

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Polk

Cartridge or Bag Filtration

Month/Year: Oct-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	27.32	16.78	10.54	22.00	0.04	0.05	
2	27.28	16.78	10.50	22.00	0.05	0.05	
3	26.78	16.70	10.08	22.00	0.04	0.05	
4	26.90	16.68	10.22	22.00	0.19	0.05	
5	26.98	16.69	10.29	22.00	0.04	0.05	
6	26.89	16.71	10.18	22.00	0.04	0.05	
7	26.99	16.69	10.30	22.00	0.04	0.05	
8	27.49	16.75	10.74	22.00	0.04	0.05	
9	27.06	16.67	10.39	22.00	0.04	0.05	
10	27.59	16.79	10.80	22.00	0.05	0.05	
11	27.46	16.75	10.71	22.00	0.04	0.05	
12	27.68	16.76	10.92	22.00	0.05	0.05	
13	27.32	16.78	10.54	22.00	0.05	0.05	
14	27.60	16.79	10.81	22.00	0.04	0.05	
15	27.55	16.78	10.77	22.00	0.04	0.05	
16	27.18	16.70	10.48	22.00	0.04	0.05	
17	27.27	16.68	10.59	22.00	0.03	0.05	
18	27.28	16.69	10.59	22.00	0.04	0.10	
19	27.75	16.77	10.98	22.00	0.04	0.05	
20	27.49	16.74	10.75	22.00	0.04	0.05	
21	27.20	16.69	10.51	22.00	0.04	0.05	
22	27.43	16.69	10.74	22.00	0.04	0.05	
23	27.50	16.70	10.80	22.00	0.03	0.05	
24	27.45	16.72	10.73	22.00	0.04	0.05	
25	27.52	16.69	10.83	22.00	0.05	0.05	
26	27.44	16.72	10.72	22.00	0.04	0.05	
27	27.80	16.72	11.08	22.00	0.04	0.05	
28	27.96	16.75	11.21	22.00	0.04	0.06	
29	28.14	16.84	11.30	22.00	0.05	0.05	
30	28.11	16.72	11.39	22.00	0.05	0.05	
31	28.30	16.73	11.57	22.00	0.05	0.05	

<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: <i>[Signature]</i> DATE: 11/8/21</p> <p>PHONE #: (503) 838-2173 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:	Oct-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]
1-7:37am	0.84	85	71.4	14.8	7.47	32.3	Yes	1295
2-7:14am	0.86	85	73.1	13.7	7.48	34.9	Yes	920
3-7:36am	0.87	85	74.0	14.4	7.49	33.5	Yes	1288
4-7:38am	0.87	85	74.0	14.7	7.46	32.5	Yes	1284
5-7:42am	0.85	85	72.3	14.9	7.45	31.9	Yes	919
6-7:31am	0.85	85	72.3	15.1	7.46	31.5	Yes	505
7-7:31am	0.84	85	71.4	13.6	7.30	32.8	Yes	1322
8-7:32am	0.91	85	77.4	14.2	7.23	31.0	Yes	1306
9-7:00am	0.88	85	74.8	14.4	7.24	30.6	Yes	1291
10-7:10am	0.88	85	74.8	15.9	7.25	27.8	Yes	913
11-7:32am	0.84	85	71.4	11.8	7.22	36.4	Yes	1281
12-7:36am	0.83	85	70.6	13.5	7.27	32.6	Yes	921
13-7:33am	0.88	85	74.8	14.6	7.24	30.2	Yes	921
14-7:31am	0.81	85	68.9	14.2	7.27	31.1	Yes	1287
15-7:20am	0.79	85	67.2	14.5	7.19	29.5	Yes	1285
16-6:35am	0.82	85	69.7	14.3	7.13	29.3	Yes	915
17-6:40am	0.81	85	68.9	13.0	7.22	33.1	Yes	1279
18-7:31am	0.81	85	68.9	14.0	7.17	30.4	Yes	921
19-7:41am	0.85	85	72.3	13.9	7.24	31.5	Yes	1269
20-7:28am	0.8	85	68.0	13.1	7.23	32.9	Yes	922
21-7:32am	0.78	85	66.3	14.0	7.30	31.7	Yes	1273
22-7:32am	0.82	85	69.7	12.7	7.27	34.4	Yes	1311
23-9:28am	0.81	85	68.9	12.4	7.24	35.1	Yes	1275
24-9:20am	0.85	85	72.3	12.9	7.29	34.3	Yes	919
25-7:31am	0.83	85	70.6	13.9	7.27	31.8	Yes	455
26-7:36am	0.84	85	71.4	13.5	7.26	32.6	Yes	453
27-7:37am	0.87	85	74.0	14.3	7.27	31.1	Yes	1271
28-7:30am	0.97	85	82.5	15.1	7.24	29.5	Yes	917
29-7:28am	0.81	85	68.9	15.1	7.19	28.4	Yes	490
30-7:50am	0.92	85	78.2	14.1	7.22	31.1	Yes	1290
31-7:38am	0.95	85	80.8	14.0	7.24	31.7	Yes	922

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

[Handwritten signature] 11/8/21