

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

County: Lane  
 Month/Year: Apr-21

System Name:	Lowell, City Of	ID#: 4100492	WTP : WTP - 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	0.03	0.03	0.03	0.04
2			0.03	0.03	0.04	0.03	0.04
3	0.03			0.03	0.03	0.03	0.04
4				0.03	0.03		0.05
5				0.05	0.04	0.03	0.06
6				0.04	0.04	0.03	0.04
7			0.04	0.03	0.03	0.03	0.04
8			0.03	0.03	0.03	0.03	0.04
9			0.03	0.03	0.03	0.03	0.04
10	0.03			0.04	0.03	0.03	0.04
11				0.03	0.03	0.03	0.04
12				0.03	0.03	0.03	0.04
13	0.03	0.03	0.03	0.03	0.03	0.03	0.04
14	0.03		0.05	0.04	0.04	0.05	0.05
15				0.04	0.03	0.03	0.05
16	0.03		0.06	0.03	0.03	0.03	0.06
17				0.03	0.03	0.03	0.09
18				0.03			0.06
19				0.06	0.04	0.03	0.07
20	0.03	0.03	0.03	0.03	0.03	0.03	0.04
21			0.04	0.03	0.03	0.03	0.04
22				0.03	0.03	0.03	0.04
23				0.03	0.03	0.03	0.04
24	0.03	0.03	0.03	0.03	0.00	0.03	0.04
25	0.03			0.03	0.03	0.03	0.04
26					0.03	0.03	0.04
27			0.08	0.04	0.03	0.03	0.08
28				0.03	0.03	0.03	0.04
29	0.03	0.03	0.03	0.03	0.03	0.03	0.04
30				0.03	0.03	0.03	0.04

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <span style="float: right;">(Yes) / No</span>	CT's met everyday? (see back) <span style="float: right;">(Yes) / No</span>	All Cl2 residual at entry point ≥ 0.2 mg/l? <span style="float: right;">(Yes) / No</span>
All 4-hour turbidity readings ≤ 1 NTU? <span style="float: right;">(Yes) / No</span>		
All turbidity readings < IFE <sup>2</sup> triggers <span style="float: right;">(Yes) / No</span>		

Notes:	PRINTED NAME: Max Baker	
	SIGNATURE: <i>Max Baker</i>	DATE:
	PHONE #: 541-937-2776	CERT #: 08801FE

<sup>1</sup> 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. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : WTP-B

System Name:	Lowell, City of	ID#: 4100492	Month/Year:	Apr-21	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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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]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.94	66	62.0	10.5	6.97	18.4	Y	140
2	0.87	66	57.4	10.1	6.95	18.6	Y	140
3	0.87	66	57.4	10.9	6.93	17.5	Y	140
4	0.94	66	62.0	10.7	7.01	18.4	Y	140
5	0.91	66	60.1	10.7	7.05	18.6	Y	140
6	0.92	66	60.7	10.5	6.94	18.1	Y	140
7	0.91	66	60.1	10.7	6.96	18.0	Y	140
8	0.9	66	59.4	10.2	6.92	18.3	Y	140
9	0.94	66	62.0	10.1	6.96	18.8	Y	140
10	0.95	66	62.7	10.7	7.00	18.3	Y	140
11	0.95	66	62.7	10.6	6.99	18.4	Y	140
12	0.94	66	62.0	10.6	7.03	18.6	Y	140
13	0.98	66	64.7	11.0	6.96	17.8	Y	140
14	0.96	66	63.4	11.2	7.03	18.0	Y	140
15	0.95	66	62.7	11.3	7.02	17.8	Y	140
16	0.94	66	62.0	11.0	6.98	17.8	Y	140
17	0.92	66	60.7	11.9	6.97	16.8	Y	140
18	0.92	66	60.7	12.4	6.99	16.3	Y	140
19	0.87	66	57.4	12.4	7.02	16.4	Y	140
20	0.9	66	59.4	11.2	6.88	17.0	Y	140
21	0.86	66	56.8	11.9	6.97	16.6	Y	140
22	0.85	66	56.1	11.8	6.93	16.5	Y	140
23	0.9	66	59.4	11.8	7.00	17.0	Y	140
24	0.77	66	50.8	11.7	6.95	16.6	Y	140
25	0.9	66	59.4	12.1	6.96	16.4	Y	140
26	0.93	66	61.4	11.6	6.99	17.2	Y	140
27	0.94	66	62.0	11.5	6.94	17.0	Y	140
28	0.91	66	60.1	11.8	6.93	16.6	Y	140
29	0.86	66	56.8	12.0	6.86	15.9	Y	140
30	0.93	66	61.4	12.0	6.93	16.4	Y	140

<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