

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Lane**
 Month/Year: **Mar-22**

Conventional or Direct Filtration

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			0.04	0.04	0.03		0.05	
2			0.06	0.05	0.04	0.03	0.08	
3				0.05		0.03	0.06	
4				0.03	0.03	0.03	0.05	
5				0.05	0.04	0.03	0.07	
6			0.05	0.04	0.03	0.03	0.07	
7			0.04	0.04	0.03	0.03	0.06	
8			0.03	0.05	0.04	0.03	0.05	
9			0.03	0.03	0.05	0.04	0.06	
10			0.03	0.03		0.03	0.05	
11			0.07	0.05	0.04	0.03	0.08	
12			0.03	0.03	0.04	0.03	0.05	
13			0.06	0.05	0.04	0.04	0.08	
14			0.04	0.03	0.03	0.04	0.05	
15				0.04	0.04	0.03	0.05	
16			0.04	0.04	0.06	0.05	0.07	
17			0.04	0.04	0.04	0.04	0.08	
18	0.03	0.04	0.03	0.03	0.04	0.04	0.06	
19	0.06		0.06	0.06	0.04	0.04	0.09	
20			0.04	0.04	0.04	0.04	0.05	
21			0.04	0.04	0.05	0.05	0.06	
22			0.04	0.04	0.04	0.04	0.05	
23			0.04	0.04	0.03	0.03	0.04	
24			0.04	0.03	0.04	0.06	0.07	
25				0.06	0.04	0.04	0.08	
26			0.04	0.04	0.04	0.03	0.05	
27								
28			0.04	0.03	0.03	0.03	0.05	
29			0.04	0.05	0.06	0.04	0.08	
30			0.04	0.04	0.04	0.03	0.05	
31			0.04	0.03	0.03	0.03	0.05	

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: 4/7/22
	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:	Mar-22	Disinfection <i>Giardia</i> Log Inactiv:	0.5
--------------	-----------------	--------------	-------------	--------	--	-----

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	0.8	66	52.8	9.3	7.13	20.7	Y	155
2	0.77	66	50.8	9.2	7.02	20.0	Y	155
3	0.8	81	64.8	9.7	7.01	19.3	Y	155
4	0.81	81	65.6	9.3	6.92	19.2	Y	155
5	0.8	81	64.8	9.2	6.92	19.3	Y	155
6	0.8	81	64.8	8.8	6.97	20.2	Y	155
7	0.78	81	63.2	8.8	6.96	20.1	Y	155
8	0.84	81	68.0	10.0	6.98	18.8	Y	145
9	0.83	81	67.2	9.4	6.97	19.5	Y	145
10	0.82	81	66.4	9.8	6.98	19.0	Y	145
11	0.81	81	65.6	9.0	6.88	19.3	Y	145
12	0.9	81	72.9	9.4	6.94	19.4	Y	145
13	0.88	81	71.3	9.5	6.77	18.2	Y	145
14	0.9	81	72.9	9.2	6.94	19.7	Y	145
15	0.86	81	69.7	9.3	7.02	20.0	Y	145
16	0.88	81	71.3	9.6	7.02	19.7	Y	145
17	0.88	81	71.3	9.8	7.02	19.4	Y	145
18	0.92	81	74.5	9.6	6.94	19.2	Y	145
19	0.88	81	71.3	10.0	6.88	18.3	Y	145
20	0.86	81	69.7	10.0	6.78	17.6	Y	145
21	0.87	81	70.5	9.8	7.07	19.7	Y	145
22	0.9	81	72.9	10.2	6.88	18.1	Y	145
23	0.87	81	70.5	10.7	6.97	18.0	Y	145
24	0.86	81	69.7	10.8	7.01	18.1	Y	145
25	0.83	81	67.2	10.1	6.86	17.9	Y	145
26	0.84	81	68.0	10.5	6.96	18.1	Y	145
27								
28	0.76	81	61.6	11.0	7.00	17.6	Y	145
29	0.8	81	64.8	11.0	6.94	17.3	Y	145
30	0.79	81	64.0	10.7	6.96	17.8	Y	145
31	0.81	81	65.6	11.3	6.94	17.0	Y	145

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

Revised October 2013