OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration Facility 30

County: Jackson

Month/Year: Sep-25

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	0.05	0.05	0.05	0.06	0.05	0.07	0.07
2	0.05	0.05	0.06	0.07	0.05	0.06	0.07
3	0.05	0.05	0.05	0.06	0.06	0.05	0.07
4	0.05	0.06	0.06	0.06	0.06	0.04	0.07
5	0.05	0.06	0.07	0.06	0.06	0.07	0.07
6	0.06	0.06	0.06	0.04	0.04	0.05	0.07
7	0.04	0.05	0.06	0.05	0.05	0.05	0.06
8	0.05	0.05	0.06	0.06	OFF	OFF	0.07
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
18	OFF	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	-	-	-	-	-	-	-

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: Matt Severloh **DATE:** 10/1/2025

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 Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration Facility 35

County: Jackson

Month/Year: Sep-25

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	0.05	0.06	0.03	0.05	0.06	0.05	0.06
2	0.06	0.05	0.07	0.06	0.05	0.04	0.07
3	0.05	0.05	0.07	0.06	0.07	0.04	0.07
4	0.05	0.05	0.05	0.06	0.06	0.05	0.07
5	0.05	0.05	0.07	0.07	0.06	0.06	0.07
6	0.06	0.07	0.04	0.04	0.05	0.04	0.07
7	0.04	0.05	0.05	0.05	0.06	0.05	0.06
8	0.06	0.05	0.06	0.06	OFF	OFF	0.06
9	OFF	OFF	0.06	OFF	OFF	OFF	0.07
10	OFF	OFF	0.06	0.06	OFF	OFF	0.07
11	OFF	OFF	0.07	0.06	0.09	OFF	0.09
12	OFF	OFF	OFF	0.07	0.06	0.05	0.09
13	0.05	0.05	0.06	0.05	0.05	OFF	0.06
14	OFF	OFF	OFF	0.05	0.04	OFF	0.06
15	OFF	OFF	0.06	0.05	0.05	OFF	0.06
16	OFF	OFF	0.06	0.09	0.06	OFF	0.09
17	OFF	OFF	OFF	0.06	0.06	OFF	0.06
18	OFF	OFF	0.06	0.04	0.04	0.04	0.07
19	OFF	OFF	OFF	0.06	0.06	0.04	0.06
20	OFF	OFF	OFF	0.04	0.06	0.05	0.08
21	OFF	OFF	0.06	0.07	0.06	OFF	0.07
22	OFF	OFF	0.06	0.07	0.06	OFF	0.07
23	OFF	OFF	0.06	0.07	0.07	OFF	0.07
24	OFF	OFF	OFF	OFF	0.05	0.07	0.07
25	0.07	OFF	0.07	0.07	0.05	0.04	0.07
26	OFF	OFF	OFF	0.05	0.04	OFF	0.06
27	OFF	OFF	OFF	0.06	0.05	0.04	0.07
28	OFF	OFF	0.05	0.05	0.05	0.04	0.05
29	OFF	OFF	0.05	0.06	0.06	OFF	0.06
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	-	-	-	-	-	-	-

Conventional or Direct Filtration	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes
All 4-hour turbidity readings ≤ 1 NTU?	Yes
All turbidity readings < IFE[2] triggers	Yes

Monthly Summary (Answer Yes or No)	
CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
Yes	Yes

Notes:

PRINTED NAME: Matt Severloh

SIGNATURE: Matt Severloh DATE: 10/1/2025

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 Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration Facility 35

County: Jackson

Month/Year: Sep-25

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

Day	Filter 1 Max Turbidity	Filter 1 Filter Loading Rate	Filter 2 Max Turbidity	Filter 2 Filter Loading Rate	Filter 3 Max Turbidity	Filter 3 Filter Loading Rate	Filter 4 Max Turbidity	Filter 4 Filter Loading Rate
1	0.03	7.93	0.02	7.97	0.05	7.74	0.10	7.49
2	0.03	7.68	0.02	7.72	0.04	9.05	0.06	7.97
3	OFF	OFF	0.03	8.05	0.05	6.17	0.06	8.22
4	OFF	OFF	0.04	6.75	0.06	7.48	0.09	7.12
5	OFF	OFF	0.02	6.60	0.06	6.25	0.03	6.67
6	OFF	OFF	0.02	7.12	0.07	7.15	0.03	7.06
7	OFF	OFF	0.02	9.32	0.08	5.55	0.03	6.96
8	OFF	OFF	OFF	OFF	0.04	5.23	0.04	5.22
9	0.07	9.28	0.05	9.28	0.04	9.30	0.03	9.31
10	0.02	7.09	OFF	OFF	0.02	7.21	OFF	OFF
11	OFF	OFF	0.04	6.25	0.03	7.15	0.04	8.68
12	OFF	OFF	0.04	6.28	0.06	6.19	0.05	6.20
13	0.03	7.58	0.04	6.78	0.03	7.50	OFF	OFF
14	0.03	6.29	OFF	OFF	OFF	OFF	0.08	6.17
15	0.03	7.11	0.06	8.41	OFF	OFF	0.06	8.25
16	0.03	6.24	0.07	6.21	OFF	OFF	0.07	6.20
17	0.04	9.37	0.09	8.53	0.03	6.86	0.08	9.40
18	0.05	5.94	0.05	5.95	0.03	5.86	0.03	5.90
19	0.06	8.24	0.06	7.27	0.05	8.22	0.03	8.29
20	0.09	4.77	0.07	6.50	0.06	6.61	0.03	6.49
21	0.04	6.86	0.08	6.21	0.07	6.75	0.05	6.22
22	0.04	6.79	0.02	7.76	0.03	7.70	0.05	7.59
23	0.04	6.73	0.02	6.80	0.03	6.67	0.06	6.82
24	0.05	8.50	0.03	8.03	0.05	6.46	0.07	8.34
25	0.05	7.07	0.03	6.85	0.04	6.82	0.03	6.90
26	0.07	6.40	0.02	8.06	0.05	8.27	0.02	8.25
27	0.07	6.33	0.02	7.12	0.04	6.20	0.03	6.23
28	0.02	8.00	OFF	OFF	0.05	7.81	0.03	7.07
29	0.03	6.18	0.03	6.34	OFF	OFF	0.05	6.19
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	-	-	-	-	-	-	-	-

