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:** 9/2025

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			.033				.033
2			.031				.031
3			.035				.035
4			0.034				.034
5			.033				.033
6			.031				.031
7			.035				
8			.044				.044
9			.060				.060
10			.029				.029
11			.046				.046
12			0.037				0.037
13			.027				.027
14			.028				.028
15			.029				.029
16			.037				.037
17			.034				.034
18			.035				.035
19			.033				.033
20			.041				.041
21			.030				.030
22			.031				.031
23			.031				.031
24			.029				.029
25			.030				.030
26			.029				.029
27			0.045				0.045
28			.031				.031
29			.036				.036
30			.031				.031
31							

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**

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**

Notes:

PRINTED NAME: John Markert

SIGNATURE: John Markert **DATE:** 10-1-2025

PHONE #: (541) 990-5007 **CERT #:** D2 309712 T1 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-:** 99 **Month/Year:** September 2023

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/ 8:39	.79	61	48	13.9	6.41	24	Yes	565
2/ 7:49	.70	61	42	14	6.45	22	Yes	565
3/ 7:49	.78	61	48	14.5	6.89	24	Yes	565
4/ 7:49	.67	61	40	13.6	6.72	26	Yes	565
5/ 7:51	.83	61	50	14.4	7.23	29	Yes	565
6/ 8:39	.88	61	54	14.1	7.34	30	Yes	565
7/ 9:09	.92	61	56	14.0	7.63	36	Yes	565
8/ 7:48	.97	61	59	14.2	7.01	27	Yes	565
9/ 7:43	.92	61	56	14.2	6.77	25	Yes	565
10/ 7:59	.99	61	61	13.9	7.36	35	Yes	565
11/ 7:40	.95	61	57	14.4	6.74	25	Yes	568
12/ 7:51	1.12	61	68	14	6.92	27	Yes	568
13/ 8:09	.88	61	53	14.3	6.96	26	Yes	565
14/ 9:55	1.06	61	64	14.3	6.93	27	Yes	565
15/ 7:42	.82	61	50	14	6.71	24	Yes	565
16/ 7:41	.95	61	57	14.1	6.86	26	Yes	565
17/ 7:44	.97	61	59	14	6.85	26	Yes	565
18/ 7:43	.82	61	50	14	6.87	25	Yes	565
19/ 7:49	.82	61	50	14	6.83	25	Yes	565
20/ 8:30	.83	61	50	13.9	6.87	25	Yes	568
21/ 9:09	.82	61	50	13.9	6.75	28	Yes	568
22/ 7:40	.85	61	51	13.8	7.50	35	Yes	565
23/ 7:37	.84	61	51	13.9	6.93	28	Yes	565
24/ 7:39	.83	61	50	13.9	6.79	26	Yes	565
25/ 7:41	.82	61	50	13.8	6.84	27	Yes	565
26/ 7:45	.86	61	52	13.6	6.91	28	Yes	565
27/ 8:25	.85	61	51	13.6	6.79	27	Yes	565
28/ 10:00	.83	61	50	13.8	6.89	29	Yes	565
29/	.86	61	52	13.7	6.79	27	Yes	565
30/ 7:49	.85	61	51	13.5	6.78	26	Yes	565
31/								

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

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf

Revised November 2022

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