## **OHA - Drinking Water Services - Turbidity Monitoring Report Form** County: Jackson **Conventional or Direct Filtration** Month/Year: Jan-23 System Name: **Medford Water Commission** ID#: 41 WTP: TP-В 00513 12 AM 4 AM 8 AM NOON 4 PM 8 PM Day Highest Reading of the Day 1 (NTU) [NTU] [NTU] [NTU] [NTU] [NTU] [NTU] OFF OFF OFF 1 OFF OFF **OFF OFF** 2 OFF **OFF** OFF OFF OFF OFF OFF 3 **OFF OFF** OFF OFF OFF OFF OFF 4 OFF OFF OFF OFF OFF **OFF OFF** 5 OFF OFF OFF **OFF OFF** OFF OFF 6 OFF OFF OFF OFF OFF **OFF** OFF 7 OFF OFF OFF OFF **OFF** OFF OFF 8 OFF OFF OFF OFF OFF OFF OFF 9 OFF OFF OFF OFF OFF OFF OFF 10 OFF OFF OFF OFF OFF OFF OFF 11 OFF OFF OFF OFF OFF OFF OFF 12 OFF OFF OFF OFF **OFF** OFF OFF 13 OFF **OFF** OFF OFF **OFF** OFF OFF 14 OFF **OFF** OFF OFF **OFF** OFF OFF 15 OFF OFF OFF OFF OFF OFF OFF 16 OFF OFF OFF OFF **OFF** OFF OFF 17 OFF **OFF** OFF OFF OFF OFF OFF OFF 18 **OFF** OFF OFF OFF **OFF** OFF 19 OFF OFF OFF OFF OFF OFF OFF 20 OFF OFF OFF OFF OFF OFF OFF 21 OFF OFF OFF OFF OFF OFF OFF 22 OFF OFF OFF OFF **OFF** OFF OFF 23 OFF OFF OFF **OFF OFF** OFF OFF 24 OFF **OFF** OFF OFF OFF OFF **OFF** 25 OFF OFF OFF **OFF** OFF OFF OFF 26 OFF OFF OFF OFF OFF OFF OFF 27 OFF OFF OFF OFF OFF OFF OFF 28 **OFF OFF** OFF OFF OFF OFF OFF 29 OFF **OFF OFF** OFF OFF OFF OFF 30 OFF OFF OFF OFF OFF OFF OFF 31 OFF OFF OFF OFF OFF OFF OFF **Conventional or Direct Filtration** Monthly Summary (Answer Yes or No) CT's met everyday? All CI2 residual at entry point 95% of 4-hour turbidity readings ≤ 0.3 NTU? OFF (see back) ≥ 0.2 mg/l? All 4-hour turbidity readings ≤ 1 NTU? OFF **OFF OFF** All turbidity readings < IFE<sup>2</sup> triggers **OFF** Notes: PLANT OFF-LINE PRINTED NAME: Dan Perkins

SIGNATURE:

PHONE #: (541)774-2742

2/2/2023

CERT#: 2339

<sup>1</sup> 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))

1752	OHA - Drinking Water Prog	WTP - :	В				
System Name:	Medford Water Commission	ID#: 41	00513	Month/Year:	Jan-23	Disinfection Giardia Log Inactive:	0.5
);							

								V
Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( <b>C</b> ) <sup>3</sup>	Contact Time (T)	Actual CT	Тетр	pН	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[° C]		formula	Yes / No	[GPM]
1	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
2	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
3	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
4	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
5	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
6	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
7	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
8	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
9	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
10	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
11	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
12	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
13	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
14	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
15	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
16	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
17	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
18	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
19	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
20	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
21	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
22	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
23	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
24	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
25	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
26	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
27	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
28	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
29	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
30	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF
31	OFF	OFF	#VALUE!	OFF	OFF	#VALUE!	#VALUE!	OFF

<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 December 2018