

OHA - Drinking Water Services - Surface Water Quality Data Form  
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Benton**  
 Month/Year: **Dec-22**

System Name: **Monroe, City of** ID#: **41 00540** WTP: **TP - A**

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
1			0.094	0.088	0.091		0.09
2			0.070	0.074			0.07
3	Off						
4	Off						
5			0.081	0.094			0.09
6			0.103	0.095	0.101		0.10
7				0.098	0.076	0.072	0.10
8			0.078	0.072	0.068		0.08
9				0.079	0.069		0.08
10	Off						
11	Off						
12			0.102	0.085	0.083		0.10
13			0.082	0.077			0.08
14			0.074	0.076			0.08
15			0.080	0.081			0.08
16			0.090	0.078			0.09
17	Off						
18	Off						
19			0.097	0.076	0.062		0.10
20			0.072	0.070	0.067		0.07
21				0.069	0.065	0.063	0.07
22			0.075	0.066	0.068		0.08
23	Off						
24	Off						
25	Off						
26	Off						
27				0.116	0.151		0.15
28				0.148	0.139		0.15
29			0.096	0.095	0.091		0.10
30			0.083	0.082	0.078		0.08
31	Off						

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b> 95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> <b>Yes / No</b> All daily turbidity readings ≤ 5 NTU? <b>Yes / No</b>	<b>Monthly Summary (Answer Yes or No)</b> CT's met everyday? (see back) <b>Yes / No</b> All Cl2 residual at entry point ≥ 0.2 mg/l? <b>Yes / No</b>	
	PRINTED NAME: <b>Charles Scholz</b> SIGNATURE: <i>[Signature]</i> DATE: <b>01-09-2023</b> PHONE #: <b>(541) 995-6655</b> CERT #: <b>6060</b>	
Notes:		

<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. <sup>2</sup> Filtered systems only.



27/1200	0.65	49	31.9	8.1	7.6	26.3	YES	350
27/1600	0.94	49	46.1	9.0	7.8	26.7	YES	350
28/1200	1.72	49	84.3	8.9	7.7	28.5	YES	350
28/1600	2.08	49	101.9	8.5	7.9	33.5	YES	350
29/0800	1.70	49	83.3	8.3	8.1	34.3	YES	350
29/1200	1.73	49	84.8	8.3	8.0	32.9	YES	350
29/1600	1.56	49	76.4	8.3	7.9	31.9	YES	350
30/0800	1.19	49	58.3	8.4	7.7	27.9	YES	350
30/1200	1.71	49	83.8	8.5	8.1	34.2	YES	350
30/1600	2.20	49	107.8	8.6	7.8	32.5	YES	350
31/Off								

<sup>3</sup> 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](mailto:dwp.dmce@state.or.us); 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

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