

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

County: **Benton**  
 Month/Year: **Sep-23**

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			0.046	0.041			0.05
2	Off						
3	Off						
4	Off						
5			0.054	0.054	0.051		0.05
6			0.053	0.039			0.05
7			0.052	0.050	0.060		0.06
8			0.038	0.038			0.04
9	Off						0.00
10	Off						0.00
11			0.037	0.037			0.04
12			0.034	0.035			0.04
13				0.036	0.041		0.04
14			0.036	0.040			0.04
15			0.034	0.040			0.04
16	Off						
17	Off						
18			0.034	0.038			0.04
19			0.037	0.037			0.04
20			0.036	0.037			0.04
21			0.037	0.035			0.04
22			0.000	0.033	0.037		0.04
23	Off						
24	Off						
25			0.033	0.032			0.03
26			0.032	0.034			0.03
27			0.035	0.036	0.037		0.04
28			0.034	0.034	0.040		0.04
29			0.033	0.033			0.03
30			0.038	0.040			0.04
31							

<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 Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <b>Yes / No</b>	
	<b>Notes:</b> PRINTED NAME: Charles Scholz SIGNATURE: <i>Charles Scholz</i> PHONE #: (541) 995-6655 DATE: 10-5-23 CERT #: 6060	

<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.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP : TP-A  
 Disinfection *Giardia*  
 Log Inactiv: 0.5

System Name: Monroe, City of ID#: 41 00540 Month/Year: Sep-23

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
	01/0800	0.96	49	47.0	22.0	7.8	11.5	YES
01/1200	1.51	49	74.0	21.4	7.8	12.6	YES	350
02/Off								
03/Off								
04/Off								
05/0800	0.56	49	27.4	21.6	8.0	12.2	YES	350
05/1200	1.58	49	77.4	21.4	8.3	15.2	YES	350
05/1600	1.90	49	93.1	22.4	8.2	14.4	YES	350
06/0800	0.94	49	46.1	22.1	8.0	12.3	YES	350
06/1200	1.41	49	69.1	21.1	8.1	14.1	YES	350
07/0800	0.71	49	34.8	21.4	8.0	12.6	YES	350
07/1200	1.51	49	74.0	21.4	8.2	14.5	YES	350
07/1600	1.47	49	72.0	21.7	8.2	14.3	YES	350
08/0800	1.10	49	53.9	21.5	8.0	12.8	YES	350
08/1200	1.45	49	71.1	20.9	8.2	14.9	YES	350
09/Off								
10/Off								
11/0800	0.44	49	21.6	21.3	8.3	13.3	YES	350
11/1200	1.60	49	78.4	21.6	8.0	13.6	YES	350
12/0800	1.09	49	53.4	21.5	7.9	12.3	YES	350
12/1200	1.25	49	61.3	21.0	7.9	13.3	YES	350
13/1200	0.55	49	27.0	21.3	7.9	11.8	YES	350
13/1600	1.65	49	80.9	22.1	7.8	12.1	YES	350
14/0800	1.27	49	62.2	21.9	7.9	12.1	YES	350
14/1200	1.52	49	74.5	21.4	7.9	13.3	YES	350
15/0800	1.09	49	53.4	21.9	7.8	11.5	YES	350
15/1200	1.71	49	83.8	22.1	7.8	12.5	YES	350
16/Off								
17/Off								
18/0800	0.93	49	45.6	22.1	7.8	11.4	YES	350
18/1200	1.45	49	71.1	20.9	7.9	13.2	YES	350
19/0800	1.04	49	51.0	20.9	7.7	12.0	YES	350
19/1200	1.45	49	71.1	19.9	8.0	14.8	YES	350
20/0800	0.96	49	47.0	20.2	7.9	13.6	YES	350
20/1200	1.53	49	75.0	19.5	7.9	15.0	YES	350
21/0800	1.23	49	60.3	19.6	7.9	14.4	YES	350
21/1200	1.43	49	70.1	19.1	7.9	15.4	YES	350
22/1200	1.49	49	73.0	19.4	7.8	14.7	YES	350
22/1600	2.68	49	131.3	19.4	7.8	16.6	YES	350
23/Off								
24/Off								
25/0800	1.62	49	79.4	19.4	8.1	16.1	YES	350
25/1200	2.15	49	105.4	17.7	8.2	20.4	YES	350
26/0800	1.48	49	72.5	17.8	7.9	16.4	YES	350
26/1200	1.86	49	91.1	17.3	7.8	17.4	YES	350
27/0800	1.22	49	59.8	17.4	7.9	16.3	YES	350
27/1200	1.59	49	77.9	17.1	7.7	16.7	YES	350
27/1600	1.79	49	87.7	17.7	7.8	16.9	YES	350
28/0800	1.12	49	54.9	17.8	8.0	16.4	YES	350
28/1200	1.41	49	69.1	17.4	7.8	16.6	YES	350
28/1600	1.40	49	68.6	17.8	7.9	16.3	YES	350

29/0800	0.76	49	37.2	17.9	8.0	15.7	YES	350
29/1200	1.42	49	69.6	17.6	7.9	16.8	YES	350
30/0800	0.64	49	31.4	17.6	7.9	15.2	YES	350
30/1200	1.71	49	83.8	17.6	7.9	17.6	YES	350

<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; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

**PAGE 2 of 2**