

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: May-24

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	OFF	OFF	OFF	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	0.04	OFF	OFF	0.04	
8	OFF	OFF	OFF	0.03	0.03	OFF	0.05	
9	OFF	OFF	OFF	0.03	OFF	OFF	0.04	
10	OFF	OFF	OFF	0.03	OFF	OFF	0.03	
11	OFF	OFF	OFF	0.06	OFF	OFF	0.06	
12	OFF	OFF	OFF	0.03	0.05	OFF	0.05	
13	OFF	OFF	0.03	0.04	OFF	OFF	0.04	
14	OFF	OFF	OFF	0.02	0.03	OFF	0.06	
15	OFF	OFF	OFF	0.06	OFF	OFF	0.07	
16	OFF	OFF	0.08	0.08	OFF	OFF	0.11	
17	OFF	OFF	0.05	0.07	OFF	OFF	0.09	
18	OFF	OFF	0.09	0.10	0.10	OFF	0.10	
19	OFF	OFF	0.04	0.04	OFF	OFF	0.06	
20	OFF	OFF	0.03	0.03	OFF	OFF	0.03	
21	OFF	OFF	0.05	0.03	OFF	OFF	0.05	
22	OFF	OFF	0.03	0.03	OFF	OFF	0.04	
23	OFF	OFF	0.03	0.06	0.03	OFF	0.06	
24	OFF	OFF	0.04	0.05	OFF	OFF	0.05	
25	OFF	OFF	0.03	0.03	0.03	OFF	0.03	
26	OFF	OFF	0.03	0.03	OFF	OFF	0.03	
27	OFF	OFF	0.03	0.04	0.03	OFF	0.04	
28	OFF	OFF	0.04	0.04	0.05	0.04	0.05	
29	OFF	OFF	0.05	0.05	0.06	0.06	0.06	
30	0.05	0.04	0.04	OFF	OFF	0.05	0.08	
31	0.05	0.05	0.05	0.05	0.05	0.06	0.07	

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 Cl2 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: Matt Severloh	
	SIGNATURE: <i>Matt Severloh</i>	DATE: 6/4/2024
	PHONE #: (541) 774-2743	CERT #: 8480

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

System Name: Medford Water Commission	ID#: 41	00513	Month/Year: May-24	WTP - : Disinfection <i>Giardia</i> Log Inactive:	B 0.5
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° 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	0.56	269	150.6	10.6	7.25	19.3	YES	10417
8	0.71	210	149.1	11.7	7.3	18.6	YES	9722
9	0.77	369	284.1	11.7	7.36	19.1	YES	309
10	0.69	202	139.4	11.7	7.35	18.8	YES	11111
11	0.93	150	139.5	12.2	7.33	18.6	YES	15278
12	0.83	163	135.3	15.6	7.35	14.6	YES	15278
13	0.83	184	152.7	13.3	7.34	17.0	YES	14583
14	0.89	132	117.5	13.9	7.27	16.0	YES	18750
15	0.85	130	110.5	12.8	7.35	17.7	YES	19444
16	0.83	161	133.6	13.3	7.3	16.7	YES	16667
17	0.98	121	118.6	13.3	7.27	16.8	YES	20833
18	0.91	138	125.6	13.9	7.31	16.3	YES	18056
19	0.86	121	104.1	12.8	7.32	17.5	YES	20833
20	0.82	138	113.2	12.2	7.36	18.6	YES	19444
21	0.97	105	101.9	11.7	7.13	18.0	YES	22222
22	0.87	93	80.9	11.7	7.31	19.0	YES	25000
23	0.91	131	119.2	12.2	7.11	17.2	YES	20833
24	0.91	127	115.6	12.2	7.12	17.3	YES	21528
25	0.94	138	129.7	12.8	7.28	17.4	YES	18056
26	0.84	121	101.6	12.8	7.37	17.8	YES	20833
27	0.76	117	88.9	12.2	7.37	18.5	YES	21528
28	0.73	127	92.7	14.4	7.39	15.9	YES	21528
29	0.76	143	108.7	14.4	7.17	14.7	YES	17361
30	1.04	125	130.0	12.2	7.39	19.2	YES	20139
31	1.02	131	133.6	14.4	7.23	15.5	YES	20833

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