

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

System Name: LYONS - Mahama Water District ID #: 4100493 WTP: A# Month/Year: May/2022

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1			.30				.30
2			.03				.03
3			.029				.029
4			.029				.029
5			.029				.029
6			.029				.029
7			.031				.031
8			.034				.034
9			.036				.036
10			.037				.037
11			.033				.033
12			.031				.031
13			.033				.033
14			.031				.031
15			.034				.034
16			.035				.035
17			.032				.032
18			.031				.031
19			.032				.032
20			.032				.032
21			.031				.031
22			.032				.032
23			.031				.031
24			.034				.034
25			.033				.033
26			.025				.025
27			.029				.029
28			.039				.039
29			.037				.037
30			.038				.038
31			.038				.038

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b> Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> <u>(Yes) No</u> All daily turbidity readings ≤ 5 NTU? <u>(Yes) No</u>	Monthly Summary (Answer <u>(Yes)</u> or <u>No</u> ) CT's met everyday? (see back) <u>(Yes) No</u> All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <u>(Yes) No</u>	
	Notes:	
PRINTED NAME: <u>William A GRIMES</u>		DATE: <u>4 June 22</u>
SIGNATURE: <u>W.A. Grimes</u>		CERT #: <u>2885</u>
PHONE #: <u>(503) 859-2367</u>		

<sup>1</sup> 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. <sup>2</sup> Filtered systems only.

# OHA - Drinking Water Services – Surface Water Quality Data Form

System Name: Lyon's - Mehama Water District ID #: 4100493 WTP: AA Month/Year: May 2022

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/07/41	.91	61	56	9.8	7.78	45	yes	565
2/07/41	.8	61	49	10.6	7.18	40	yes	565
3/07/40	1	61	61	10.3	7.23	42	yes	565
4/07/43	.88	61	54	10.5	7.44	45	yes	545
5/07/40	.89	61	54	10.8	6.78	35	yes	565
6/07/38	.94	61	57	10.4	7.03	39	yes	565
7/08/00	.95	61	58	10.2	7.15	40	yes	565
8/07/45	.99	61	60	10.0	6.77	35	yes	565
9/07/41	.91	61	56	10.0	7.06	39	yes	565
10/07/42	.93	61	57	9.8	6.92	40	yes	565
11/07/41	.87	61	53	10.2	6.91	37	yes	565
12/07/40	.96	61	59	10.5	6.81	36	yes	565
13/07/40	1.00	61	61	10.2	7.19	40	yes	565
14/07/45	.93	61	57	10.5	7.21	42	yes	565
15/07/30	.92	61	56	10.6	7.15	40	yes	565
16/07/40	.9	61	55	10.8	7.01	39	yes	565
17/07/41	.95	61	58	10.7	6.81	36	yes	565
18/07/44	.92	61	56	11	7.25	39	yes	565
19/07/50	.97	61	59	10.3	7.46	45	yes	565
20/07/42	.88	61	54	10.1	7.14	40	yes	565
21/07/45	.85	61	52	10.4	7.12	40	yes	565
22/07/30	.81	61	49	11.0	7.11	40	yes	565
23/07/45	.73	61	45	11.2	6.94	34	yes	565
24/08/00	.77	61	44	11.6	6.92	34	yes	565
25/07/41	.80	61	49	11.5	6.95	34	yes	565
26/07/39	.81	61	49	11.8	6.92	35	yes	565
27/07/41	.87	61	53	11.5	7.17	38	yes	565
28/07/30	.94	61	57	11.0	6.89	33	yes	565
29/07/30	.76	61	46	10.9	6.86	36	yes	565
30/07/45	.94	61	57	11.1	7.02	36	yes	565
31/07/40	.79	61	48	11.1	6.93	34	yes	565

<sup>3</sup> If Cl<sub>2</sub> 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](http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf)

Return by 10<sup>th</sup> of following month by email, fax, or mail to:

[dwp.dmce@state.or.us](mailto:dwp.dmce@state.or.us); 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350