Conventional or Direct Filtration	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes
All 4-hour turbidity readings ≤ 1 NTU?	Yes
All turbidity readings < IFE[2] triggers	Yes

Monthly Summary (Answer Yes or No)	
CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
Yes	Yes

Notes:

PRINTED NAME: Matt Severloh

SIGNATURE: Matt Severloh **DATE:** 10/1/2025

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 Facility 35

WTP - :	B
Disinfection *Giardia* Log Inactive:	0.5

System Name:	Medford Water Commission	ID#: 41	00513	Month/Year:	Sep-25

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	0.85	470	399.5	16.1	7.07	12.8	YES	3472
2	0.76	470	357.2	16.1	7.12	12.9	YES	3472
3	0.68	268	182.2	16.7	7.06	12.0	YES	9028
4	0.8	503	402.4	16.7	7.06	12.1	YES	3472
5	0.82	503	412.5	17.2	7.11	12.0	YES	3472
6	0.88	447	393.4	16.7	7.04	12.2	YES	5556
7	0.83	447	371.0	16.7	7.03	12.1	YES	5556
8	0.78	418	326.0	16.7	7.09	12.3	YES	5556
9	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
10	0.63	503	316.9	16.1	7.18	13.0	YES	3472
11	0.73	429	313.2	15.6	7.13	13.3	YES	4861
12	0.61	470	286.7	15.6	7.07	12.8	YES	3472
13	0.62	503	311.9	15.6	7.12	13.1	YES	3472
14	0.59	503	296.8	15.6	7.13	13.1	YES	2083
15	0.54	346	186.8	15.6	7.14	13.1	YES	6250
16	0.68	404	274.7	15	7.19	14.1	YES	6250
17	0.65	503	327.0	13.9	7.15	14.9	YES	4861
18	0.54	418	225.7	14.4	7.12	14.1	YES	5556
19	0.59	235	138.7	14.4	7.07	13.9	YES	10417
20	0.8	503	402.4	13.9	7.13	15.0	YES	4167
21	0.67	470	314.9	14.4	7.12	14.3	YES	4167
22	0.69	418	288.4	14.4	7.12	14.3	YES	5556
23	0.81	447	362.1	13.3	7.23	16.3	YES	5556
24	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
25	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
27	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
28	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
29	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	-	-	-	-	-	-	-	-

[3] If Cl_2 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

OHA - Drinking Water Program - Surface Water Quality Data Form Facility 45

WTP - :	B
Disinfection *Giardia* Log Inactive:	0.5

System Name:	Medford Water Commission	ID#: 41	00513	Month/Year:	Sep-25

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	0.9	89	80.1	16.1	7.11	13.0	YES	15972
2	0.86	86	74.0	16.1	7.08	12.8	YES	16667
3	0.89	76	67.6	16.7	7.08	12.4	YES	18750
4	0.83	114	94.6	15.6	7.26	14.1	YES	12500
5	0.82	93	76.3	15.6	7.08	13.2	YES	15278
6	0.85	108	91.8	17.2	7.09	11.9	YES	13194
7	0.9	171	153.9	16.7	7.05	12.2	YES	8333
8	0.78	137	106.9	16.7	7.22	12.9	YES	10417
9	0.96	38	36.5	15	7.09	14.0	YES	27778
10	0.73	137	100.0	14.4	7.16	14.6	YES	10417
11	0.66	121	79.9	15	7.1	13.6	YES	11806
12	0.67	147	98.5	15.6	7.25	13.8	YES	9722
13	0.82	147	120.5	15	7.06	13.6	YES	9722
14	0.73	137	100.0	15	7.1	13.7	YES	10417
15	0.81	103	83.4	16.1	7.15	13.1	YES	13889
16	1.01	147	148.5	13.9	7.47	17.5	YES	9722
17	0.85	103	87.6	13.3	7.13	15.7	YES	13889
18	0.81	137	111.0	13.3	7.05	15.2	YES	10417
19	0.78	103	80.3	14.4	7.08	14.2	YES	13889
20	0.95	98	93.1	14.4	7.07	14.5	YES	14583
21	0.88	108	95.0	15	6.8	12.5	YES	13194
22	1	98	98.0	13.9	7.17	15.6	YES	14583
23	0.81	121	98.0	15	7.11	13.9	YES	11806
24	0.99	73	72.3	12.2	7.09	17.2	YES	19444
25	0.77	64	49.3	12.8	7.06	15.7	YES	22222
26	0.84	82	68.9	13.9	7.15	15.2	YES	17361
27	0.89	71	63.2	11.7	7.08	17.6	YES	20139
28	0.82	98	80.4	13.9	7.21	15.5	YES	14583
29	0.69	108	74.5	12.8	7.08	15.7	YES	13194
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	-	-	-	-	-	-	-	-

[3] If Cl_2 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