

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

County: Lane
 Month/Year: Jul-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 ¹ [NTU]
1			0.05	0.04	0.04	0.04	0.05
2			0.04	0.04	0.03	0.03	0.10
3	0.03			0.03	0.03	0.03	0.07
4	0.04	0.04	0.04	0.04	0.04	0.04	0.07
5	0.04	0.03		0.04	0.04	0.04	0.05
6	0.03	0.03	0.03	0.03	0.04	0.04	0.06
7	0.03	0.03	0.03	0.04	0.04	0.04	0.05
8			0.04	0.04	0.04	0.04	0.05
9	0.04	0.03	0.03	0.04	0.04	0.04	0.04
10	0.04	0.03	0.03	0.03	0.04	0.04	0.04
11				0.04	0.05	0.05	0.08
12	0.04	0.04	0.04	0.04	0.04	0.05	0.06
13	0.04	0.04	0.04	0.04	0.04	0.05	0.08
14	0.04	0.04	0.04	0.04	0.04	0.04	0.05
15	0.04	0.04	0.04	0.04	0.04	0.05	0.07
16			0.04	0.04	0.04	0.04	0.05
17	0.04	0.04	0.04	0.04	0.04	0.04	0.05
18			0.04	0.04	0.04	0.04	0.04
19	0.04	0.04	0.04	0.05	0.04	0.05	0.05
20	0.04	0.04	0.04	0.04	0.04	0.04	0.05
21			0.04	0.04	0.04	0.04	0.04
22	0.03	0.03	0.03		0.04	0.04	0.05
23			0.04	0.04	0.04	0.04	0.04
24	0.04	0.04	0.03	0.03	0.04	0.04	0.05
25	0.04	0.03	0.03	0.03	0.04	0.04	0.05
26				0.04	0.04	0.04	0.05
27	0.04	0.03	0.03	0.04	0.04	0.04	0.04
28	0.04	0.03	0.03	0.03	0.04	0.04	0.04
29	0.04	0.04	0.04		0.04	0.04	0.04
30	0.04	0.03	0.03	0.03	0.04	0.04	0.04
31	0.03	0.03	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? Yes / No	CT's met everyday? (see back) Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l? Yes / No
All 4-hour turbidity readings ≤ 1 NTU? Yes / No		
All turbidity readings < IFE ² triggers Yes / No		

Notes:	PRINTED NAME: Max Baker	
	SIGNATURE: <i>Max Baker</i>	DATE: 8/10/21
	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

WTP - : WTP-B

System Name:	Lowell, City of	ID#: 4100492	Month/Year:	Jul-21	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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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	0.79	66	52.1	16.5	7.03	12.2	Y	170
2	0.77	66	50.8	16.4	7.07	12.4	Y	170
3	0.75	66	49.5	16.5	7.03	12.1	Y	170
4	0.81	66	53.5	16.6	7.08	12.3	Y	170
5	0.8	66	52.8	17.6	7.11	11.6	Y	170
6	0.66	66	43.6	17.2	7.14	11.9	Y	170
7	0.79	66	52.1	17.3	7.15	12.0	Y	170
8	0.79	66	52.1	16.9	7.14	12.3	Y	170
9	0.78	66	51.5	17.1	7.07	11.8	Y	170
10	0.85	66	56.1	16.5	7.10	12.6	Y	170
11	0.76	66	50.2	18.8	7.22	11.1	Y	170
12	0.83	66	54.8	17.0	7.11	12.2	Y	170
13	0.88	66	58.1	17.1	7.13	12.2	Y	170
14	0.86	66	56.8	17.2	7.15	12.2	Y	170
15	0.9	66	59.4	17.2	7.16	12.3	Y	170
16	0.87	66	57.4	17.9	7.10	11.5	Y	170
17	0.93	66	61.4	17.7	7.07	11.6	Y	170
18	0.88	66	58.1	17.4	7.10	11.9	Y	170
19	0.82	66	54.1	18.6	7.15	11.1	Y	170
20	0.85	66	56.1	17.5	7.12	11.8	Y	170
21	0.9	66	59.4	17.9	7.08	11.4	Y	170
22	0.92	66	60.7	17.4	7.07	11.8	Y	170
23	0.89	40	35.6	17.8	7.07	11.4	Y	170
24	0.86	66	56.8	17.3	6.97	11.4	Y	170
25	0.89	66	58.7	17.8	7.03	11.3	Y	170
26	0.83	66	54.8	19.3	7.12	10.5	Y	170
27	0.91	66	60.1	17.9	7.03	11.2	Y	170
28	0.91	66	60.1	18.1	7.03	11.1	Y	170
29	0.88	66	58.1	17.7	7.03	11.3	Y	170
30	0.91	66	60.1	18.1	6.89	10.5	Y	170
31	0.85	66	56.1	18.1	6.88	10.4	Y	170

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

Revised October 2013