

**OHA - Drinking Water Services -Turbidity Monitoring Report Form**

**Conventional or Direct Filtration**

County: **Curry**  
 Month/Year: **Oct-21**

**System Name:** **Langlois Water District**      **ID#: 4100466**      **WTP : TP - A**

Day	24:00 [NTU]	04:00 [NTU]	08:00 [NTU]	12:00 [NTU]	16:00 [NTU]	20:00 [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	off	off	0.03	0.03	off	off	0.03
2	off	off	0.03	0.03	off	off	0.03
3	off	off	0.03	0.03	off	off	0.03
4	off	off	0.04	0.35	off	off	0.04
5	off	off	off	0.03	off	off	0.03
6	off	off	0.03	0.03	off	off	0.03
7	off	off	0.03	0.03	off	off	0.03
8	off	off	0.03	0.03	off	off	0.03
9	off	off	0.03	0.03	off	off	0.03
10	off	off	0.03	0.03	off	off	0.03
11	off	off	0.03	0.03	off	off	0.04
12	off	off	0.03	0.03	off	off	0.03
13	off	off	0.03	0.03	off	off	0.03
14	off	off	0.03	0.03	off	off	0.03
15	off	off	0.03	0.03	off	off	0.05
16	off	off	0.03	0.03	off	off	0.03
17	off	off	0.03	0.03	off	off	0.03
18	off	off	0.03	0.03	off	off	0.03
19	off	off	0.03	0.03	off	off	0.03
20	off	off	0.03	0.03	off	off	0.03
21	off	off	0.03	0.03	off	off	0.03
22	off	off	0.03	0.03	0.03	off	0.03
23	off	off	0.03	0.03	off	off	0.03
24	off	off	0.03	0.03	off	off	0.03
25	off	off	0.03	0.03	off	off	0.03
26	off	off	0.03	0.03	0.03	off	0.03
27	off	off	0.03	0.03	0.03	off	0.03
28	off	off	0.03	0.03	off	off	0.03
29	off	off	0.03	0.03	off	off	0.03
30	off	off	0.03	0.03	off	off	0.03
31	off	off	off	off	off	off	

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

<b>Notes:</b>	<b>Printed Darrel Lockard</b>	
	<b>SIGNATURE:</b>	<b>10/08/21</b>
	<b>Phone# 541- 222-9997</b>	<b>CERT# 2853</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> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : A

System Name:	Langlois Water District	ID#: 4100466	Month/Year:	Sept 21	Disinfection <i>Giardia</i> Log Inactiv:	1
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Date / Time	Minimum 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	0.3	207	62.1	17.4	6.96	21.1	YES	207
2	0.31	207	64.2	17.6	6.86	20.0	YES	207
3	0.34	207	70.4	17.2	7.15	23.0	YES	207
4	0.31	207	64.2	17.3	7.19	23.1	YES	207
5	0.32	207	66.2	17.6	7.23	23.1	YES	207
6	0.33	207	68.3	17.6	7.20	22.8	YES	207
7	0.32	207	66.2	17.8	7.26	23.0	YES	207
8	0.3	207	62.1	17.6	7.28	23.4	YES	207
9	0.3	207	62.1	17.5	7.30	23.8	YES	207
10	0.3	207	62.1	17.9	7.32	23.3	YES	207
11	0.3	207	62.1	17.7	7.30	23.5	YES	207
12	0.27	207	55.9	17.7	7.32	23.5	YES	207
13	0.27	207	55.9	17.5	7.30	23.7	YES	207
14	0.27	207	55.9	17.3	7.29	23.9	YES	207
15	0.28	207	58.0	17.7	7.35	23.8	YES	207
16	0.28	207	58.0	16.9	7.33	25.0	YES	207
17	0.28	207	58.0	16.5	7.36	25.9	YES	207
18	0.3	207	62.1	16.3	7.34	26.2	YES	207
19	0.29	207	60.0	16.4	7.36	26.1	YES	207
20	0.3	207	62.1	16.6	7.36	25.8	YES	207
21	0.27	207	55.9	16.9	7.44	26.0	YES	207
22	0.25	207	51.8	16.8	7.39	25.6	YES	207
23	0.25	207	51.8	16.7	7.38	25.7	YES	207
24	0.25	207	51.8	17.7	7.63	26.4	YES	207
25	0.27	207	55.9	17.2	7.58	26.8	YES	207
26	0.29	207	60.0	17.4	7.56	26.3	YES	207
27	0.27	207	55.9	17.1	7.78	29.1	YES	207
28	0.26	207	53.8	16.7	7.80	30.1	YES	207
29	0.25	207	51.8	16.2	7.83	31.4	YES	207
30	0.25	207	51.8	16.3	7.83	31.2	YES	207
31		207						207

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, nc