

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

County: **Lane**  
 Month/Year: **Jan-25**

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	0.016	0.016	0.015	0.015
3	0.015	0.015	0.015	0.017	0.015	0.015	0.017
4	0.015	OFF	OFF	0.015	0.015	0.015	0.015
5	0.015	0.015	0.015	0.015	0.015	0.016	0.016
6	0.015	0.015	0.015	0.015	0.015	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	0.016	0.015	0.016
10	0.015	0.015	0.015	0.017	0.015	0.015	0.017
11	0.015	0.015	0.015	0.015	0.016	0.016	0.016
12	0.015	0.015	0.015	0.015	0.015	0.015	0.015
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	0.015	0.015	0.015	0.015	0.015	0.015	0.015
16	0.015	0.015	0.015	0.015	0.015	0.015	0.015
17	0.015	0.015	0.015	0.015	0.015	0.015	0.015
18	0.015	0.015	0.015	0.016	0.015	0.015	0.016
19	0.015	0.016	0.015	0.015	0.015	0.015	0.016
20	0.015	0.015	0.015	0.015	0.015	0.015	0.015
21	0.015	0.015	0.015	0.015	0.015	0.015	0.015
22	0.016	0.015	0.015	0.015	0.015	0.015	0.016
23	0.015	0.015	0.015	0.015	0.015	0.015	0.015
24	0.015	0.015	0.015	0.015	0.015	0.015	0.015
25	0.015	0.015	0.015	0.015	0.015	0.015	0.015
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	0.015	0.015	0.015
29	0.015	0.015	0.015	0.015	0.015	0.015	0.015
30	0.015	0.015	0.015	0.015	0.015	0.016	0.016
31	0.015	0.015	0.016	0.017	0.017	0.016	0.017

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <b>✓ Yes / No</b>	CT's met everyday? (see back)	All Cl <sub>2</sub> 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: 2/10/25</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 District ID#: 41 00507**

**Month/Year: Jan-25**

**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	9:00 AM	1.59	70	111.3	9.3	7.7	27.7	Yes	146
2	9:00AM	1.27	70	88.9	10.2	7.7	25.1	Yes	150
3	9:00AM	1.48	70	103.6	10.8	7.8	25.6	Yes	170
4	9:00AM	1.54	70	107.8	9.8	7.7	26.6	Yes	145
5	9:00AM	1.54	70	107.8	11.7	7.7	23.4	Yes	149
6	9:00AM	1.68	70	117.6	11.9	7.7	23.5	Yes	146
7	9:00AM	1.79	70	125.3	9.6	7.7	27.8	Yes	146
8	9:00AM	1.69	70	118.3	9.4	7.8	28.8	Yes	149
9	9:00AM	1.68	70	117.6	8.7	7.8	30.2	Yes	149
10	9:00AM	1.63	70	114.1	9.0	7.7	28.4	Yes	149
11	9:00AM	1.37	70	95.9	9.1	7.7	27.3	Yes	150
12	9:00AM	1.74	70	121.8	9.2	7.7	28.3	Yes	149
13	9:00AM	1.75	70	122.5	8.6	7.8	30.6	Yes	150
14	9:00AM	1.86	70	130.2	7.7	7.8	33.0	Yes	149
15	9:00AM	1.84	70	128.8	8.1	7.8	32.0	Yes	142
16	9:00AM	2.04	70	142.8	7.4	7.4	29.8	Yes	142
17	9:00AM	1.85	70	129.5	7.6	7.5	29.8	Yes	142
18	9:00AM	1.95	70	136.5	7.4	7.6	31.7	Yes	142
19	9:00AM	1.89	70	132.3	6.6	7.6	33.2	Yes	142
20	9:00AM	1.78	70	124.6	6.0	7.5	32.9	Yes	142
21	9:00AM	1.75	70	122.5	5.8	7.4	32.1	Yes	142
22	9:00AM	1.64	70	114.8	5.8	7.5	32.8	Yes	116
23	9:00AM	1.73	70	121.1	7.4	7.5	29.8	Yes	116
24	9:00AM	1.67	70	116.9	8.3	7.6	28.8	Yes	115
25	9:00AM	1.71	70	119.7	6.0	7.6	33.9	Yes	116
26	9:00AM	1.77	70	123.9	5.8	7.5	33.3	Yes	116
27	9:00AM	1.72	70	120.4	5.9	7.5	32.9	Yes	115
28	9:00AM	1.75	70	122.5	5.2	7.5	34.7	Yes	124
29	9:00AM	1.67	70	116.9	7.1	7.5	30.2	Yes	116
30	9:00AM	1.62	70	113.4	6.5	7.4	30.1	Yes	116
31	9:00AM	1.25	70	87.5	8.5	7.5	26.1	Yes	135

<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