

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

County: **Lane**  
 Month/Year: **Sep-24**

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	0.015	0.015	0.015	0.015	0.015	0.015	0.015
2	0.015	0.015	0.015	0.015	0.015	0.015	0.015
3	0.015	0.015	0.015	0.016	0.015	0.015	0.015
4	0.015	0.015	0.015	0.015	0.015	0.015	0.015
5	0.015	0.015	0.015	0.015	0.015	0.015	0.015
6	0.015	0.015	0.015	0.014	0.014	0.015	0.015
7	0.015	0.015	0.015	0.015	0.015	0.015	0.015
8	0.015	0.015	0.015	0.015	0.015	0.015	0.015
9	0.015	0.015	0.015	0.015	0.015	0.014	0.015
10	OFF	OFF	OFF	OFF	OFF	0.014	0.014
11	0.014	0.014	0.014	0.014	OFF	0.016	0.016
12	0.015	0.015	0.015	0.016	0.016	0.016	0.016
13	0.015	0.015	0.015	0.015	0.015	0.015	0.015
14	0.015	0.015	0.015	0.015	0.015	0.015	0.015
15	0.014	0.014	0.014	0.014	0.014	0.015	0.015
16	0.015	0.015	0.015	0.015	0.015	0.015	0.015
17	0.015	0.014	0.014	0.014	0.014	0.014	0.015
18	0.014	0.014	0.014	0.017	0.014	0.014	0.017
19	0.015	0.015	0.015	0.015	0.015	0.015	0.015
20	0.015	0.015	0.015	0.015	0.015	0.015	0.015
21	0.015	0.014	0.015	0.014	0.014	0.014	0.015
22	0.014	0.014	0.014	0.015	0.015	0.015	0.015
23	0.015	0.015	0.015	0.015	0.015	0.015	0.015
24	0.015	0.015	0.015	0.014	0.014	0.014	0.015
25	0.014	0.014	0.014	0.015	0.016	0.016	0.016
26	0.015	0.015	0.015	0.015	0.015	0.015	0.015
27	0.015	0.015	0.015	0.015	0.015	0.015	0.015
28	0.015	0.015	0.015	0.015	0.014	0.014	0.015
29	0.014	0.014	0.014	0.014	0.014	0.015	0.015
30	0.015	0.015	0.015	0.015	0.015	0.015	0.015

<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) <b>✓ Yes / No</b>	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <b>✓ Yes / No</b>
All daily turbidity readings ≤ 5 NTU? <b>✓ Yes / No</b>		

<b>Notes:</b>	<b>PRINTED NAME: David Terrusa</b>	
	<b>SIGNATURE: /S/ David Terrusa</b>	<b>DATE:10/01/24</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 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 Distric** ID#: **41 00507**

Month/Year: **Sep-24**

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	1.4	70	98.0	14.4	7.8	19.9	Yes	100
2	10:00 AM	1.37	70	95.9	16.0	8.0	19.2	Yes	113.3
3	10:00 AM	1.31	70	91.7	14.4	7.7	19.0	Yes	100
4	10:00 AM	1.24	70	86.8	16.8	7.7	16.1	Yes	125.2
5	10:00 AM	1.08	70	75.6	16.7	7.8	16.5	Yes	125
6	10:00 AM	1	70	70.0	14.4	7.7	18.4	Yes	125
7	10:00 AM	1.11	70	77.7	17.2	7.9	16.6	Yes	100
8	10:00 AM	1.25	70	87.5	16.7	7.9	17.5	Yes	100
9	10:00 AM	1.52	70	106.4	15.1	7.7	18.6	Yes	105
10	10:00 AM	0.99	70	69.3	16.6	7.8	16.4	Yes	OFF
11	10:00 AM	1.54	70	107.8	14.5	7.8	20.1	Yes	139.2
12	10:00 AM	1	70	70.0	15.8	7.7	16.7	Yes	129
13	10:00 AM	2.58	70	180.6	13.2	7.7	23.8	Yes	130
14	10:00 AM	1.94	70	135.8	14.3	7.9	22.1	Yes	130
15	10:00 AM	1.21	70	84.7	16.4	7.9	17.7	Yes	130
16	10:00 AM	1.61	70	112.7	12.9	7.6	21.0	Yes	130
17	10:00 AM	1.07	70	74.9	15.4	7.8	18.0	Yes	OFF
18	10:00 AM	1.29	70	90.3	13.5	7.7	20.2	Yes	130
19	10:00 AM	1.61	70	112.7	13.7	7.6	19.9	Yes	130
20	10:00 AM	1.17	70	81.9	12.8	7.7	20.8	Yes	130
21	10:00 AM	0.78	70	54.6	15.0	7.9	18.5	Yes	OFF
22	10:00 AM	0.62	70	43.4	13.0	7.6	18.6	Yes	130
23	10:00 AM	1.72	70	120.4	12.7	7.6	21.5	Yes	130
24	10:00 AM	1.34	70	93.8	14.1	7.6	18.8	Yes	130
25	10:00 AM	1.28	70	89.6	14.0	7.7	19.5	Yes	130
26	10:00 AM	0.92	70	64.4	13.8	7.5	17.6	Yes	130
27	10:00 AM	1.06	70	74.2	13.0	7.6	19.6	Yes	130
28	10:00 AM	1.27	70	88.9	13.1	7.6	19.9	Yes	130
29	10:00 AM	0.82	70	57.4	13.4	7.6	18.5	Yes	130
30	10:00 AM	2.41	70	168.7	11.1	7.9	29.0	Yes	130
31	10:00 AM		70					No	

<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