

**OHA - Drinking Water Program -Turbidity Monitoring Report Form**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

County: **Lane**  
 Month/Year: **Nov-23**

System Name: **Mapleton Water District** ID#: **41 00507** WTP : **WTP-A**

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	0.060	0.060	0.060	0.060	0.060	0.060	0.060
2	0.060	0.060	0.060	OFF	0.060	0.060	0.060
3	0.060	0.060	0.060	0.060	OFF	OFF	0.060
4	OFF	OFF	OFF	OFF	0.080	OFF	0.080
5	OFF	OFF	OFF	OFF	0.080	0.060	0.080
6	0.060	0.060	0.060	0.060	0.060	0.060	0.060
7	0.060	0.110	0.060	0.060	0.090	0.060	0.110
8	0.060	0.060	0.110	0.060	0.060	0.060	0.110
9	0.060	0.060	OFF	OFF	0.060	0.060	0.060
10	0.060	0.080	OFF	OFF	OFF	0.080	0.080
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12	OFF	OFF	OFF	OFF	OFF	0.110	0.110
13	0.100	0.050	OFF	OFF	OFF	OFF	0.100
14	0.110	0.110	OFF	OFF	OFF	OFF	0.110
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF
16	0.061	OFF	OFF	0.061	0.061	OFF	0.061
17	OFF	OFF	OFF	OFF	OFF	OFF	OFF
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF
19	OFF	OFF	OFF	OFF	OFF	0.070	0.070
20	0.070	0.070	0.072	0.075	0.075	0.070	0.075
21	0.077	0.077	0.077	0.077	0.076	0.078	0.078
22	0.078	0.077	0.078	0.079	0.077	0.077	0.079
23	0.080	0.077	0.077	0.076	0.077	0.078	0.080
24	0.077	0.076	0.078	0.078	0.078	0.080	0.080
25	0.080	0.078	0.078	0.078	0.078	0.078	0.080
26	0.078	0.080	0.080	0.080	0.080	0.080	0.080
27	0.080	0.080	0.080	0.080	0.080	0.080	0.080
28	0.080	0.080	0.080	0.081	0.080	0.080	0.081
29	0.080	0.081	0.081	0.081	0.080	0.081	0.081
30	0.080	0.082	0.082	0.083	0.082	0.082	0.083
31							

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>	<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <b>✓ Yes / No</b>	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU? <b>✓ Yes / No</b>	<b>✓ Yes / No</b>	<b>✓ Yes / No</b>

<b>Notes:</b>	<b>PRINTED NAME: David Terrusa</b>	
	<b>SIGNATURE: /S/ David Terrusa</b>	<b>DATE: 12/23</b>
	<b>PHONE #: (541) 253-7556</b>	<b>CERT #: 6930</b>

<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 Program - Surface Water Quality Data Form

WTP - : WTP-D

System Name: Mapleton Water District ID#: 41 00507

Month/Year: Nov-23

Disinfection  
Giardia Log  
Inactiv:

0.5

Date	Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT C x T	Temp	pH	Required CT	CT Met? <sup>3</sup> Yes or No	Peak Hourly Demand Flow
		[ppm or mg/L]	[minutes]	formula	[° C]		formula	formula	[GPM]
1	10:00 AM	1.2	70	84.0	12.0	7.2	18.6	Yes	120
2	10:00 AM	1.2	70	84.0	11.0	7.2	19.8	Yes	120
3	10:00 AM	1.3	70	91.0	11.0	7.2	20.0	Yes	120
4	10:00 AM	1.5	70	105.0	10.0	7.2	21.9	Yes	120
5	10:00 AM	1.3	70	91.0	10.0	7.3	22.2	Yes	120
6	10:00 AM	1.3	70	91.0	10.0	7.3	22.2	Yes	150
7	10:00 AM	1.7	70	119.0	10.0	7.2	22.4	Yes	150
8	10:00 AM	1.8	70	126.0	10.0	7.2	22.6	Yes	150
9	10:00 AM	1.8	70	126.0	10.0	7.2	22.6	Yes	150
10	10:00 AM	1.4	70	98.0	9.0	7.2	23.1	Yes	150
11	10:00 AM	1	70	70.0	9.0	7.1	21.3	Yes	150
12	10:00 AM	1.3	70	91.0	9.0	7.2	22.9	Yes	150
13	10:00 AM	1.2	70	84.0	9.0	7.3	23.4	Yes	150
14	10:00 AM	0.9	70	63.0	10.0	7.2	20.5	Yes	150
15	10:00 AM	1.2	70	84.0	10.0	7.2	21.2	Yes	150
16	10:00 AM	1.1	70	77.0	9.0	7.2	22.3	Yes	150
17	10:00 AM	1.7	70	119.0	10.0	7.2	22.4	Yes	150
18	10:00 AM	1.9	70	133.0	10.0	7.2	22.9	Yes	150
19	10:00 AM	1.3	70	91.0	10.0	7.1	20.7	Yes	OFF
20	10:00 AM	1.8	70	126.0	10.0	7.2	22.6	Yes	150
21	10:00 AM	1.7	70	119.0	9.0	7.2	23.9	Yes	150
22	10:00 AM	1.6	70	112.0	8.0	7.1	24.4	Yes	150
23	10:00 AM	1.3	70	91.0	7.0	7.1	25.2	Yes	120
24	10:00 AM	1.5	70	105.0	7.0	7.2	26.7	Yes	120
25	10:00 AM	1.8	70	126.0	6.0	7.2	29.6	Yes	120
26	10:00 AM	1.7	70	119.0	6.0	7.2	29.3	Yes	120
27	10:00 AM	1.7	70	119.0	5.0	7.2	31.3	Yes	120
28	10:00 AM	1.7	70	119.0	5.0	7.2	31.3	Yes	120
29	10:00 AM	1.8	70	126.0	5.0	7.2	31.7	Yes	120
30	10:00 AM	1.8	70	126.0	5.0	7.2	31.7	Yes	120
31	10:00 AM								

<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 October 2013