

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Grant

Cartridge or Bag Filtration

Month/Year: Dec-25

System Name:		Monument, City of			ID#:	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 <sup>1</sup> [NTU]	
1	30.00	25.00	5.00	25	0.23	0.23	
2	0.00	0.00	0.00	25	0.24	0.24	
3	43.00	38.00	5.00	25	0.26	0.26	
4	0.00	0.00	0.00	25	0.33	0.33	
5	0.00	0.00	0.00	25	0.30	0.30	
6	0.00	0.00	0.00	25	0.31	0.31	
7	0.00	0.00	0.00	25	0.25	0.25	
8	0.00	0.00	0.00	25	0.24	0.24	
9	0.00	0.00	0.00	25	0.24	0.24	
10	0.00	0.00	0.00	25	0.26	0.26	
11	50.00	42.00	8.00	25	0.26	0.26	
12	0.00	0.00	0.00	25	0.35	0.35	
13	48.00	42.00	6.00	25	0.33	0.33	
14	0.00	0.00	0.00	25	0.32	0.32	
15	0.00	0.00	0.00	25	0.32	0.32	
16	40.00	32.00	8.00	25	0.39	0.39	
17	0.00	0.00	0.00	25	0.30	0.30	
18	0.00	0.00	0.00	25	0.29	0.29	
19	0.00	0.00	0.00	25	0.42	0.42	
20	0.00	0.00	0.00	25	0.26	0.26	
21	0.00	0.00	0.00	25	0.35	0.35	
22	0.00	0.00	0.00	25	0.37	0.37	
23	40.00	30.00	10.00	25	0.36	0.36	
24	0.00	0.00	0.00	25	0.41	0.41	
25	0.00	0.00	0.00	25	0.34	0.34	
26	0.00	0.00	0.00	25	0.33	0.33	
27	40.00	32.00	8.00	25	0.39	0.39	
28	0.00	0.00	0.00	25	0.40	0.40	
29	40.00	32.00	8.00	25	0.34	0.34	
30	0.00	0.00	0.00	25	0.37	0.37	
31	0.00	0.00	0.00	25	0.33	0.33	

<b>Cartridge &amp; Bag Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back)	<input checked="" type="radio"/> Yes / <input type="radio"/> No
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l?	<input checked="" type="radio"/> Yes / <input type="radio"/> No
Notes: PSI = pounds per square inch		PRINTED NAME: PAT GOERTZING	
PSID = pounds per square inch difference (before filter - after filter)		SIGNATURE: <i>[Signature]</i>	
PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.		DATE: 1-5-26	
		PHONE #: 641,408-2437	
		CERT #: 09043	

<sup>1</sup> 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

Dec-25

Disinfection  
Giardia Log  
Inactiv:

0.5

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

Date	Cl <sub>2</sub> Residual before filters (C <sub>well</sub> )	Cl <sub>2</sub> Residual at res. outlet (C <sub>reservoir</sub> ) <sup>2</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[ppm or mg/L]	[minutes]	formula	[° C]		formula	Yes / No	[GPM]
1	0.2	0.6	53/69	52.0	13.0	6.90	14.3	YES	33
2	0.2	1	53/69	79.6	13.0	6.90	13.7	YES	NA
3	0.2	1	53/69	79.6	13.0	6.90	13.7	YES	24
4	0.2	0.9	53/69	72.7	13.0	6.90	13.7	YES	NA
5	0.2	0.9	53/69	72.7	12.0	7.00	15.6	YES	NA
6	0.2	0.8	53/69	65.8	13.0	7.10	14.7	YES	19
7	0.2	0.5	53/69	45.1	13.0	7.00	14.2	YES	NA
8	0.2	0.9	53/69	72.7	12.0	6.90	15.0	YES	20
9	0.2	0.7	53/69	58.9	13.0	6.80	13.2	YES	NA
10	0.2	0.9	53/69	72.7	13.0	6.80	13.2	YES	NA
11	0.2	0.9	53/69	72.7	13.0	6.80	13.2	YES	NA
12	0.2	0.9	53/69	72.7	13.0	6.90	13.7	YES	17
13	0.2	0.9	53/69	72.7	13.0	7.00	14.2	YES	24
14	0.2	0.8	53/69	65.8	13.0	6.90	13.7	YES	NA
15	0.2	0.8	53/69	65.8	13.0	6.90	13.7	YES	NA
16	0.2	1.1	53/69	86.5	13.0	6.80	13.2	YES	18
17	0.2	0.7	53/69	58.9	14.0	6.80	12.3	YES	NA
18	0.1	0.6	53/69	46.7	13.0	6.80	13.0	YES	22
19	0.2	0.6	53/69	52.0	13.0	6.80	13.2	YES	NA
20	0.2	0.8	53/69	65.8	12.0	7.00	15.6	YES	NA
21	0.2	0.9	53/69	72.7	12.0	7.00	15.6	YES	NA
22	0.1	0.5	53/69	39.8	13.0	6.70	12.6	YES	22
23	0.2	1	53/69	79.6	12.0	6.90	15.0	YES	NA
24	0.2	0.8	53/69	65.8	13.0	6.80	13.2	YES	NA
25	0.3	1.2	53/69	98.7	12.0	6.80	14.7	YES	NA
26	0.2	0.9	53/69	72.7	13.0	7.00	14.2	YES	NA
27	0.3	1	53/69	84.9	13.0	7.00	14.4	YES	NA
28	0.2	0.5	53/69	45.1	12.0	6.90	15.0	YES	NA
29	0.2	0.9	53/69	72.7	12.0	6.90	15.0	YES	NA
30	0.2	1	53/69	79.6	12.0	6.80	14.5	YES	NA
31	0.2	0.7	53/69	58.9	12.0	6.80	14.5	YES	NA

<sup>2</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify D 0

Revised Aug. 24, 2022

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