

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: **Curry**  
 Month/Year: **Feb-23**

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	0.07	0.07	off	off	0.07
2	off	off	0.03	0.03	off	off	0.03
3	off	off	0.06	0.06	off	off	0.06
4	off	off	0.05	0.05	off	off	0.05
5	off	off	0.08	0.08	off	off	0.08
6	off	off	0.08	0.08	off	off	0.08
7	off	off	0.07	0.07	off	off	0.07
8	off	off	0.03	0.03	off	off	0.03
9	off	off	0.08	0.08	off	off	0.80
10	off	off	0.02	0.02	off	off	0.02
11	off	off	0.08	0.08	off	off	0.08
12	off	off	0.02	0.02	off	off	0.02
13	off	off	0.09	0.09	off	off	0.09
14	off	off	0.02	0.02	off	off	0.02
15	off	off	0.05	0.05	off	off	0.05
16	off	off	0.04	0.04	off	off	0.04
17	off	off	0.05	0.05	off	off	0.05
18	off	off	0.07	0.068	off	off	0.07
19	off	off	0.04	0.04	off	off	0.04
20	off	off	0.03	0.03	off	off	0.03
21	off	off	0.049	0.05	off	off	0.05
22	off	off	0.09	0.09	off	off	0.09
23	off	off	0.02	0.02	off	off	0.02
24	off	off	0.05	0.05	off	off	0.05
25	off	off	0.03	0.03	off	off	0.03
26	off	off	0.06	0.06	off	off	0.06
27	off	off	0.06	0.06	off	off	0.06
28	off	off	0.06	0.06	off	off	0.06
29	off	off	off	off	off	off	
30	off	off	off	off	off	off	
31	off	off	off	off	off	off	

Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? All 4-hour turbidity readings ≤ 1 NTU? All turbidity readings < IFE <sup>2</sup> triggers	CT's met everyday? (see back)
All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l?	
yes Yes Yes	Yes
Yes	
<b>Notes:</b>	Printed Darrel Lockard SIGNATURE: <i>Darrel Lockard</i> Phone# 541- 222-9997
	03/10/23 CERT# 2853

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not

**OHA - Drinking Water Program - Surface Water Quality Data Form**

**WTP - : A**

<b>System Name:</b> Langlois Water District	<b>ID#: 4100466</b>	<b>Month/Year:</b> 03/01/23	<b>Disinfection <i>Giardia</i> Log Inactiv:</b> 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]	<b>C X T</b>	[° C]		formula	Yes / No	[GPM]
1	0.3	207	62.1	8.0	7.49	48.3	YES	207
2	0.39	207	80.7	7.9	7.46	48.6	YES	207
3	0.42	207	86.9	8.6	7.45	46.4	YES	207
4	0.43	207	89.0	9.1	7.48	45.4	YES	207
5	0.43	207	89.0	9.0	7.41	44.6	YES	207
6	0.4	207	82.8	8.6	7.40	45.5	YES	207
7	0.34	207	70.4	9.1	7.48	45.0	YES	207
8	0.3	207	62.1	8.6	7.57	47.8	YES	207
9	0.45	207	93.2	8.6	7.58	48.8	YES	207
10	0.42	207	86.9	9.7	7.42	42.7	YES	207
11	0.33	207	68.3	9.1	7.45	44.4	YES	207
12	0.25	207	51.8	9.2	7.53	45.0	YES	207
13	0.28	207	58.0	9.5	7.53	44.3	YES	207
14	0.3	207	62.1	9.0	7.52	45.7	YES	207
15	0.28	207	58.0	7.8	7.48	48.7	YES	207
16	0.26	207	53.8	9.0	7.50	45.2	YES	207
17	0.26	207	53.8	9.0	7.54	45.8	YES	207
18	0.28	207	58.0	9.8	7.46	42.3	YES	207
19	0.35	207	72.5	10.0	7.57	43.8	YES	207
20	0.35	207	72.5	10.3	7.66	44.3	YES	207
21	0.34	207	70.4	9.7	7.56	44.4	YES	207
22	0.33	207	68.3	9.1	7.50	45.2	YES	207
23	0.3	207	62.1	9.1	7.55	45.9	YES	207
24	0.27	207	55.9	7.7	7.55	50.2	YES	207
25	0.29	207	60.0	7.7	7.62	51.6	YES	207
26	0.33	207	68.3	8.1	7.63	50.6	YES	207
27	0.35	207	72.5	8.0	7.58	50.2	YES	207
28	0.33	207	68.3	8.4	7.53	47.9	YES	207
29								
30								
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.