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:** June 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			.038				.038
2			.036				.036
3			.036				.036
4			.049				.049
5			.045				.045
6			.044				.044
7			.039				.039
8			.039				.039
9			~~.05~~ .049				.047
10			.051				.051
11			.044				.044
12			.039				.039
13			.035				.035
14			.032				.032
15			.030				.030
16			.026				.026
17			.035				.035
18			.035				.035
19			.034				.034
20			.033				.033
21			.032				.032
22			.029				.029
23			.030				.030
24			.033				.033
25			.028				.028
26			.027				.027
27			.033				.033
28			.027				.027
29			6.027				.027
30			.029				.029
31							

Slow Sand/Membrane/DE Filtration/Unfiltered Monthly Summary	**Monthly Summary (Answer Yes or No)**	
95% of daily turbidity readings ≤ 1 NTU? [2] ~~Yes~~ / No All daily turbidity readings ≤ 5 NTU? Yes / No	CT's met everyday? (see back) Yes / No	All Cl_2 residual at entry point ≥ 0.2 mg/l? Yes / No
Notes:	**PRINTED NAME:** John Markert	
	SIGNATURE: John Markert	**DATE:** 6-30-2025
	PHONE #: (541) 990 5007	**CERT #:** T 309712 D 309712

[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:** June 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 /8:09	.70	61	43	11.4	7.20	37	Yes	565
2 /7:5	.72	61	44	11.2	7.33	40	yes	565
3 /8:24	.87	61	53	11.2	6.83	33	yes	565
4 /4:49	.76	61	46	11.5	6.97	34	yes	565
5 /7:4	.80	61	49	11.6	7.26	34	yes	565
6 /1:59	.78	61	48	11.9	7.22	37	Yes	565
7 /8:15	.77	61	47	11.2	7.24	38	Yes	565
8 /8:39	.79	61	48	12.2	7.36	37	Yes	565
9 /8:20	.76	61	46	12.3	7.25	36	Yes	565
10 /7:49	.78	61	48	13.2	7.14	30	Yes	565
11 /7:35	.73	61	45	12.7	7.19	34	Yes	565
12 /7:49	.76	61	46	12.1	7.13	34	yes	565
13 /7:42	1.23	61	75	13.1	6.86	29	Yes	565
14 /7:59	1.18	61	72	12.8	7.24	37	Yes	565
15 /8:0	1.19	61	73	12.6	7.05	32	Yes	565
16 /7:5	1.18	61	72	12.6	7.03	34	yes	565
17 /7:4	0.94	61	57	12.7	6.89	31	Yes	565
18 /7:3	0.79	61	48	12.9	6.99	32	yes	565
19 /7:3	.80	61	49	12.6	6.82	31	yes	565
20 /7:4	.90	61	54	12.3	6.85	30	yes	565
21 /8:0	.86	61	52	12.3	7.06	32	yes	565
22 /8:5	1.76	61	107.36	12.1	6.99	36	yes	565
23 /7:5	1.56	61	95.16	12.9	7.01	36	yes	565
24 /7:3	.74	61	45	13.3	7.27	33	yes	565
25 /7:3	1.15	61	70.15	13.3	7.08	31	yes	565
26 /7:3	.95	61	57.95	12.9	7.15	32	yes	565
27 /7:4	.85	61	52	13.1	7.05	31	yes	565
28 /8:1	.73	61	45	12.8	7.07	33	yes	565
29 /9:1	.86	61	52	12.9	7.04	32	yes	565
30 /7:3	.79	61	48	13.3	7.21	32	yes	565
31 /								

[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