

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lane

Conventional or Direct Filtration

Month/Year: Jun-24

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

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings ≤ 0.3 NTU?

Yes/No

All 4-hour turbidity readings ≤ 1 NTU?

Yes/No

All turbidity readings < IFE<sup>2</sup> triggers

Yes/No

CT's met everyday?  
(see back)

Yes/No

All Cl<sub>2</sub> residual at entry point  
≥ 0.2 mg/l?

Yes/No

Notes:

PRINTED NAME: Max Baker

SIGNATURE: *Max Baker*

DATE: 7/9/24

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:	Jun-24	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	0.81	66	53.5	12.7	7.08	16.0	Y	170
2	0.85	66	56.1	12.6	7.17	16.7	Y	170
3	0.88	66	58.1	12.2	7.16	17.5	Y	170
4	0.82	66	54.1	12.4	7.13	16.9	Y	170
5	0.75	66	49.5	12.7	7.11	16.1	Y	170
6	0.68	66	44.9	13.6	7.10	15.0	Y	170
7	0.89	66	58.7	14.2	7.16	15.1	Y	170
8	0.81	66	53.5	13.5	7.15	15.6	Y	170
9	0.74	66	48.8	13.6	7.16	15.4	Y	170
10	0.83	66	54.8	13.2	7.18	16.1	Y	185
11	0.77	66	50.8	14.3	7.00	13.9	Y	185
12	0.72	66	47.5	14.9	6.99	13.2	Y	185
13	0.82	66	54.1	13.3	7.00	14.9	Y	185
14	0.78	66	51.5	14.3	6.99	13.9	Y	185
15	0.77	66	50.8	13.6	6.93	14.2	Y	185
16	0.75	66	49.5	13.3	6.98	14.7	Y	185
17	0.76	66	50.2	13.1	6.97	14.9	Y	185
18	0.78	66	51.5	13.2	6.96	14.8	Y	185
19	0.74	66	48.8	14.1	7.07	14.4	Y	185
20	0.69	66	45.5	14.2	7.08	14.3	Y	185
21	0.72	66	47.5	16.0	7.09	12.8	Y	185
22	0.77	66	50.8	14.8	7.08	13.8	Y	185
23	0.67	66	44.2	14.6	7.10	14.0	Y	185
24	0.66	66	43.6	15.0	7.13	13.7	Y	185
25	0.72	66	47.5	15.1	7.05	13.3	Y	185
26	0.72	66	47.5	14.9	7.03	13.4	Y	185
27	0.7	66	46.2	16.7	7.10	12.2	Y	185
28	0.77	66	50.8	14.3	7.02	14.0	Y	185
29	0.77	66	50.8	13.5	6.97	14.5	Y	185
30	0.75	66	49.5	13.3	6.93	14.4	Y	185

<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