

OHA - Drinking Water Program - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Linn**
 Month/Year: **4/2023**
Membrane

System Name: Lebanon, City of	ID#: 41-00473						Highest Reading of the day ¹ [NTU]
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	
1	0.016	0.014	0.016	0.016	0.016	0.014	0.016
2	OFF	OFF	OFF	OFF	OFF	OFF	0.000
3	OFF	OFF	0.015	0.014	0.016	0.016	0.046
4	OFF	OFF	0.014	0.016	0.016	0.014	0.023
5	0.016	0.016	0.016	OFF	OFF	OFF	0.016
6	OFF	OFF	OFF	0.016	0.016	OFF	0.036
7	OFF	OFF	OFF	OFF	0.014	0.014	0.040
8	0.016	0.016	0.016	0.016	0.015	0.014	0.016
9	OFF	OFF	OFF	OFF	OFF	OFF	0.000
10	OFF	OFF	0.014	0.014	0.014	0.014	0.049
11	OFF	OFF	OFF	0.014	0.014	0.014	0.042
12	0.014	0.016	0.014	0.014	0.014	0.014	0.020
13	OFF	OFF	OFF	OFF	OFF	OFF	0.000
14	OFF	OFF	OFF	0.014	0.014	0.014	0.057
15	0.014	0.014	0.014	0.014	0.014	0.014	0.016
16	OFF	OFF	OFF	OFF	OFF	OFF	0.000
17	OFF	OFF	0.014	0.014	0.014	OFF	0.038
18	OFF	OFF	0.014	0.014	0.014	0.014	0.025
19	0.014	0.014	0.014	0.014	0.015	OFF	0.016
20	OFF	OFF	0.014	0.016	0.016	OFF	0.027
21	OFF	OFF	OFF	0.014	0.016	0.014	0.027
22	0.014	0.016	0.016	0.016	0.016	0.016	0.016
23	OFF	OFF	OFF	OFF	OFF	OFF	0.000
24	OFF	OFF	0.014	0.016	0.015	OFF	0.044
25	OFF	OFF	OFF	0.016	0.015	0.016	0.033
26	0.016	0.016	0.014	0.014	0.018	0.014	0.027
27	OFF	OFF	OFF	OFF	OFF	OFF	0.000
28	OFF	OFF	OFF	0.014	0.014	0.014	0.047
29	0.016	0.014	0.016	0.015	0.016	0.016	0.016
30	OFF	OFF	OFF	OFF	OFF	OFF	0.000
31	No Data	No Data	No Data	No Data	No Data	No Data	No Data

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ²	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday?	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
Notes: OFF = PLANT OFF		PRINTED NAME: <i>Chris Germond</i>	
		SIGNATURE: <i>Chris Germond</i>	DATE: <i>5/3/23</i>
		PHONE #: <i>541-258-4274</i>	CERT #: <i>T-0868</i>

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP: WTP-B

System Name: Lebanon, CITY OF

ID#: 41-00473

Month/Year: 4/2023

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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]
4/1/2023 20:26	1.1	66	71	9	7.9	28	Yes	3150
4/2/2023 0:00								
4/3/2023 6:32	0.8	63	52	10	7.9	25	Yes	3263
4/4/2023 6:25	1.1	64	71	10	8.1	29	Yes	3211
4/5/2023 11:32	1.2	78	97	9	8.0	29	Yes	2783
4/6/2023 13:28	1.1	70	79	10	7.7	26	Yes	3245
4/7/2023 13:29	1.0	68	71	10	7.9	26	Yes	3302
4/8/2023 18:17	1.1	70	76	10	7.9	26	Yes	3127
4/9/2023 0:00								
4/10/2023 7:48	1.0	66	69	11	8.2	28	Yes	3220
4/11/2023 12:30	1.0	63	63	11	7.9	25	Yes	3256
4/12/2023 20:56	1.2	63	73	10	7.6	25	Yes	3225
4/13/2023 0:00								
4/14/2023 9:51	0.9	59	55	11	7.8	24	Yes	3343
4/15/2023 1:48	1.3	63	81	11	7.8	25	Yes	3174
4/16/2023 0:00								
4/17/2023 6:33	1.2	57	67	11	8.0	26	Yes	3496
4/18/2023 14:56	1.1	62	70	11	8.0	27	Yes	3331
4/19/2023 3:56	1.1	71	76	10	7.9	27	Yes	3140
4/20/2023 8:12	0.9	72	68	10	7.9	25	Yes	3192
4/21/2023 19:05	1.1	91	101	10	7.9	26	Yes	2350
4/22/2023 6:05	1.1	67	77	10	7.9	27	Yes	3132
4/23/2023 0:00								
4/24/2023 7:58	1.0	68	70	12	8.0	25	Yes	3301
4/25/2023 10:58	1.1	65	70	12	8.1	26	Yes	3274
4/26/2023 7:34	0.9	72	65	11	7.7	23	Yes	3203
4/27/2023 0:00								
4/28/2023 9:35	1.0	69	71	12	8.1	24	Yes	3218
4/29/2023 21:02	1.2	62	75	13	7.8	22	Yes	3300
4/30/2023								
31								

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.

