

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: FEB 23

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			.031				.031
2			.032				.032
3			.032				.032
4			.032				.032
5			.032				.032
6			.032				.032
7			.033				.033
8			.032				.032
9			.035				.035
10			.033				.033
11			.035				.035
12			.033				.033
13			.033				.033
14			.035				.035
15			.035				.035
16			.034				.034
17			.033				.033
18			.027				.027
19			.026				.026
20			.026				.026
21			.026				.026
22			.027				.027
23			.026				.026
24			.026				.026
25			.027				.027
26			.027				.027
27			.026				.026
28			.028				.028
29							
30							
31							

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
Monthly Summary			
95% of daily turbidity readings ≤ 1 NTU? ²	Yes / No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes / No	Yes / No	Yes / No
Notes:		PRINTED NAME: John F Markert IV	
		SIGNATURE: <i>John F Markert IV</i>	DATE: 2-28-23
		PHONE #: (503) 859-2367	CERT #: 7-309712

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 DIST **ID #:** 410049 **WTP:** AA **Month/Year:** FEB 23

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]
1/07	13 .86	61	52	10	7.31	43	yes	565
2/07	12 .86	61	52	10	7.25	42	yes	565
3/07	13 .87	61	53	10.2	7.26	42	yes	565
4/08	00 .87	61	53	10.4	7.10	43	yes	565
5/08	00 .88	61	54	10.4	7.43	45	yes	565
6/07	38 .88	61	54	10.5	6.88	36	yes	565
7/07	40 .86	61	52	10.5	6.95	37	yes	565
8/07	45 .91	61	56	10.2	6.95	37	yes	565
9/07	41 .82	61	50	10.1	6.94	37	yes	565
10/07	42 .82	61	50	10.3	6.91	37	yes	565
11/07	52 .80	61	49	10.2	6.47	33	yes	565
12/07	55 .81	61	49	10.3	6.99	37	yes	565
13/07	44 .84	61	51	10.3	7.03	39	yes	565
14/07	45 .84	61	51	9.9	7.00	40	yes	565
15/07	40 .86	61	52	9.7	7.00	40	yes	565
16/07	42 .83	61	51	9.8	6.82	38	yes	565
17/07	41 .83	61	51	9.8	7.01	41	yes	565
18/07	45 .85	61	52	10.0	7.06	39	yes	565
19/08	23 .87	61	53	10.3	6.93	37	yes	565
20/07	37 .88	61	54	10.4	7.07	39	yes	565
21/07	43 .86	61	50	10.4	6.97	37	yes	565
22/07	41 .90	61	55	9.8	7.15	43	yes	565
23/07	50 .94	61	57	9.5	7.23	45	yes	565
24/07	43 .94	61	57	8.7	6.99	42	yes	565
25/07	40 .85	61	52	9.4	6.85	40	yes	565
26/07	47 .90	61	55	9.7	6.61	36	yes	565
27/07	40 .85	61	52	9.5	6.87	38	yes	565
28/07	46 .85	61	52	9.5	7.13	43	yes	565
29/								
30/								
31/								

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-ult-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