

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County: Lane

Month/Year: Nov-22

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 ¹ [NTU]
1			0.04	0.04	0.04		0.04
2			0.07	0.04	0.04		0.07
3			0.04	0.04	0.03		0.04
4			0.04	0.04	0.03	0.03	0.04
5			0.04	0.03	0.03		0.04
6							
7				0.04	0.04	0.04	0.05
8			0.04?	0.04	0.04		0.05
9			0.04	0.04	0.04		0.04
10				0.04	0.04	0.04	0.05
11			0.04	0.04	0.04	0.04	0.05
12			0.04	0.04	0.04	0.04	0.04
13							
14				0.04	0.03		0.04
15			0.04?	0.04	0.04		0.04
16			0.04?	0.04	0.04		0.04
17			0.04	0.04		0.05	0.05
18	0.04	0.04	0.04	0.04	0.04	0.04	0.05
19	0.04	0.04	0.04	0.04	0.04	0.04	0.04
20	0.04	0.04	0.04	0.06	0.08	0.05	0.09
21	0.04		0.05	0.04	0.08		0.19
22			0.04	0.04		0.04	0.05
23			0.04	0.06	0.09	0.05	0.09
24			0.06	0.04	0.04	0.04	0.06
25							
26			0.05	0.04	0.04	0.03	0.05
27							
28			0.04	0.03	0.04	0.03	0.04
29			0.04	0.04	0.04	0.03	0.04
30			0.04	0.03	0.03		0.04

Conventional or Direct Filtration

95% of 4-hour turbidity readings \leq 0.3 NTU?

Yes / No

All 4-hour turbidity readings \leq 1 NTU?

Yes / No

All turbidity readings < IFE² triggers

Yes / No

Monthly Summary (Answer Yes or No)

CT's met everyday?
(see back)

Yes / No

All Cl₂ residual at entry point
 \geq 0.2 mg/l?

Yes / No

Notes:

PRINTED NAME: Max Baker

SIGNATURE: Max Baker

DATE: 12/6/22

PHONE #: 541-937-2776

CERT #:08801FE

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)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: Lowell, City of				ID#: 4100492	Month/Year: Nov-22	WTP - : WTP-B	
						Disinfection <i>Giardia</i> Log Inactiv:	0.5

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	0.77	66	50.8	16.2	7.07	12.6	Y	185
2	0.75	66	49.5	15.5	7.09	13.2	Y	185
3	0.82	66	54.1	15.5	7.13	13.5	Y	185
4	0.89	66	58.7	15.6	7.11	13.5	Y	185
5	0.86	66	56.8	15.8	7.12	13.3	Y	185
6								
7	0.73	66	48.2	15.3	7.18	13.8	Y	185
8	0.92	66	60.7	15.3	7.05	13.5	Y	185
9	0.87	66	57.4	14.6	6.88	13.2	Y	185
10	0.86	66	56.8	14.5	7.05	14.1	Y	185
11	0.94	66	62.0	14.0	7.09	15.0	Y	185
12	0.94	66	62.0	14.1	7.16	15.2	Y	185
13								
14	0.82	66	54.1	13.9	7.17	15.3	Y	185
15	0.91	66	60.1	13.7	7.08	15.1	Y	185
16	0.92	66	60.7	13.5	7.10	15.5	Y	185
17	0.9	66	59.4	13.6	7.08	15.2	Y	185
18	1.01	66	66.7	12.4	7.11	17.2	Y	185
19	1.08	66	71.3	12.4	7.05	17.0	Y	185
20	1.07	66	70.6	12.2	7.23	18.3	Y	185
21	1.08	66	71.3	12.4	7.16	17.6	Y	185
22	1.02	66	67.3	12.4	7.21	17.8	Y	185
23	1.16	66	76.6	12.3	6.94	16.6	Y	185
24	1.01	66	66.7	12.1	7.12	17.6	Y	185
25								
26	0.89	66	58.7	12.4	7.18	17.4	Y	185
27								
28	0.86	66	56.8	11.6	7.19	18.3	Y	185
29	1.02	66	67.3	11.6	7.21	18.7	Y	185
30	1.03	66	68.0	11.5	6.97	17.4	Y	185

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013