

OHA - Drinking Water Services -Turbidity Monitoring Report Form

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

Conventional or Direct Filtration

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 ¹ [NTU]
1			0.08	0.09			0.09
2			0.07	0.09			0.09
3			0.07	0.08			0.08
4			0.07	0.08			0.08
5			0.07	0.07			0.07
6			0.08	0.09			0.09
7			0.08	0.08			0.08
8			0.07	0.07			0.07
9			0.07	0.07			0.07
10			0.08	0.09			0.09
11			0.07	0.10			0.10
12			0.10	0.10			0.10
13			0.10	0.10			0.10
0.5			0.10	0.20			0.20
15			0.08	0.10			0.10
16			0.10	0.10			0.10
17			0.10	0.20			0.20
18			0.10	0.20			0.20
19			0.10	0.20			0.20
20			0.10	0.10			0.10
21			0.20	0.20			0.20
22			0.10	0.50			0.05
23			0.10	0.10			0.10
24			0.07	0.09			0.09
25			0.06	0.10			0.10
26			0.08	0.10			0.10
27			0.10	0.10			0.10
28			0.07	0.08			0.08
29			0.08	0.09			0.09
30			0.09	0.10			0.10
31			0.10	0.10			0.10

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes All turbidity readings < IFE ² triggers <input checked="" type="checkbox"/> Yes	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes
Notes:	Printed Name: Darrell Lockard	
	SIGNATURE: <i>Darrel Lockard</i>	11/10/2023
	PHONE #: (541) 222-9997	CERT #: 2853

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 = 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:	Oct-23	Disinfection <i>Giardia</i> Log Inactiv:	1
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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	0.6	207	124.2	14.9	7.01	26.3	YES	207
2	0.9	207	186.3	15.2	6.96	26.2	YES	207
3	0.81	207	167.7	16.0	6.78	23.0	YES	207
4	0.82	207	169.7	15.5	6.92	25.0	YES	207
5	0.82	207	169.7	15.9	6.91	24.3	YES	207
6	0.76	207	157.3	15.8	6.82	23.5	YES	207
7	0.87	207	180.1	15.4	6.86	24.8	YES	207
8	0.87	207	180.1	15.9	6.95	24.8	YES	207
9	0.82	207	169.7	16.0	6.87	23.8	YES	207
10	0.83	207	171.8	15.9	6.95	24.7	YES	207
11	0.88	207	182.2	15.4	7.16	27.8	YES	207
12	0.44	207	91.1	14.6	7.32	29.6	YES	207
13	0.6	207	124.2	14.7	7.27	29.3	YES	207
14	0.67	207	138.7	15.0	7.39	30.3	YES	207
15	0.78	207	161.5	15.2	7.18	28.0	YES	207
16	0.58	207	120.1	15.6	7.22	27.1	YES	207
17	0.54	207	111.8	15.1	7.26	28.3	YES	207
18	0.7	207	144.9	15.3	7.30	28.8	YES	207
19	0.8	207	165.6	15.0	7.37	30.5	YES	207
20	0.8	207	165.6	14.9	7.30	30.0	YES	207
21	0.85	207	176.0	14.9	7.29	30.0	YES	207
22	0.61	207	126.3	15.7	7.21	26.9	YES	207
23	0.51	207	105.6	15.5	7.22	27.0	YES	207
24	0.68	207	140.8	14.2	7.24	30.3	YES	207
25	0.71	207	147.0	13.9	7.28	31.5	YES	207
26	0.51	207	105.6	13.3	7.27	31.9	YES	207
27	0.61	207	126.3	12.2	7.27	35.2	YES	207
28	0.55	207	113.9	11.9	7.32	36.3	YES	207
29	0.9	207	186.3	12.7	7.27	34.7	YES	207
30	0.9	207	186.3	12.1	7.32	37.2	YES	207
31	0.8		0.0	12.1	7.29	36.4	NO	

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