

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lane

Conventional or Direct Filtration

Month/Year: Feb-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			0.07	0.06	0.04	0.03	0.07
2			0.07	0.03	0.03	0.03	0.07
3			0.03	0.03	0.03	0.03	0.05
4			0.04	0.03	0.03	0.03	0.04
5				0.04	0.04	0.04	0.04
6			0.04	0.04	0.03	0.03	0.04
7			0.04	0.04	0.04	0.04	0.05
8			0.04	0.04	0.03		0.04
9			0.04	0.03	0.03	0.04	0.04
10				0.06	0.04	0.04	0.07
11			0.04	0.03	0.03	0.04	0.04
12				0.05	0.04	0.04	0.06
13				0.04			0.05
14				0.04	0.04	0.03	0.06
15				0.04	0.04	0.04	0.04
16	0.04	0.04	0.04	0.04	0.04	0.04	0.05
17			0.05	0.05	0.04	0.04	0.07
18			0.04	0.04	0.04	0.04	0.05
19			0.06	0.06	0.05	0.04	0.10
20	0.04	0.04		0.06	0.04	0.04	0.14
21			0.04		0.05	0.04	0.05
22			0.04	0.04	0.04	0.04	0.04
23				0.04	0.04	0.04	0.05
24			0.04	0.04	0.04	0.04	0.05
25			0.04	0.04	0.03	0.03	0.05
26				0.06	0.04	0.04	0.10
27			0.08	0.04	0.04	0.04	0.08
28			0.06	0.05		0.04	0.07

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: 3/9/22
	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:	Feb-22	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	0.76	66	50.2	8.3	6.77	19.4	Y	155
2	0.79	66	52.1	8.4	6.86	19.9	Y	155
3	0.78	81	63.2	8.6	6.80	19.2	Y	155
4	0.76	81	61.6	8.6	6.93	20.1	Y	155
5	0.79	81	64.0	8.1	6.80	19.9	Y	155
6	0.79	81	64.0	8.4	6.87	20.0	Y	155
7	0.81	81	65.6	8.4	6.99	20.9	Y	155
8	0.81	81	65.6	8.5	7.00	20.8	Y	155
9	0.78	81	63.2	8.4	7.02	21.0	Y	155
10	0.77	81	62.4	8.4	6.99	20.8	Y	155
11	0.79	81	64.0	8.5	6.86	19.8	Y	155
12	0.8	81	64.8	8.3	6.94	20.6	Y	155
13	0.8	81	64.8	9.7	6.90	18.6	Y	155
14	0.77	81	62.4	9.3	7.16	20.8	Y	155
15	0.77	81	62.4	9.1	6.90	19.3	Y	155
16	0.81	81	65.6	9.0	6.87	19.3	Y	155
17	0.79	81	64.0	9.1	6.99	19.9	Y	155
18	0.79	81	64.0	9.0	6.98	20.0	Y	155
19	0.79	81	64.0	9.2	6.85	18.9	Y	155
20	0.81	81	65.6	10.0	6.93	18.4	Y	155
21	0.83	81	67.2	9.0	6.91	19.6	Y	155
22	0.82	81	66.4	8.5	7.00	20.9	Y	155
23	0.81	81	65.6	8.9	6.89	19.5	Y	155
24	0.81	81	65.6	8.7	6.92	20.0	Y	155
25	0.81	81	65.6	8.5	6.92	20.3	Y	155
26	0.83	81	67.2	8.8	6.93	20.0	Y	155
27	0.81	81	65.6	8.5	6.93	20.3	Y	155
28	0.8	81	64.8	9.3	6.98	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