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

System Name: Lyons Mehama Water District **ID #:** 4100493 **WTP-:** AA **Month/Year:** May 2025

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			0.029				0.029
2			0.030				0.030
3			0.030				0.030
4			0.030				0.030
5			0.038				0.038
6			0.035				0.035
7			0.035				0.035
8			0.036				0.036
9			0.036				0.036
10			0.035				0.035
11			0.037				0.037
12			0.036				0.036
13			0.038				0.038
14			0.047				0.047
15			0.063				0.063
16			0.040				0.040
17			~~0.040~~	0.040			0.040
18			0.037				0.037
19			0.037				0.037
20			.034				0.034
21			.036				0.036
22			0.037				0.037
23			.036				.036
24			0.036				0.036
25			0.036				0.036
26			0.038				0.038
27			.040				.040
28			.036				.036
29			.036				.036
30			.063				.063
31			.040				.040

Slow Sand/Membrane/DE Filtration/Unfiltered
Monthly Summary

95% of daily turbidity readings ≤ 1 NTU? [2] (Yes) / No
All daily turbidity readings ≤ 5 NTU? (Yes) / No

Notes:

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back) (Yes) / No

All Cl_2 residual at entry point ≥ 0.2 mg/l? (Yes) / No

PRINTED NAME: John Markart

SIGNATURE: John

DATE: 6-2-2025

PHONE #: (503) 551-8653

CERT #: T309712 D309712

[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 Mehama Water District **ID #:** 4100493 **WTP-:** AA **Month/Year:** May 2025

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]		Use tables	Yes / No	[GPM]
1/ 748	0.76	61	46	10.9	6.4	30	Yes	565
2/ 740	0.85	61	52	11.9	7.01	36	yes	565
3/10:00	0.80	61	49	11.6	6.75	32	yes	565
4/10:00	0.80	61	49	11.1	6.81	33	yes	565
5/ 738	0.74	61	45	11.2	6.64	30	yes	565
6/ 740	0.77	61	47	11.5	6.97	34	yes	565
7/7:24	0.77	61	47	11.4	6.84	33	yes	565
8/ 751	0.99	61	60	11.2	6.75	32	yes	565
9/ 739	1.06	61	65	11.4	6.86	34	yes	565
10/8:10	.70	61	43	11.5	6.75	32	yes	565
11/9:20	.83	61	51	11.5	7.24	39	yes	565
12/ 745	0.72	61	44	11.4	7.02	34	yes	565
13/ 741	0.99	61	60	11.3	7.15	38	yes	565
14/ 743	1.01	61	67	11.3	7.07	36	yes	565
15/ 742	0.89	61	54	11.2	7.29	39	yes	565
16/ 739	0.81	61	49	11.1	7.32	39	yes	565
17/7:24	1.03	61	63	11.5	7.36	41	yes	565
18/9:18	0.94	61	57	11.1	7.09	36	yes	565
19/8:30	0.86	61	53	11.2	6.41	29	Yes	565
20/ 735	.56	61	34	11.0	6.68	31	Yes	565
21/7:50	2.2	61	134	11.0	6.68	46	Yes	562
22/ 740	1.03	61	63	11.3	7.06	36	yes	565
23/ 745	.85	61	62	11.5	7.16	38	Yes	565
24/ 814	0.70	61	43	11.9	6.91	33	yes	565
25/ 908	0.83	61	51	11.5	7.01	34	yes	565
26/ 733	0.89	61	54	11.4	7.04	35	yes	565
27/7:50	.75	61	46	11.5	7.17	41	Yes	565
28/7:47	.80	61	49	11.8	6.95	34	yes	565
29/7:37	.63	61	38	11.5	6.99	34	yes	565
30/7:45	.67	61	41	11.3	7.19	37	Yes	565
31/8:15	.79	61	49	11.6	6.98	34	Yes	565

[3] If Cl_2 at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours.

Revised November 2022

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@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350