

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

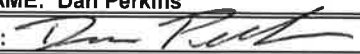
County: **Jackson**
 Month/Year: **Aug-22**

System Name: Medford Water Commission ID#: 41 00513 WTP : EP - 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	0.04	0.04	0.05	0.04	0.04	0.04	0.05
2	0.04	0.04	0.03	0.04	0.04	0.04	0.04
3	0.03	0.05	0.04	0.02	0.05	0.04	0.05
4	0.04	0.04	0.04	0.04	0.05	0.04	0.05
5	0.04	0.04	0.04	0.04	0.04	0.04	0.05
6	0.04	0.04	0.05	0.05	0.05	0.04	0.05
7	0.04	0.04	0.04	0.05	0.04	0.05	0.05
8	0.05	0.04	0.05	0.04	0.04	0.05	0.05
9	0.05	0.04	0.05	0.05	0.05	0.05	0.05
10	0.05	0.05	0.04	0.04	0.05	0.04	0.05
11	0.05	0.04	0.04	0.04	0.04	0.04	0.05
12	0.04	0.04	0.04	0.04	0.05	0.04	0.05
13	0.04	0.04	0.04	0.04	0.04	0.04	0.04
14	0.04	0.04	0.04	0.04	0.04	0.04	0.05
15	0.04	0.04	0.04	0.04	0.04	0.04	0.04
16	0.05	0.04	0.04	0.04	0.04	0.05	0.05
17	0.04	0.04	0.04	0.05	0.04	0.04	0.05
18	0.05	0.04	0.05	0.05	0.05	0.04	0.05
19	0.04	0.04	0.04	0.05	0.05	0.04	0.05
20	0.04	0.04	0.05	0.04	0.04	0.04	0.05
21	0.04	0.04	0.04	0.04	0.04	0.05	0.05
22	0.04	0.04	0.04	0.04	0.04	0.04	0.04
23	0.04	0.05	0.04	0.04	0.04	0.05	0.05
24	0.04	0.05	0.04	0.04	0.05	0.04	0.05
25	0.04	0.04	0.05	0.05	0.04	0.05	0.05
26	0.05	0.05	0.04	0.04	0.04	0.05	0.05
27	0.05	0.04	0.04	0.05	0.04	0.04	0.05
28	0.04	0.04	0.04	0.04	0.04	0.04	0.04
29	0.04	0.04	0.04	0.04	0.04	0.04	0.04
30	0.04	0.04	0.03	0.04	0.04	0.04	0.04
31	0.04	0.04	0.04	0.04	0.04	0.04	0.05

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)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	Yes	Yes	Yes
All turbidity readings < IFE ² triggers	Yes		

Notes:

PRINTED NAME: Dan Perkins	
SIGNATURE: 	DATE: 9/7/2022
PHONE #: (541) 774-2742	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: Aug-22	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	0.72	96	69.1	17.2	7.29	12.7	YES	26389
2	0.83	117	97.1	15.6	7.37	14.7	YES	21528
3	0.76	107	81.3	16.7	7.28	13.1	YES	23611
4	0.81	84	68.0	16.1	7.3	13.8	YES	27778
5	0.88	90	79.2	17.8	7.28	12.4	YES	25694
6	0.9	88	79.2	18.9	7.28	11.5	YES	26389
7	0.87	98	85.3	15.6	7.33	14.6	YES	25694
8	0.8	98	78.4	16.1	7.28	13.7	YES	25694
9	0.78	101	78.8	16.7	7.27	13.1	YES	25000
10	0.84	90	75.6	16.1	7.29	13.8	YES	25694
11	0.8	96	76.8	17.8	7.39	12.8	YES	26389
12	0.78	88	68.6	17.8	7.23	12.0	YES	26389
13	0.77	96	73.9	17.8	7.31	12.3	YES	26389
14	0.81	101	81.8	14.4	7.37	15.9	YES	25000
15	0.73	101	73.7	15.6	7.37	14.6	YES	25000
16	0.75	106	79.5	16.1	7.26	13.5	YES	25694
17	0.84	104	87.4	16.1	7.34	14.1	YES	24306
18	0.85	96	81.6	17.2	7.4	13.4	YES	26389
19	0.86	96	82.6	16.7	7.19	12.8	YES	26389
20	0.75	98	73.5	17.8	7.26	12.1	YES	25694
21	0.79	101	79.8	17.2	7.38	13.2	YES	25000
22	0.82	96	78.7	14.4	7.25	15.2	YES	26389
23	0.73	101	73.7	15	7.28	14.7	YES	25000
24	0.75	98	73.5	16.1	7.2	13.2	YES	25694
25	0.83	93	77.2	16.7	7.31	13.4	YES	27083
26	0.87	93	80.9	16.7	7.37	13.7	YES	27083
27	0.76	98	74.5	18.3	7.34	12.1	YES	25694
28	0.75	96	72.0	15	7.32	14.9	YES	26389
29	0.69	93	64.2	15.6	7.33	14.3	YES	25000
30	0.83	104	86.3	16.7	7.38	13.7	YES	24306
31	0.8	98	78.4	15.6	7.29	14.2	YES	25694

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