

OHA - Drinking Water Services - Turbidity Monitoring Report Form County:
Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: Lyons - Mehama Water Dist ID #: 4100493 WTP: AA Month/Year: June 2024

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			0.032				0.032
2			0.030				0.030
3			0.030				0.030
4			0.031				0.031
5			0.036				0.036
6			0.038				0.038
7			0.034				0.034
8			0.044				0.044
9			0.030				0.030
10			0.033				0.033
11			0.031				0.031
12			0.031				0.031
13			0.029				0.029
14			0.029				0.029
15			0.028				0.028
16			0.027				0.027
17			0.031				0.031
18			0.030				0.030
19			0.050				0.050
20			0.029				0.029
21			0.029				0.029
22			0.038				0.038
23			0.037				0.037
24			0.038				0.038
25			0.034				0.034
26			0.051				0.051
27			0.050				0.050
28			0.050				0.050
29			0.047				0.047
30			0.052				0.052
31							

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
Monthly Summary			
95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No			
Notes:		PRINTED NAME: <u>John F Markert II</u>	
		SIGNATURE: <u>[Signature]</u>	DATE: <u>July 1 2024</u>
		PHONE #: <u>(503) 551-8653</u>	CERT #: <u>TA-309712</u> <u>0-2 309712</u>

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

System Name: Lyons Mebama Water District ID #: 4100493 WTP: AA Month/Year: June 2024

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/8/25 8:27	0.82	61	50	11.8	6.22	32	yes	565
2/9/25 10:00	0.84	61	53	11.9	6.94	35	yes	565
3/17/25 2:00	0.70	61	43	11.6	7.04	36	yes	565
4/17/25 7:40	0.80	61	49	11.8	7.15	37	yes	565
5/17/25 7:37	0.87	61	53	11.8	7.17	38	yes	565
6/17/25 7:12	0.83	61	51	12.4	6.34	26	yes	565
7/17/25 7:10	0.76	61	46	12.1	6.30	25	yes	565
8/17/25 7:37	0.87	61	53	11.8	6.38	28	yes	565
9/17/25 7:25	0.97	65	54	12.0	6.46	27	yes	565
10/17/25 7:49	0.81	61	49	11.9	6.55	30	yes	565
11/17/25 7:39	0.79	61	48	11.9	6.84	33	yes	565
12/17/25 7:12	0.71	61	44	11.7	6.49	29	yes	565
13/17/25 7:40	0.76	61	46	11.5	6.67	31	yes	565
14/17/25 7:44	0.78	61	48	11.7	6.53	30	yes	565
15/18/25 8:56	0.79	61	48	11.5	6.51	30	yes	565
16/18/25 9:36	0.83	61	51	11.4	6.55	30	yes	565
17/17/25 7:10	0.79	61	48	11.6	6.63	31	yes	565
18/17/25 7:45	0.78	61	48	11.5	6.61	31	yes	565
19/17/25 7:43	0.77	61	47	12.1	6.65	26	yes	565
20/17/25 7:12	0.80	61	49	12.5	6.68	29	yes	565
21/17/25 7:10	0.49	61	30	12.1	6.62	29	yes	565
22/17/25 7:43	0.63	61	38	13.5	6.73	31	yes	565
23/17/25 7:40	0.64	61	39	13.6	6.76	27	yes	565
24/17/25 7:44	0.67	61	41	13.4	6.90	28	yes	565
25/17/25 7:45	0.63	61	38	13.5	7.01	30	yes	565
26/17/25 7:38	0.90	61	55	13.7	6.73	28	yes	565
27/17/25 7:38	0.66	61	40	12.9	6.81	30	yes	565
28/17/25 7:40	0.71	61	43	13.1	7.03	29	yes	565
29/17/25 7:45	0.77	61	45	13.7	6.90	28	yes	565
30/19/25 1:30	0.75	61	46	13.4	6.78	27	yes	565
31/								

³ If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours. Revised September 2016
 Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf

Return by 10th of following month by email, fax, or mail to:
 dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350