

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lane

Conventional or Direct Filtration

Month/Year: Sep-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	0.04	0.04	0.04	0.04	0.04	0.05	
2			0.04	0.04	0.04	0.04	0.04	
3	0.04	0.04	0.03		0.04	0.04	0.05	
4	0.04	0.04	0.04	0.04	0.04	0.04	0.05	
5			0.04	0.04	0.04	0.04	0.05	
6	0.04	0.04	0.04		0.04		0.07	
7			0.04	0.04	0.04		0.04	
8	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
9	0.04	0.04	0.04	0.04	0.04	0.04	0.11	
10			0.04	0.04	0.04	0.04	0.04	
11			0.04	0.04	0.04	0.04	0.04	
12	0.04		0.04	0.04	0.04	0.04	0.05	
13	0.04	0.04		0.04		0.04	0.04	
14			0.04	0.04	0.04	0.04	0.04	
15				0.04	0.04	0.04	0.04	
16			0.04	0.04	0.04	0.04	0.05	
17	0.04	0.04	0.04	0.04		0.05	0.05	
18			0.04	0.04	0.04	0.04	0.05	
19	0.04	0.04	0.05	0.05	0.04	0.04	0.05	
20				0.04	0.04	0.04	0.04	
21	0.04	0.04			0.04	0.04	0.04	
22			0.04	0.04	0.04	0.04	0.04	
23				0.04	0.04	0.04	0.04	
24			0.04	0.04	0.04	0.04	0.06	
25			0.04	0.04	0.04	0.04	0.04	
26			0.04	0.04	0.04	0.04	0.04	
27			0.04	0.04	0.04	0.04	0.04	
28			0.04	0.03	0.04	0.04	0.04	
29				0.04	0.04	0.04	0.04	
30			0.04	0.04	0.04	0.04	0.04	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
All turbidity readings < IFE <sup>2</sup> triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No		
Notes:	PRINTED NAME: Max Baker	
	SIGNATURE: <i>Max Baker</i>	DATE: 10/7/21
	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:	Sep-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	0.86	66	56.8	19.1	6.97	10.1	Y	170
2	0.79	66	52.1	19.3	7.05	10.1	Y	170
3	0.81	66	53.5	19.5	7.04	10.0	Y	170
4	0.81	66	53.5	19.2	6.97	9.9	Y	170
5	0.78	66	51.5	19.6	7.00	9.7	Y	170
6	0.8	66	52.8	19.8	7.02	9.7	Y	170
7	0.8	66	52.8	19.7	7.02	9.8	Y	170
8	0.82	66	54.1	19.6	7.01	9.8	Y	170
9	0.83	66	54.8	19.6	7.02	9.9	Y	170
10	0.79	66	52.1	19.8	6.95	9.4	Y	170
11	0.81	66	53.5	19.7	6.97	9.6	Y	170
12	0.81	66	53.5	19.6	7.01	9.8	Y	170
13	0.88	66	58.1	19.6	7.02	9.9	Y	170
14	0.87	66	57.4	19.4	6.97	9.9	Y	170
15	0.81	66	53.5	19.5	7.02	9.9	Y	170
16	0.82	66	54.1	19.2	7.07	10.3	Y	170
17	0.79	66	52.1	19.1	7.04	10.2	Y	170
18	0.79	66	52.1	19.2	7.05	10.2	Y	170
19	0.87	66	57.4	18.9	7.07	10.6	Y	170
20	0.81	66	53.5	18.9	7.05	10.4	Y	170
21	0.83	66	54.8	19.3	7.02	10.1	Y	170
22	0.83	66	54.8	19.0	6.96	10.1	Y	170
23	0.84	66	55.4	19.2	7.05	10.3	Y	155
24	0.96	66	63.4	19.0	7.01	10.4	Y	155
25	0.96	66	63.4	19.2	7.01	10.3	Y	155
26	0.96	66	63.4	19.3	6.96	10.0	Y	155
27	0.92	66	60.7	19.3	6.95	9.9	Y	155
28	0.96	66	63.4	18.5	6.94	10.5	Y	155
29	0.9	66	59.4	18.3	7.03	10.9	Y	155
30	0.92	66	60.7	18.3	7.00	10.8	Y	155

<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