

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

County: Lane
Month/Year: Dec-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			0.06	0.05	0.04	0.04	0.07	
2			0.06	0.05	0.04	0.04	0.07	
3			0.04	0.04	0.04	0.07	0.07	
4			0.05	0.04	0.04	0.04	0.05	
5								
6			0.04		0.05	0.04	0.06	
7			0.04	0.04	0.04	0.03	0.04	
8			0.04	0.06	0.05	0.04	0.06	
9			0.04	0.04	0.03	0.03	0.06	
10			0.03	0.04	0.07	0.05	0.07	
11			0.04		0.05	0.03	0.05	
12				0.03	0.03		0.05	
13			0.06	0.05	0.04	0.04	0.08	
14			0.04	0.03	0.04	0.04	0.05	
15				0.07	0.04	0.04	0.07	
16			0.04	0.04	0.04	0.03	0.04	
17			0.04	0.04	0.04	0.03	0.05	
18				0.03	0.03	0.03	0.05	
19				0.07	0.04	0.04	0.07	
20			0.04	0.03	0.03	0.04	0.04	
21			0.05	0.05	0.04	0.04	0.06	
22			0.04	0.04	0.04	0.03	0.15	
23			0.06	0.05	0.04	0.04	0.07	
24			0.04	0.04	0.03	0.04	0.04	
25			0.06	0.05	0.04	0.03	0.06	
26			0.05	0.04	0.04	0.04	0.06	
27	0.04				0.04	0.03	0.05	
28	0.03	0.03	0.03			0.05	0.05	
29	0.03	0.03	0.03	0.03	0.05	0.03	0.06	
30	0.06	0.04	0.03	0.03	0.04	0.03	0.06	
31				0.05	0.04	0.03	0.06	

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 ² triggers <input checked="" type="radio"/> Yes <input type="radio"/> No		

Notes:

PRINTED NAME: Max Baker
SIGNATURE: *Max Baker* DATE: 1/10/22
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

WTP - : WTP-B

System Name:	Lowell, City of	ID#: 4100492	Month/Year:	Dec-21	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	0.94	81	76.1	12.3	6.94	16.2	Y	155
2	0.95	81	77.0	12.8	7.00	15.7	Y	155
3	0.96	81	77.8	12.0	6.97	16.7	Y	155
4	0.98	81	79.4	12.1	7.06	17.2	Y	155
5								
6	0.88	81	71.3	11.6	7.02	17.3	Y	155
7	1.03	81	83.4	11.8	7.05	17.5	Y	155
8	1	81	81.0	12.3	7.00	16.6	Y	155
9	0.97	81	78.6	11.6	7.02	17.5	Y	155
10	0.94	81	76.1	11.3	7.00	17.6	Y	155
11	0.87	81	70.5	11.3	7.03	17.7	Y	155
12	0.88	81	71.3	12.0	6.97	16.6	Y	155
13	0.83	81	67.2	11.3	6.97	17.2	Y	155
14	0.83	81	67.2	10.9	7.05	18.2	Y	155
15	0.84	81	68.0	10.8	7.18	19.2	Y	155
16	0.94	81	76.1	10.8	6.99	18.1	Y	155
17	0.91	81	73.7	10.9	7.07	18.5	Y	155
18	0.95	81	77.0	10.8	6.90	17.6	Y	155
19	0.92	81	74.5	10.6	6.88	17.7	Y	155
20	0.92	81	74.5	11.2	7.03	17.9	Y	155
21	0.88	81	71.3	10.6	7.05	18.6	Y	155
22	0.89	81	72.1	10.6	7.10	19.0	Y	155
23	0.89	81	72.1	10.5	7.02	18.6	Y	155
24	0.9	81	72.9	10.3	7.06	19.1	Y	155
25	0.88	81	71.3	10.2	7.12	19.6	Y	155
26	0.76	81	61.6	10.3	7.08	18.9	Y	155
27	0.88	81	71.3	9.7	7.15	20.5	Y	155
28	1.01	81	81.8	9.2	7.04	20.6	Y	155
29	1.01	81	81.8	9.6	6.98	19.7	Y	155
30	1.03	81	83.4	9.3	7.05	20.6	Y	155
31	0.97	81	78.6	9.1	6.89	19.6	Y	155

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

Revised October 2013