

**OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Douglas
Conventional or Direct Filtration**

System Name: TRI-CITY JW&SA ID #: OR4100549 WTP:-WTP-A Month/Year:

APR 24

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	.039	.038	.038	OFF	OFF	OFF	.039
2	OFF	OFF	OFF	OFF	.043	.038	.046
3	.037	.037	OFF	.039	.037	OFF	.051
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF
5	OFF	OFF	.033	.033	.032	.028	.036
6	OFF	OFF	OFF	OFF	OFF	OFF	OFF
7	OFF	OFF	OFF	.036	.035	.035	.044
8	.036	.035	OFF	OFF	OFF	OFF	.036
9	OFF	OFF	OFF	OFF	.039	.036	.073
10	.036	.035	.035	OFF	OFF	OFF	.036
11	OFF	OFF	OFF	OFF	OFF	OFF	.042
12	.038	.035	.035	.035	OFF	OFF	.038
13	OFF	OFF	OFF	OFF	OFF	OFF	OFF
14	OFF	.034	.033	.033	.033	OFF	.043
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF
16	OFF	OFF	.037	.035	.033	.033	.041
17	.034	OFF	OFF	OFF	OFF	OFF	.046
18	OFF	OFF	OFF	.036	.036	.034	.045
19	.034	.039	OFF	OFF	OFF	OFF	.036
20	OFF	OFF	OFF	OFF	.036	.034	.042
21	.033	.031	.034	OFF	OFF	OFF	.034
22	OFF	OFF	OFF	OFF	OFF	.034	.046
23	.036	.035	.036	OFF	OFF	OFF	.036
24	OFF	OFF	OFF	OFF	.038	.036	.040
25	.035	.035	OFF	OFF	OFF	OFF	.035
26	OFF	OFF	OFF	.036	.036	.036	.049
27	.036	.039	OFF	OFF	OFF	OFF	.036
28	OFF	OFF	OFF	OFF	.039	.037	.042
29	.036	OFF	OFF	OFF	OFF	OFF	.036
30	OFF	OFF	OFF	.037	.036	.036	.048
31							

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No	
All the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / No			
All turbidity readings < IFE ² triggers? <input checked="" type="checkbox"/> Yes / No			
Notes:	PRINTED NAME: BRIAN KELLY		
	SIGNATURE: <i>[Signature]</i>	DATE: 5-1-24	
	PHONE #: (541) 580-2581	CERT #: D-8441 T-8301	

Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. IFE = Individ. Filter Effl. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

TRI-CITY JW&SA ID #: OR4100549 WTP-: WTP-A Month/Year:

APR 24

Required Log Inactivation: 5

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/9:30A	1.31	60	78	9.6	7.4	31	YES	777
2/4:25P	1.48	60	88	10.5	7.5	23	YES	811
3/12:11P	.95	60	57	11.4	7.6	27	YES	821
4/OFF	-	-	-	-	-	-	-	-
5/6:34A	1.26	60	75	11.2	7.4	23	YES	799
6/OFF	-	-	-	-	-	-	-	-
7/9:51A	1.20	60	72	10.1	7.5	23	YES	793
8/4:44A	1.26	60	75	10.5	7.6	28	YES	793
9/5:39P	1.12	60	67	11.1	7.5	23	YES	799
10/9:53A	1.32	60	79	11.0	7.4	23	YES	799
11/OFF	-	-	-	-	-	-	-	-
12/12:11A	1.33	60	79	11.2	7.3	23	YES	801
13/OFF	-	-	-	-	-	-	-	-
14/3:13A	1.08	60	64	12.1	7.4	22	YES	801
15/OFF	-	-	-	-	-	-	-	-
16/7:52A	1.82	60	49	11.6	7.4	22	YES	810
17/11:11A	1.20	60	72	11.5	7.4	23	YES	810
18/12:43P	1.29	60	77	11.7	7.3	23	YES	819
19/1:00P	1.16	60	69	12.1	7.4	23	YES	819
20/4:51P	1.24	60	74	12.4	7.2	23	Yes	814
21/7:00A	1.34	60	80	12.1	7.2	23	Yes	814
22/6:51P	1.37	60	82	12.3	7.1	23	YES	813
23/8:40A	1.21	60	72	12.7	7.2	23	YES	813
24/5:20P	1.18	60	70	12.8	7.1	23	YES	822
25/5:30A	1.23	60	73	13.9	7.3	23	YES	822
26/11:11A	1.19	60	71	13.8	7.2	23	YES	815
27/1:00A	1.27	60	73	12.6	7.2	23	YES	815
28/3:55P	1.20	60	72	12.7	7.2	23	YES	824
29/3:52A	1.22	60	73	11.7	7.1	23	YES	824
30/10:26A	1.19	60	71	12.0	7.1	23	YES	800
31/								

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.