

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Douglas**

Conventional or Direct Filtration

Month/Year: **Nov-25**

System Name:	Clark Branch Water Association			ID#: 41	00548	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 ¹ [NTU]
1	0.05	0.05	0.05	0.05	0.05	POL	0.05
2	POL	POL	0.05	POL	POL	0.05	0.05
3	0.05	0.05	POL	POL	POL	POL	0.05
4	POL	POL	0.06	0.06	0.06	0.06	0.06
5	0.06	0.06	0.06	0.06	POL	POL	0.06
6	POL	POL	POL	0.06	0.07	0.05	0.07
7	0.05	0.05	POL	POL	POL	POL	0.05
8	POL	0.06	0.05	0.05	0.05	0.05	0.05
9	POL	POL	POL	POL	POL	0.05	0.05
10	0.05	0.05	POL	POL	POL	POL	0.05
11	0.05	0.05	0.05	0.05	POL	POL	0.05
12	POL	POL	POL	0.05	0.05	0.05	0.05
13	0.05	POL	POL	POL	POL	0.06	0.06
14	0.06	0.06	0.06	POL	POL	POL	0.06
15	POL	0.06	0.06	0.06	0.06	POL	0.06
16	POL	POL	POL	POL	0.08	0.06	0.08
17	0.06	POL	POL	POL	0.08	POL	0.08
18	POL	POL	0.08	0.08	0.06	POL	0.08
19	POL	POL	0.07	0.07	0.07	0.06	0.07
20	0.05	POL	POL	0.06	0.06	0.06	0.06
21	0.05	0.05	POL	0.05	0.05	0.05	0.05
22	0.05	POL	POL	0.05	0.05	0.05	0.05
23	POL	POL	0.05	0.06	0.05	POL	0.06
24	POL	POL	POL	0.05	0.05	0.05	0.05
25	POL	POL	POL	POL	POL	0.05	0.05
26	0.05	POL	POL	POL	0.05	0.05	0.05
27	0.05	POL	POL	POL	POL	0.05	0.05
28	0.05	0.05	POL	POL	0.05	0.05	0.05
29	POL	POL	POL	POL	0.05	0.05	0.05
30	0.05	0.05	POL	POL	POL	0.05	0.05
31							

Conventional or Direct Filtration

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings $\leq$ 0.3 NTU?☒ Yes / ☐ NoAll 4-hour turbidity readings $\leq$ 1 NTU?☒ Yes / ☐ NoAll turbidity readings < IFE² triggers☒ Yes / ☐ NoCT's met everyday?
(see back)☒ Yes / ☐ NoAll Cl₂ residual at entry point
 $\geq$ 0.2 mg/l?☒ Yes / ☐ No

Notes:

PRINTED NAME: **Daryn McNeil**SIGNATURE: *[Signature]*DATE: **12-7-25**PHONE #: **(541) 680-4513**CERT #: **09178**

¹ 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. ² IFE = Individ. Filter Eff. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :

A

System Name: Clark Branch Water Association ID#: 41 00548 Month/Year: 25-Nov

Disinfection *Giardia*
Log Inactive:

1

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.7	94	65.8	15.0	7.50	31.7	YES	57
2	0.8	94	75.2	15.0	7.50	32.0	YES	57
3	0.7	94	65.8	14.0	7.50	33.9	YES	57
4	0.7	94	65.8	14.0	7.50	33.9	YES	57
5	0.8	94	75.2	14.0	7.50	34.3	YES	57
6	0.9	94	84.6	14.0	7.60	36.0	YES	57
7	1	94	94.0	14.0	7.50	35.0	YES	57
8	0.9	94	84.6	13.0	7.40	35.7	YES	48
9	0.9	94	84.6	13.0	7.50	37.0	YES	37
10	0.9	94	84.6	14.0	7.40	33.4	YES	52
11	0.9	94	84.6	14.0	7.50	34.6	YES	54
12	1.2	94	112.8	14.0	7.50	35.8	YES	61
13	0.6	94	56.4	14.0	7.40	32.3	YES	51
14	0.8	94	75.2	14.0	7.50	34.3	YES	59
15	0.8	94	75.2	15.0	7.50	32.0	YES	32
16	0.6	94	56.4	14.0	7.50	33.5	YES	38
17	0.8	94	75.2	14.0	7.40	33.0	YES	52
18	1	94	94.0	14.0	7.40	33.8	YES	52
19	1.3	94	122.2	14.0	7.40	34.9	YES	53
20	0.8	94	75.2	14.0	7.50	34.3	YES	78
21	0.8	94	75.2	14.0	7.50	34.3	YES	77
22	0.9	94	84.6	14.0	7.50	34.6	YES	59
23	1.1	94	103.4	15.0	7.50	33.2	YES	31
24	0.8	94	75.2	15.0	7.50	32.0	YES	67
25	0.7	94	65.8	14.0	7.40	32.6	YES	54
26	0.9	94	84.6	14.0	7.40	33.4	YES	67
27	0.8	94	75.2	14.0	7.40	33.0	YES	75
28	1.7	94	159.8	14.0	7.40	36.6	YES	87
29	0.8	94	75.2	14.0	7.40	33.0	YES	36
30	0.9	94	84.6	14.0	7.50	34.6	YES	46
31		94						

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

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

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