

## OHA - Drinking Water Services -Turbidity Monitoring Report Form

## Conventional or Direct Filtration

County:	Lane
Month/Year:	May-25

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	0.06	0.05	0.04	0.04	0.03	0.03	0.06
2			0.05	0.04	0.04	0.03	0.08
3	0.03	0.03	0.05	0.05	0.04	0.03	0.06
4			0.03	0.04	0.05	0.04	0.06
5	0.03	0.03	0.03	0.06	0.05	0.03	0.07
6	0.03	0.03	0.03	0.05	0.04	0.03	0.07
7	0.03	0.03	0.03	0.03	0.05	0.04	0.06
8	0.03	0.04	0.04	0.03	0.03	0.05	0.05
9	0.04	0.03	0.03	0.03		0.05	0.07
10	0.03	0.03	0.03	0.04	0.05	0.04	0.06
11	0.03	0.03	0.03	0.05	0.04	0.03	0.06
12	0.03	0.03	0.06	0.05	0.04	0.03	0.07
13	0.03	0.03	0.03	0.04	0.04	0.03	0.05
14	0.05	0.03	0.03	0.03	0.03	0.03	0.06
15	0.06	0.04	0.03	0.03	0.03	0.03	0.06
16					0.11	0.19	0.22
17	0.14	0.05	0.03	0.03	0.03	0.03	0.14
18			0.03	0.03		0.06	0.07
19	0.03	0.03	0.03	0.03	0.03	0.03	0.04
20			0.03	0.03	0.03	0.04	0.06
21	0.04	0.03	0.03	0.03	0.03	0.03	0.04
22			0.03	0.03	0.03	0.03	0.05
23			0.04	0.04		0.11	0.13
24	0.06	0.04	0.04	0.03	0.03	0.03	0.06
25	0.04	0.04		0.03	0.03	0.03	0.04
26				0.03	0.03	0.03	0.05
27	0.03		0.04	0.03	0.03	0.03	0.05
28			0.04	0.03	0.03	0.04	0.06
29	0.05	0.04	0.04	0.03	0.03	0.04	0.05
30	0.04	0.03		0.06	0.04	0.04	0.06
31	0.04		0.05	0.04	0.04		0.07

## Conventional or Direct Filtration

## Monthly Summary (Answer Yes or No)

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

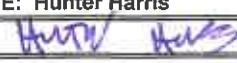
 Yes / NoCT's met everyday?  
(see back)All Cl2 residual at entry point  
≥ 0.2 mg/l?

All 4-hour turbidity readings ≤ 1 NTU?

 Yes / No Yes / No Yes / NoAll turbidity readings < IFE<sup>2</sup> triggers Yes / No

Notes:

PRINTED NAME: Hunter Harris

SIGNATURE: 

DATE: 6/9/25

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 Efl. (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:	May-25	Disinfection Giardia Log Inactiv:	0.5
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	0.96	66	63.4	10.9	7.19	19.4	Y	160
2	0.61	66	40.3	11.2	6.99	17.0	Y	160
3	0.94	66	62.0	10.7	6.94	17.9	Y	160
4	0.88	66	58.1	10.6	7.27	20.1	Y	160
5	0.95	66	62.7	10.5	6.93	18.1	Y	160
6	0.94	66	62.0	10.9	7.04	18.3	Y	170
7	1.01	66	66.7	11.0	6.94	17.7	Y	170
8	0.95	66	62.7	11.1	6.92	17.4	Y	170
9	0.82	66	54.1	11.1	6.94	17.3	Y	170
10	0.92	66	60.7	11.1	7.03	18.0	Y	170
11	0.94	66	62.0	11.1	7.08	18.3	Y	170
12	0.96	66	63.4	11.0	7.12	18.8	Y	170
13	0.99	66	65.3	11.0	6.92	17.6	Y	170
14	0.94	66	62.0	11.0	6.98	17.8	Y	170
15	0.94	66	62.0	11.0	7.00	18.0	Y	170
16	0.77	66	50.8	10.9	6.83	16.7	Y	170
17	0.92	66	60.7	11.2	6.84	16.8	Y	170
18	0.88	66	58.1	11.4	6.82	16.4	Y	170
19	0.92	66	60.7	11.5	6.93	17.0	Y	170
20	0.85	66	56.1	11.4	7.01	17.4	Y	170
21	0.9	66	59.4	11.0	6.94	17.5	Y	170
22	0.83	66	54.8	11.6	7.01	17.1	Y	170
23	0.83	66	54.8	11.7	6.85	16.1	Y	170
24	0.89	66	58.7	12.1	6.92	16.2	Y	170
25	0.91	66	60.1	12.2	6.99	16.5	Y	170
26	0.81	66	53.5	12.6	6.85	14.8	Y	170
27	0.88	66	58.1	12.5	6.78	14.6	Y	170
28	0.81	66	53.5	13.7	6.89	14.0	Y	170
29	0.91	66	60.1	12.7	6.94	15.4	Y	170
30	0.88	66	58.1	12.9	6.80	14.4	Y	170
31	0.81	66	53.5	12.7	6.90	15.0	Y	170

<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