0.03	0.03	OFF	0.03
23	OFF	OFF	OFF	0.03	0.03	OFF	0.03
24	OFF	OFF	OFF	0.03	0.04	OFF	0.04
25	OFF	OFF	OFF	0.03	0.03	OFF	0.03
26	OFF	OFF	OFF	0.03	0.03	OFF	0.03
27	OFF	OFF	OFF	0.03	0.03	OFF	0.03
28	OFF	OFF	OFF	0.03	0.03	0.03	0.03
29	OFF	OFF	OFF	OFF	0.03	0.03	0.03
30	OFF	OFF	OFF	0.03	OFF	OFF	0.03
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? YES	CT's met everyday? (see back) YES	All Cl2 residual at entry point ≥ 0.2 mg/l? YES
All 4-hour turbidity readings ≤ 1 NTU? YES		
All turbidity readings < IFE ² triggers YES		

Notes:

PRINTED NAME: Marty Ball

SIGNATURE: 

PHONE# 541-266-7784

DATE=12-1-2023

CERT#8276

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 IFE = Indivd. Filter Eff. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - ;

A

System Name:	Lakeside Water District	ID#: 41	00463	Month/Year:	Nov-23	Disinfection Giardia Log Inactly:	0.6
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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)
11/1/14:30	1.21	55	66.6	17.0	7.19	13.1	YES	460
11/2/14:30	1.16	55	63.8	16.3	7.25	14.0	YES	450
11/3/14:00	1.22	55	67.1	16.3	7.14	13.6	YES	450
11/4/14:00	1.08	55	59.4	16.4	7.16	13.3	YES	450
11/5/13:00	1.17	55	64.4	16.4	7.17	13.5	YES	450
11/6/12:30	1.17	55	64.4	15.7	7.19	14.2	YES	460
11/7/12:30	1.18	55	64.9	16.3	7.27	14.1	YES	450
11/8/14:30	1.1	55	60.5	15.4	7.21	14.5	YES	450
11/9/13:30	1.23	55	67.7	15.5	7.23	14.7	YES	450
11/10/13:00	1.13	55	62.2	15.6	7.27	14.7	YES	450
11/11/13:00	1.16	55	63.8	15.4	7.24	14.8	YES	450
11/12/13:00	1.1	55	60.5	15.5	7.28	14.8	YES	450
11/13/12:30	1.16	55	63.8	16.3	7.24	13.9	YES	450
11/14/14:00	1.06	55	58.3	16.2	7.14	13.3	YES	450
11/15/15:00	1.21	55	66.6	16.6	7.28	13.9	YES	450
11/16/14:30	1.21	55	66.6	16.8	7.28	13.7	YES	450
11/17/13:00	1.14	55	62.7	16.9	7.22	13.2	YES	450
11/18/13:00	1.24	55	68.2	16.8	7.24	13.6	YES	450
11/19/13:30	1.08	55	69.4	16.9	7.23	13.2	YES	450
11/20/13:00	1.26	55	69.3	14.3	7.28	16.3	YES	450
11/21/13:00	1.2	55	66.0	14.8	7.24	15.4	YES	450
11/22/14:00	1.05	55	57.8	13.8	7.16	15.7	YES	450
11/23/13:30	1.1	55	60.5	13.6	7.18	16.2	YES	450
11/24/14:30	1.15	55	63.3	13.5	7.14	16.1	YES	450
11/25/14:30	1.2	55	66.0	13.5	7.17	16.4	YES	450
11/26/12:30	1.18	55	64.9	13.7	7.19	16.3	YES	450
11/27/12:30	1.23	55	67.7	14.3	7.23	16.0	YES	450
11/28/13:00	1.19	55	65.5	12.3	7.18	18.1	YES	450
11/29/15:00	1.02	55	56.1	12.3	7.23	18.0	YES	450
11/30/14:00	1.25	55	68.8	13.6	7.15	16.3	YES	450
31		55					NO	450

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2014