

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

County: **Curry**
 Month/Year: **Nov-24**

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	OFF	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	OFF	0.1	0.07	OFF	0.1
3	OFF	OFF	OFF	0.2	0.2	OFF	0.2
4	OFF	OFF	OFF	OFF	0.2	0.07	0.2
5	0.1	OFF	0.1	0.2	0.07	OFF	0.2
6	OFF	OFF	0.2	0.04	0.05	0.1	0.2
7	0.2	OFF	0.2	0.06	0.1	OFF	0.2
8	OFF	OFF	OFF	0.2	0.04	OFF	0.2
9	OFF	OFF	0.05	0.15	0.2	OFF	0.2
10	OFF	OFF	0.15	0.05	0.15	OFF	0.1
11	OFF	OFF	OFF	0.2	0.2	OFF	0.2
12	OFF	OFF	OFF	0.2	0.2	OFF	0.2
13	OFF	OFF	OFF	OFF	OFF	OFF	Off
14	OFF	OFF	OFF	OFF	OFF	OFF	Off
15	0.2	0.2	0.2	0.2	0.2	OFF	0.2
16	Off	Off	0.2	0.2	0.1	OFF	0.2
17	OFF	OFF	OFF	0.2	0.2	OFF	0.2
18	OFF	OFF	OFF	OFF	0.2	0.2	0.2
19	0.4	OFF	OFF	0.2	0.2	0.2	0.4
20	0.4	OFF	OFF	0.2	OFF	OFF	0.4
21	0.1	0.2	0.1	0.2	0.2	0.2	0.2
22	0.2	0.06	0.2	OFF	OFF	OFF	0.2
23	OFF	OFF	OFF	OFF	0.08	0.08	0.08
24	0.1	0.2	0.2	0.2	0.06	0.08	0.2
25	OFF	OFF	OFF	0.3	0.2	OFF	0.3
26	OFF	OFF	OFF	0.05	0.1	0.2	0.2
27	OFF	OFF	OFF	0.04	0.04	0.1	0.1
28	0.2	OFF	0.2	0.03	0.03	OFF	0.2
29	OFF	OFF	OFF	0.1	0.2	OFF	0.2
30	OFF	OFF	0.04	0.04	0.1	OFF	0.1
31	OFF	OFF	OFF	OFF	OFF	OFF	OFF

Conventional or Direct Filtration				Monthly Summary (Answer Yes or No)			
95% of 4-hour turbidity readings ≤ 0.3 NTU?		<input checked="" type="radio"/> Yes ^P		CT's met everyday? (see back)		All Cl ₂ residual at entry point ≥ 0.2 mg/l?	
All 4-hour turbidity readings ≤ 1 NTU?		<input checked="" type="radio"/> Yes		<input checked="" type="radio"/> Yes		<input checked="" type="radio"/> Yes	
All turbidity readings < IFE ² triggers		<input checked="" type="radio"/> Yes					

Notes:	PRINTED NAME: RYAN SHERMAN		
	SIGNATURE <i>Ryan A. Sherman</i>		
	PHONE # (541)-260-2436		CERT #: 9184

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 Eff. (333-061-0040(1)(d)(B&C))

DHA - Drinking Water Program - Surface Water Quality Data Form WTP - : A

System N Langlois Water District)#: 4100466	Month/Yea Mar-21	Disinfecti on Giardia 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/	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	OFF	0	OFF	OFF	OFF	OFF	OFF	0
2	1	207	207.0	12.9	7.4	36.3	YES	207
3	1.2	207	248.4	13.2	6.95	30.9	YES	207
4	1.6	207	331.2	12.8	9.35	80.0	YES	207
5	0.78	207	161.5	12.8	6.4	24.6	YES	207
6	1	207	207.0	12.5	6.6	27.7	YES	207
7	0.64	207	132.5	12.4	6.43	26.3	YES	207
8	0.97	207	200.8	12.3	6.58	28.8	YES	207
9	0.62	207	128.3	12.1	6.6	28.3	YES	207
10	0.77	207	159.4	12.3	6.35	26.2	YES	207
11	1.35	207	279.5	12.4	6.22	26.5	YES	207
12	0.57	207	118.0	12.2	6.9	30.9	YES	207
13	OFF	207	OFF	OFF	OFF	OFF	OFF	0
14	OFF	207	OFF	OFF	OFF	OFF	OFF	0
15	1	207	207.0	11.9	6.91	33.1	YES	207
16	0.78	207	161.5	11.4	6.72	31.3	YES	207
17	0.74	207	153.2	11.3	6.67	30.8	YES	207
18	0.65	207	134.6	11.1	6.85	32.9	YES	207
19	1.3	207	269.1	10.7	6.62	33.5	YES	207
20	0.4	207	82.8	11.6	6.23	25.3	YES	207
21	0.82	207	169.7	13.2	6.15	21.9	YES	207
22	0.82	207	169.7	14.2	6.24	21.2	YES	207
23	0.89	207	184.2	11.8	6.39	27.7	YES	207
24	2.13	207	440.9	12.4	6.27	29.2	YES	207
25	0.62	207	128.3	11.9	6.3	26.0	YES	207
26	0.44	207	91.1	12.2	6.47	26.4	YES	207
27	0.76	207	157.3	10.8	6.39	29.0	YES	207
28	0.9	207	186.3	10.4	6.98	36.9	YES	207
29	1.3	207	269.1	11.4	6.43	30.0	YES	207
30	0.55	207	113.9	9.3	6.68	34.4	YES	207
31	OFF	0	OFF	OFF	OFF	OFF	OFF	0

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours vised October 2016-8