

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

County: **Lincoln**  
 Month/Year: **Oct-22**

System Name: <b>Hiland WC - Bear Creek</b>		ID#: <b>41 00482</b>		WTP : <b>TP - Membrane</b>			
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
1	0.04	0.04	0.04	0.04	0.04	0.04	0.04
2	0.04	0.04	0.04	0.04	0.04	0.04	0.04
3	0.04	0.04	0.04	0.04	0.04	0.04	0.04
4	0.04	0.03	0.03	0.04	0.04	0.04	0.04
5	0.04	0.04	0.04	0.04	0.04	0.04	0.04
6	0.04	0.04	0.04	0.03	0.04	0.04	0.04
7	0.04	0.04	0.04	0.04	0.04	0.04	0.04
8	0.03	0.04	0.04	0.03	0.04	0.04	0.04
9	0.04	0.04	0.04	0.03	0.03	0.04	0.04
10	0.04	0.04	0.04	0.03	0.04	0.04	0.04
11	0.03	0.04	0.04	0.03	0.03	0.04	0.04
12	0.04	0.04	0.04	0.03	0.04	0.04	0.04
13	0.04	0.03	0.04	0.04	0.04	0.03	0.04
14	0.04	0.04	0.04	0.04	0.03	0.03	0.04
15	0.04	0.04	0.04	0.04	0.04	0.03	0.04
16	0.04	0.03	0.04	0.04	0.03	0.03	0.04
17	0.04	0.03	0.03	0.04	0.04	0.04	0.04
18	0.04	0.04	0.04	0.04	0.04	0.04	0.04
19	0.04	0.04	0.04	0.04	0.03	0.04	0.04
20	0.03	0.04	0.04	0.04	0.04	0.04	0.04
21	0.04	0.04	0.04	0.04	0.04	0.04	0.04
22	0.04	0.04	0.04	0.04	0.04	0.04	0.04
23	0.04	0.04	0.04	0.03	0.04	0.04	0.04
24	0.03	0.04	0.04	0.04	0.04	0.04	0.04
25	0.04	0.04	0.04	0.04	0.04	0.04	0.04
26	0.04	0.04	0.04	0.03	0.04	0.04	0.04
27	0.04	0.04	0.04	0.04	0.04	0.04	0.04
28	0.04	0.04	0.04	0.04	0.03	0.04	0.04
29	0.04	0.04	0.04	0.04	0.04	0.04	0.04
30	0.03	0.04	0.03	0.04	0.04	0.04	0.04
31	0.04	0.03	0.03	0.03	0.03	0.04	0.04

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>	<input checked="" type="radio"/> Yes <input checked="" type="radio"/> No	CT's met everyday?	All Cl2 residual at entry point
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>Notes:</b>	<b>PRINTED NAME: Aaron Olson</b>		<b>DATE: 11-9-22</b>
	<b>SIGNATURE: <i>Aaron Olson</i></b>		<b>CERT #: T-09128</b>
	<b>PHONE #: (971) 563-3128</b>		

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM correspond to continuous readings' maximum. <sup>2</sup> Filtered systems only.

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

WTP- : **Membrane**  
 Disinfection  
*Giardia* Log  
 Inactiv: **0.5**

System Name: **Hiland WC - Bear Creek** ID#: **41 00482** Month/Year: **Oct-22**

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	0.88	53	46.9	12.7	7.26	17.2	Yes	35
2	0.90	53	47.5	13.1	7.25	16.7	Yes	35
3	1.25	53	66.2	12.6	7.25	18.0	Yes	35
4	1.29	53	68.3	12.5	7.27	18.6	Yes	35
5	1.26	53	66.8	12.3	7.27	18.7	Yes	35
6	1.20	53	63.8	12.4	7.22	18.2	Yes	35
7	1.07	53	56.8	12.8	7.16	16.9	Yes	35
8	1.03	53	54.3	12.6	7.16	17.1	Yes	35
9	1.03	53	54.6	12.5	7.16	17.5	Yes	35
10	1.08	53	57.3	12.4	7.17	17.6	Yes	35
11	1.14	53	60.5	12.1	7.16	18.1	Yes	35
12	1.11	53	59.0	11.8	7.19	18.6	Yes	35
13	1.12	53	59.1	11.9	7.19	18.4	Yes	35
14	1.08	53	57.4	12.1	7.20	18.2	Yes	35
15	1.10	53	58.2	12.5	7.19	17.8	Yes	35
16	1.06	53	56.2	12.5	7.18	17.3	Yes	35
17	1.26	53	66.8	13.1	7.19	17.1	Yes	35
18	1.27	53	67.5	12.6	7.16	17.5	Yes	35
19	1.25	53	66.0	12.2	7.17	18.2	Yes	35
20	1.30	53	68.6	11.5	7.20	19.3	Yes	35
21	1.23	53	65.3	11.4	7.17	19.1	Yes	35
22	1.16	53	61.3	11.0	7.18	19.6	Yes	35
23	1.25	53	66.5	10.3	7.31	21.7	Yes	35
24	1.26	53	66.9	9.8	7.28	22.2	Yes	35
25	1.24	53	65.8	10.2	7.29	21.6	Yes	35
26	1.33	53	70.3	9.9	7.32	22.6	Yes	35
27	1.53	53	81.0	10.8	7.31	21.6	Yes	35
28	1.54	53	81.5	9.5	7.15	22.2	Yes	35
29	1.33	53	70.3	10.2	7.03	19.9	Yes	35
30	1.18	53	62.7	10.2	7.08	19.9	Yes	35
31	1.29	53	68.2	10.1	7.13	20.8	Yes	35

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013