

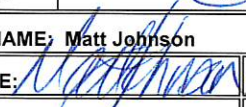
OHA - Drinking Water Services - Surface Water Quality Data Form

County: Polk

Cartridge or Bag Filtration

Month/Year: Jun-21

System Name:		City of Monmouth		ID#: 4100537	WTP ID:	TP-	A
Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day ¹ [NTU]	
1	17.28	15.62	1.66	22.00	0.02	0.03	
2	17.89	15.80	2.09	22.00	0.02	0.03	
3	20.53	16.78	3.75	22.00	0.02	0.02	
4	20.73	16.80	3.93	22.00	0.02	0.02	
5	20.80	16.78	4.02	22.00	0.02	0.03	
6	20.92	16.77	4.15	22.00	0.02	0.03	
7	20.94	16.76	4.18	22.00	0.02	0.03	
8	21.91	16.79	5.12	22.00	0.02	0.02	
9	21.24	16.76	4.48	22.00	0.02	0.02	
10	21.38	16.79	4.59	22.00	0.01	0.02	
11	21.45	16.78	4.67	22.00	0.02	0.03	
12	21.56	16.80	4.76	22.00	0.01	0.03	
13	21.78	16.82	4.96	22.00	0.02	0.03	
14	21.74	16.78	4.96	22.00	0.01	0.02	
15	21.92	16.81	5.11	22.00	0.01	0.03	
16	21.88	16.79	5.09	22.00	0.02	0.03	
17	22.03	16.79	5.24	22.00	0.01	0.02	
18	22.21	16.83	5.38	22.00	0.01	0.02	
19	22.46	16.84	5.62	22.00	0.01	0.02	
20	22.37	16.77	5.60	22.00	0.02	0.03	
21	22.52	16.77	5.75	22.00	0.01	0.02	
22	22.66	16.77	5.89	22.00	0.01	0.02	
23	22.74	16.75	5.99	22.00	0.01	0.03	
24	22.93	16.75	6.18	22.00	0.02	0.02	
25	23.06	16.73	6.33	22.00	0.01	0.02	
26	23.37	16.77	6.60	22.00	0.01	0.02	
27	23.50	16.76	6.74	22.00	0.01	0.03	
28	23.63	16.75	6.88	22.00	0.02	0.02	
29	23.78	16.75	7.03	22.00	0.02	0.02	
30	23.94	16.74	7.20	22.00	0.01	0.02	

<p align="center">Cartridge & Bag Filtration</p> <p>95% of daily turbidity readings ≤ 1 NTU? Yes / No</p> <p>All daily turbidity readings ≤ 5 NTU? Yes / No</p>		<p align="center">Monthly Summary (Answer Yes or No)</p> <p>CT's met everyday? (see back) Yes / No</p> <p>All Cl2 residual at entry point ≥ 0.2 mg/l? Yes / No</p>	
<p>Notes: PSI = pounds per square inch</p> <p>PSID = pounds per square inch difference (before filter - after filter)</p> <p>PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.</p>		<p>PRINTED NAME: Matt Johnson</p> <p>SIGNATURE: </p> <p>DATE: 7/6/2021</p> <p>PHONE #: (503) 838-2173</p> <p>CERT #: 6734</p>	

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not correspond to continuous readings' maximum.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP : A

System Name:	City of Monmouth	ID#: 4100537	Month/Year:	Jun-21	Disinfection Giardia Log Inactiv:	1
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1-7:00am	0.85	85	72.3	15.6	7.37	29.5	Yes	871
2-7:00am	0.82	85	69.7	16.4	7.29	27.1	Yes	1614
3-6:51am	0.83	85	70.6	15.0	7.33	30.2	Yes	1455
4-7:00am	0.78	85	66.3	15.7	7.37	29.1	Yes	1449
5-8:05am	0.81	85	68.9	15.3	7.39	30.2	Yes	786
6-7:39am	0.84	85	71.4	14.7	7.41	31.8	Yes	1426
7-7:02am	0.81	85	68.9	15.2	7.48	31.4	Yes	782
8-7:02am	0.77	85	65.5	15.8	7.46	29.8	Yes	833
9-7:04am	0.8	85	68.0	16.0	7.43	29.2	Yes	1432
10-7:00am	0.85	85	72.3	14.3	7.32	31.6	Yes	817
11-7:02am	0.84	85	71.4	15.3	7.33	29.6	Yes	815
12-7:15am	0.84	85	71.4	16.3	7.36	28.0	Yes	759
13-7:30am	0.84	85	71.4	15.4	7.25	28.6	Yes	740
14-7:05am	0.82	85	69.7	15.4	7.32	29.3	Yes	738
15-7:04am	0.84	85	71.4	15.6	7.33	29.0	Yes	735
16-7:02am	0.86	85	73.1	15.5	7.31	29.1	Yes	734
17-7:01am	0.83	85	70.6	15.4	7.35	29.6	Yes	738
18-7:01am	0.8	85	68.0	16.4	7.34	27.5	Yes	1395
19-6:08am	0.77	85	65.5	15.7	7.37	29.0	Yes	1388
20-6:10am	0.79	85	67.2	16.3	7.39	28.2	Yes	1384
21-7:02am	0.8	85	68.0	15.7	7.36	29.0	Yes	1370
22-7:01am	0.8	85	68.0	15.7	7.36	29.0	Yes	1358
23-7:02am	0.85	85	72.3	15.9	7.32	28.4	Yes	1396
24-7:05am	0.83	85	70.6	16.1	7.36	28.4	Yes	1372
25-7:05am	0.81	85	68.9	17.3	7.66	29.2	Yes	1370
26-7:30am	0.78	85	66.3	17.3	7.34	25.8	Yes	1376
27-7:00am	0.82	85	69.7	15.8	7.58	31.4	Yes	1374
28-7:01am	0.89	85	75.7	17.6	7.55	27.7	Yes	1346
29-7:02am	0.88	85	74.8	16.3	7.53	30.0	Yes	1360
30-7:01am	0.83	85	70.6	15.2	7.57	32.6	Yes	1390

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

Return by 10th of following month by email, fax, or mail to:

dwp.dmc@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

7/6/2021
AJ