

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Curry**
 Month/Year: **Mar-25**

Conventional or Direct Filtration

System Name: **Lanlois 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	0.07	0.20	OFF	OFF	0.20
2	OFF	OFF	OFF	OFF	0.04	OFF	0.04
3	OFF	OFF	OFF	OFF	0.02	OFF	0.02
4	OFF	OFF	OFF	0.06	0.10	OFF	0.10
5	OFF	OFF	0.10	0.20	0.20	0.10	0.20
6	OFF	OFF	OFF	0.08	0.10	OFF	0.10
7	OFF	OFF	OFF	0.20	0.25	0.24	0.25
8	OFF	OFF	0.20	0.10	0.15	0.10	0.20
9	OFF	OFF	OFF	0.25	0.25	OFF	0.25
10	OFF	OFF	OFF	0.20	0.10	0.10	0.20
11	0.30	OFF	OFF	0.08	0.10	OFF	0.30
12	OFF	OFF	OFF	0.20	0.25	OFF	0.25
13	OFF	OFF	OFF	0.25	0.25	OFF	0.25
14	OFF	OFF	OFF	0.20	0.10	0.10	0.20
15	OFF	OFF	OFF	0.10	0.10	OFF	0.10
16	OFF	OFF	OFF	0.10	0.10	OFF	0.10
17	OFF	OFF	OFF	0.20	0.10	OFF	0.20
18	OFF	OFF	OFF	0.05	0.10	0.20	0.20
19	OFF	OFF	OFF	0.10	0.20	OFF	0.20
20	OFF	OFF	OFF	0.08	0.25	0.15	0.25
21	OFF	OFF	OFF	0.20	0.25	0.20	0.25
22	OFF	OFF	OFF	0.08	0.10	0.20	0.20
23	OFF	OFF	OFF	0.10	OFF	OFF	0.10
24	OFF	OFF	OFF	0.10	0.20	OFF	0.20
25	OFF	OFF	OFF	0.05	0.15	0.20	0.20
26	0.20	OFF	OFF	0.20	0.06	0.20	0.20
27	OFF	OFF	OFF	0.25	0.15	0.20	0.25
28	OFF	OFF	OFF	OFF	0.20	OFF	0.20
29							0.00
30							0.00
31							0.00

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 Ryan Sherman	
	SIGNATURE: <i>[Signature]</i>	03/01/25
	Phone# (541) 260-2936	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 Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP -- A

System Name: Langlois Water District	OFF	Month/Year: 10/31/21	Disinfection 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/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.91	207	188.4	8.7	7.17	44.1	YES	207
2	0.36	207	74.5	7.9	6.76	37.9	YES	207
3	1.18	207	244.3	8.1	7.16	47.2	YES	207
4	0.4	207	82.8	8.4	6.80	37.4	YES	207
5	0.68	207	140.8	8.2	6.75	38.4	YES	207
6	0.7	207	144.9	8.4	7.33	46.5	YES	207
7	0.89	207	184.2	7.9	6.96	43.1	YES	207
8	0.52	207	107.6	7.5	6.70	38.8	YES	207
9	0.75	207	155.3	7.6	6.80	40.9	YES	207
10	0.4	207	82.8	7.3	6.05	31.1	YES	207
11	1	207	207.0	7.3	6.13	34.1	YES	207
12	0.59	207	122.1	6.8	7.09	46.9	YES	207
13	1.11	207	229.8	8.4	6.11	31.9	YES	207
14	1	207	207.0	8.3	6.85	40.9	YES	207
15	1.1	207	227.7	8.7	6.48	35.5	YES	207
16	0.98	207	202.9	8.5	6.85	40.3	YES	207
17	0.48	207	99.4	9.8	6.35	29.6	YES	207
18	0.88	207	182.2	9.2	6.84	38.0	YES	207
19	0.65	207	134.6	9.2	6.92	38.0	YES	207
20	0.47	207	97.3	9.7	6.56	31.9	YES	207
21	0.56	207	115.9	9.7	7.11	38.9	YES	207
22	0.76	207	157.3	9.6	6.63	34.0	YES	207
23	0.61	207	126.3	10.6	6.67	31.8	YES	207
24	0.69	207	142.8	11.2	7.43	40.0	YES	207
25	0.3	207	62.1	11.1	6.77	30.8	YES	207
26	0.56	207	115.9	10.7	6.23	27.1	YES	207
27	0.65	207	134.6	10.6	6.54	30.6	YES	207
28	0.8	207	165.6	10.5	6.85	34.7	YES	207
29		207					NO	207
30		207					NO	207
31		207					NO	207

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, nc