

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 #: 4103493 WTP: A4 Month/Year: AUG 2021

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			.026				.026
3			.027				.027
4			.027				.027
5			.027				.027
6			.029				.029
7			.028				.028
8			.029				.029
9			.029				.029
10			.029				.029
11			.032				.032
12			.034				.034
13			.035				.035
14			.035				.035
15			.036				.036
16			.039				.039
17			.040				.040
18			.042				.042
19			.042				.042
20			.028				.028
21			.026				.026
22			.028				.028
23			.028				.028
24			.028				.028
25			.035				.035
26			.034				.034
27			.034				.034
28			.036				.036
29			.039				.039
30			.039				.039
31			.036				.036

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="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
Notes:		PRINTED NAME: William A GRIMES	
		SIGNATURE: W.A. Grimes	DATE: 9-1-21
		PHONE #: (503) 859-2367	CERT #: WT 2883

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-HEHAMA WATER DIST

ID #: 4100428 WTP: AA

Month/Year: AUG 2021

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]
1/10/20	.76	61	46	13.9	6.67	27	yes	565
2/10/20	.92	61	56	14.2	6.65	25	yes	565
3/10/20	.79	61	48	14.5	6.86	22	yes	565
4/10/20	.84	61	51	14.2	6.72	26	yes	565
5/10/20	.83	61	51	14.3	6.72	26	yes	565
6/10/20	.90	61	55	14.1	7.48	33	yes	565
7/10/20	.94	61	57	14.3	6.81	27	yes	565
8/10/20	.82	61	50	14.3	6.94	27	yes	565
9/10/20	.74	61	45	13.9	6.79	27	yes	565
10/10/20	.72	61	44	13.9	6.75	30	yes	565
11/10/20	.53	61	33	14.4	7.02	27	yes	565
12/10/20	.59	61	36	14.5	7.03	27	yes	565
13/10/20	.62	61	38	14.6°	6.98	27	yes	565
14/10/20	.68	61	42	14.40	7.07	28	yes	565
15/10/20	.76	61	46	14.4	7.19	29	yes	565
16/10/20	.64	61	42	14.2	6.83	26	yes	565
17/10/20	.74	61	45	14.3	7.19	29	yes	565
18/10/20	.99	61	60	13.7	6.84	29	yes	565
19/10/20	.82	61	50	14.1	6.93	27	yes	565
20/10/20	.73	61	45	14.2	7.04	27	yes	565
21/10/20	1.01	61	61	13.9	6.94	30	yes	565
22/10/20	.89	61	54	14.1	7.09	29	yes	565
23/10/20	.77	61	47	13.7	7.06	30	yes	565
24/10/20	.81	61	49	13.9	6.77	28	yes	565
25/10/20	.84	61	51	15	6.84	24	yes	565
26/10/20	.70	61	43	14.3	6.84	26	yes	565
27/10/20	.81	61	49	14.0	6.58	24	yes	565
28/10/20	.86	61	52	14.1	6.64	25	yes	565
29/10/20	.68	61	41	13.9	7.18	32	yes	565
30/10/20	0.82	61	50	14	6.94	27	yes	565
31/10/20	0.75	61	46	13.8	7.52	36	yes	565

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