

OHA - Drinking Water Services -Turbidity Monitoring Report Form
Conventional or Direct Filtration

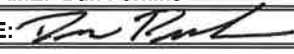
County: **Jackson**
 Month/Year: **Apr-21**

System Name: Medford Water Commission ID#: 41 00513 WTP : TP - B

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	OFF	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	OFF	0.05	OFF	OFF	0.05
3	OFF	OFF	0.05	0.05	0.05	OFF	0.06
4	OFF	OFF	0.01	0.05	OFF	OFF	0.05
5	OFF	OFF	OFF	0.05	0.05	OFF	0.05
6	OFF	OFF	0.05	0.04	0.01	OFF	0.05
7	OFF	OFF	OFF	0.04	0.05	OFF	0.05
8	OFF	OFF	0.04	0.05	0.05	OFF	0.05
9	OFF	OFF	0.05	0.04	0.04	OFF	0.06
10	OFF	OFF	0.05	0.05	0.04	OFF	0.05
11	OFF	OFF	OFF	0.04	0.04	OFF	0.04
12	OFF	OFF	0.04	0.04	0.04	OFF	0.05
13	OFF	OFF	0.04	0.08	0.03	OFF	0.08
14	OFF	OFF	0.06	OFF	OFF	0.05	0.06
15	OFF	OFF	0.04	0.05	0.05	OFF	0.07
16	OFF	OFF	0.03	0.04	0.04	OFF	0.04
17	OFF	OFF	0.04	0.04	0.04	0.04	0.04
18	OFF	OFF	0.03	0.04	0.04	0.07	0.07
19	OFF	OFF	0.03	0.04	0.06	0.07	0.07
20	OFF	OFF	0.04	0.04	0.06	0.04	0.06
21	OFF	OFF	0.04	0.05	0.04	0.04	0.05
22	OFF	OFF	OFF	0.04	0.04	0.04	0.05
23	OFF	OFF	0.04	0.04	0.04	0.04	0.05
24	OFF	OFF	0.04	0.04	0.05	OFF	0.05
25	OFF	OFF	0.02	0.04	0.04	OFF	0.06
26	OFF	OFF	0.04	0.04	0.04	0.05	0.05
27	OFF	OFF	0.04	0.04	0.04	0.05	0.05
28	OFF	OFF	0.05	0.04	0.06	0.05	0.06
29	OFF	OFF	0.04	0.04	0.04	0.04	0.04
30	0.04	OFF	0.04	0.04	0.04	0.04	0.05
31	N/A	N/A	N/A	N/A	N/A	N/A	N/A

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes	CT's met everyday? (see back)	Yes
All 4-hour turbidity readings ≤ 1 NTU?	Yes		All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All turbidity readings < IFE ² triggers	Yes		Yes

Notes:

PRINTED NAME: Dan Perkins
SIGNATURE: 
PHONE #: (541) 774-2742
DATE: 5/3/2021
CERT #: 2339

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : B

System Name: Medford Water Commission	ID#: 41	00513	Month/Year: Apr-21	Disinfection <i>Giardia</i> Log Inactive: 0.5
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
2	0.7	114	79.8	10.6	7.1	18.6	YES	10417
3	0.76	114	86.6	10	7.22	20.3	YES	10417
4	0.72	218	157.0	10	7.2	20.0	YES	5556
5	0.78	114	88.9	10	7.26	20.6	YES	10417
6	0.94	114	107.2	10	7.57	23.4	YES	10417
7	0.89	114	101.5	10	7.28	21.0	YES	10417
8	0.87	114	99.2	10	7.28	21.0	YES	10417
9	0.8	122	97.6	10.6	7.27	19.9	YES	9722
10	0.86	130	111.8	10.6	7.26	20.0	YES	9722
11	0.78	85	66.3	10	7.31	21.0	YES	15278
12	1.07	76	81.3	10	7.41	22.4	YES	15972
13	0.89	92	81.9	10.6	7.27	20.1	YES	13194
14	1.02	67	68.3	10	7.35	21.9	YES	16667
15	0.89	79	70.3	11.1	7.29	19.6	YES	15278
16	0.65	61	39.7	10.6	7.25	19.5	YES	20139
17	0.64	76	48.6	11.1	7.28	19.0	YES	17361
18	0.74	64	47.4	11.7	7.29	18.6	YES	18750
19	0.79	64	50.6	11.7	7.32	18.9	YES	18750
20	0.66	85	56.1	13.3	7.2	15.8	YES	15278
21	0.79	61	48.2	11.7	7.22	18.2	YES	20139
22	0.7	59	41.3	12.8	7.23	16.6	YES	20833
23	0.84	63	52.9	11.7	7.26	18.6	YES	19444
24	0.7	124	86.8	12.8	7.23	16.6	YES	10417
25	0.71	79	56.1	11.7	7.4	19.2	YES	15278
26	0.83	109	90.5	11.1	7.29	19.5	YES	11806
27	0.71	73	51.8	10.6	7.39	20.6	YES	16667
28	0.8	63	50.4	11.7	7.21	18.2	YES	19444
29	0.65	63	41.0	14.4	7.22	14.8	YES	19444
30	0.75	63	47.3	15.6	7.2	13.7	YES	19444
31	N/A	N/A	#VALUE!	N/A	N/A	#VALUE!	#VALUE!	N/A

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised December 2018

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