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

System Name: Lyons Mohawk Water Dist ID #: 4100493 WTP-: AA Month/Year: January 2026

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			.027				.027
2			.028				.028
3			.028				.028
4			.027				.027
5			.027				.027
6			.027				.027
7			.027				.027
8			.028				.028
9			.028				.026
10			.029				.029
11			.032				.032
12			.030				.030
13			.031				.031
14			.032				.032
15			.027				.027
16			.027				.027
17			.027				.027
18			.028				.028
19			.029				.028
20			.028				.028
21			.028				.028
22			.028				.028
23			.028				.028
24			.028				.028
25			.027				.027
26			.029				.029
27			.029				.029
28			.029				.029
29			.029				.029
30			.029				.029
31			.030				.030

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: [signature]	DATE: ~~January~~ Feb 9th 2026
	PHONE #: (503) 551 8653	CERT #: 30972 T1 D2

[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:** January 2026

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/	.80	61	49	11.0	6.74	32	Yes	565
2/	.84	61	51	11.7	6.67	31	Yes	565
3/	.87	61	53	12.0	7.19	35	Yes	565
4/	.87	61	53	12.1	7.07	34	Yes	565
5/	.92	61	56	11.9	6.35	28	yes	565
6/	.83	61	50	11.8	6.89	33	yes	565
7/	1.01	61	62	12.3	7.01	34	yes	565
8/	.94	61	57	11.9	6.74	32	yes	565
9/	.97	61	59	12.2	6.27	25	yes	565
10/	.86	61	52	8.8	6.62	38	yes	565
11/	.92	61	56	9.1	6.89	38	yes	565
12/	.98	61	60	9.4	6.86	38	yes	565
13/	.78	61	48	9.5	6.94	39	yes	565
14/	.73	61	45	8.2	7.01	43	yes	565
15/	.70	61	43	8.1	7.02	43	yes	565
16/	.72	61	44	8.9	6.57	36	yes	565
17/	.82	61	50	8.3	6.48	35	yes	565
18/	.80	61	49	8.9	6.56	36	yes	565
19/	.83	61	50	8.5	6.54	37	yes	565
20/	.74	61	45	8.8	7.00	42	yes	565
21/	.70	61	43	6.7	6.58	41	yes	565
22/	.92	61	56	8.8	6.78	39	yes	565
23/	.85	61	52	6.7	7.07	49	yes	565
24/	.92	61	56	6.2	7.14	51	yes	565
25/	.78	61	48	6.5	7.10	47	yes	565
26/	.85	61	52	6.1	7.01	49	yes	565
27/	.77	61	47	6.7	6.86	45	yes	565
28/	.77	61	47	7.2	6.76	44	yes	565
29/	.86	61	53	7.3	6.75	44	yes	565
30/	.82	61	50	7.2	6.64	43	yes	565
31/	.81	61	49	7.7	6.76	44	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