

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Grant

Cartridge or Bag Filtration

Month/Year:

System Name:		Monument, City of		ID#:	41 00541	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	14.00	10.00	4.00	25	0.36	0.36	
2	16.00	10.00	6.00	25	0.14	0.14	
3	20.00	10.00	10.00	25	0.23	0.23	
4	30.00	12.00	18.00	25	0.43	0.43	
5	24.00	10.00	14.00	25	0.40	0.40	
6	28.00	10.00	18.00	25	0.41	0.41	
7	12.00	12.00	0.00	25	0.33	0.33	
8	10.00	10.00	0.00	25	0.31	0.31	
9	10.00	10.00	0.00	25	0.16	0.16	
10	10.00	10.00	0.00	25	0.38	0.38	
11	10.00	10.00	0.00	25	0.21	0.21	
12	10.00	10.00	0.00	25	0.22	0.22	
13	10.00	10.00	0.00	25	0.20	0.20	
14	10.00	10.00	0.00	25	0.25	0.25	
15	10.00	10.00	0.00	25	0.19	0.19	
16	10.00	10.00	0.00	25	0.39	0.39	
17	10.00	10.00	0.00	25	0.25	0.25	
18	10.00	10.00	0.00	25	0.22	0.22	
19	10.00	10.00	0.00	25	0.24	0.24	
20	10.00	10.00	0.00	25	0.35	0.35	
21	10.00	10.00	0.00	25	0.22	0.22	
22	11.00	10.00	1.00	25	0.26	0.26	
23	11.00	10.00	1.00	25	0.25	0.25	
24	11.00	10.00	1.00	25	0.25	0.25	
25	11.00	10.00	1.00	25	0.25	0.25	
26	12.00	10.00	2.00	25	0.22	0.22	
27	16.00	10.00	6.00	25	0.22	0.22	
28	16.00	10.00	6.00	25	0.19	0.19	
29	16.00	10.00	6.00	25	0.16	0.16	
30	15.00	10.00	5.00	25	0.26	0.26	
31				25			

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

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:

Monument, City of

ID#: 41 00541

Month/Ye

Sep-22

Disinfection
Giardia Log
Inactiv:

0.5

$$CT_{actual} = C_{well}(53 \text{ min.}) + C_{reservoir}(69 \text{ min.})$$

Date	Cl ₂ Residual before filters (C _{well})	Cl ₂ Residual at res. outlet (C _{reservoir}) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow [GPM]
	[ppm or mg/L]	[ppm or mg/L]	[minutes]	formula	[° C]		formula	Yes / No	
1	0.2	1.8	53/69	134.8	18.0	6.90	11.8	YES	54
2	0.2	1.5	53/69	114.1	18.0	6.80	9.4	YES	32
3	0.2	1.5	53/69	114.1	19.0	6.80	8.8	YES	60
4	0.2	1.8	53/69	134.8	19.0	6.80	8.8	YES	33
5	0.3	1.6	53/69	126.3	19.0	6.90	9.2	YES	42
6	0.2	0.5	53/69	45.1	18.0	6.80	9.4	YES	52
7	0.2	0.2	53/69	24.4	20.0	6.90	8.5	YES	46
8	0.1	0.6	53/69	46.7	17.0	6.80	10.0	YES	30
9	0.1	0.7	53/69	53.6	17.0	6.80	10.0	YES	24
10	0.01	1.8	53/69	124.7	17.0	6.80	9.9	YES	66
11	0.01	1.4	53/69	97.1	18.0	6.80	9.2	YES	69
12	0.01	1.8	53/69	124.7	18.0	6.90	9.6	YES	51
13	0.2	1.3	53/69	100.3	17.0	6.90	10.5	YES	36
14	0.2	0.6	53/69	52.0	17.0	6.80	10.1	YES	64
15	0.1	1.9	53/69	136.4	17.0	6.90	10.3	YES	58
16	0.1	1.6	53/69	115.7	18.0	6.80	9.3	YES	52
17	0.1	1.3	53/69	95.0	17.0	6.90	10.3	YES	41
18	0.2	2.1	53/69	155.5	17.0	6.90	10.5	YES	30
19	0.1	1.6	53/69	115.7	17.0	6.90	10.3	YES	35
20	0.1	1.7	53/69	122.6	17.0	6.70	9.6	YES	61
21	0.1	1.7	53/69	122.6	17.0	6.70	9.6	YES	51
22	0.1	1	53/69	74.3	17.0	6.80	10.0	YES	70
23	0.1	1.1	53/69	81.2	16.0	6.90	11.1	YES	54
24	0.2	0.9	53/69	72.7	17.0	6.90	10.5	YES	63
25	0.1	1.6	53/69	115.7	17.0	7.00	10.7	YES	81
26	0.1	1.1	53/69	81.2	17.0	6.90	10.3	YES	45
27	0.2	1.5	53/69	114.1	17.0	7.00	10.9	YES	32
28	0.1	1.3	53/69	95.0	17.0	7.00	10.7	YES	54
29	0.1	1.1	53/69	81.2	18.0	6.90	9.7	YES	40
30	0.1	2.1	53/69	150.2	18.0	6.90	9.7	YES	33
31			53/69	0.0				NO	

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

Revised Aug. 24, 2022

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

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