

## OHA - Drinking Water Program - Turbidity Monitoring Report Form County:COOS Conventional or Direct Filtration

System Name: MYRTLE POINT, CITY OF ID:OR4100551 WTP:-WTP-A Month/Year: February 2021

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	-----	-----	0.02	0.01	0.01	-----	0.02
2	-----	-----	0.01	0.02	0.05	-----	0.05
3	-----	-----	0.02	0.02	0.02	-----	0.02
4	-----	-----	0.04	0.02	0.01	-----	0.04
5	-----	-----	0.01	0.01	0.01	-----	0.01
6	-----	-----	-----	-----	-----	-----	-----
7	-----	-----	-----	-----	-----	-----	-----
8	-----	-----	-----	-----	-----	-----	-----
9	-----	-----	0.01	0.01	0.01	-----	0.01
10	-----	-----	0.01	0.03	0.02	-----	0.03
11	-----	-----	0.02	0.04	0.02	-----	0.04
12	-----	-----	0.01	0.01	0.01	-----	0.01
13	-----	-----	-----	-----	-----	-----	-----
14	-----	-----	-----	-----	-----	-----	-----
15	-----	-----	0.01	0.02	-----	-----	0.02
16	-----	-----	0.01	0.01	0.01	-----	0.01
17	-----	-----	0.01	0.02	0.03	-----	0.03
18	-----	-----	0.03	0.01	0.01	-----	0.03
19	-----	-----	0.02	0.02	0.03	-----	0.03
20	-----	-----	-----	-----	-----	-----	-----
21	-----	-----	-----	-----	-----	-----	-----
22	-----	-----	0.04	0.01	0.01	-----	0.04
23	-----	-----	0.01	0.01	0.01	-----	0.01
24	-----	-----	0.02	0.03	-----	-----	0.03
25	-----	-----	0.02	0.01	0.01	-----	0.02
26	-----	-----	0.01	0.01	0.01	-----	0.01
27	-----	-----	-----	-----	-----	-----	-----
28	-----	-----	-----	-----	-----	-----	-----
29	-----	-----	-----	-----	-----	-----	-----
30	-----	-----	-----	-----	-----	-----	-----
31	-----	-----	-----	-----	-----	-----	-----

<b>Conventional or Direct Filtration</b>	<b>Monthly Summary (Answer Yes or No)</b>	
95% of the 4 hour turbidity readings ≤ 0.3 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 Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All the 4 hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
All turbidity readings < IFE <sup>2</sup> triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No <sup>2</sup>		
Notes:	PRINTED NAME: RYAN ALLEN SHERMAN	DATE: March 1, 2021
	SIGNATURE:	CERT #: 09184
	PHONE #: ( 541 ) 572-2589	

<sup>1</sup> Including continuous data, if applicable, for optimizing recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum.

<sup>2</sup> IFE=Individual Filter Effluent (OAR 333-06-0040(1)(e)(B&C))

## OHA - Drinking Water Program - Surface Water Quality Data Form

MYRTLE POINT, CITY OF ID #: OR4100551 WTP:- WTP-A Month/Year: February 2021

Required Log Inactivation: 1

Date / Time	Min. Cl <sub>2</sub> Residual At 1 <sup>st</sup> 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]	<b>C x T</b>	[° C]	S.U.	Formula	Yes / No	[GPM]
1 / 11 AM	1.0	105	108	10.0	8.2	58	Yes	850
2 / 11 AM	1.1	105	114	10.6	8.2	57	Yes	850
3 / 11 AM	1.0	105	108	10.0	8.1	58	Yes	850
4 / 11 AM	1.1	105	118	9.4	8.2	61	Yes	850
5 / 11 AM	1.1	105	112	10.0	8.1	58	Yes	850
6 / 11 AM	----	----	----	----	----	----	----	----
7 / 11 AM	----	----	----	----	----	----	----	----
8 / 11 AM	1.0	105	106	10.6	8.1	55	Yes	----
9 / 11 AM	1.0	105	105	10.6	8.1	55	Yes	850
10 / 11 AM	1.0	105	102	10.0	8.1	57	Yes	850
11 / 11 AM	1.1	105	110	10.0	8.1	57	Yes	850
12 / 11 AM	1.1	105	114	10.0	8.2	59	Yes	850
13 / 11 AM	----	----	----	----	----	----	----	----
14 / 11 AM	----	----	----	----	----	----	----	----
15 / 11 AM	1.1	105	117	11.7	8.1	51	Yes	850
16 / 11 AM	1.1	105	113	11.1	8.1	54	Yes	850
17 / 11 AM	1.2	105	125	11.7	8.1	52	Yes	850
18 / 11 AM	1.2	105	124	12.2	8.1	50	Yes	850
19 / 11 AM	1.2	105	127	11.7	8.1	51	Yes	850
20 / 11 AM	----	----	----	----	----	----	----	----
21 / 11 AM	----	----	----	----	----	----	----	----
22 / 11 AM	1.2	105	126	12.8	8.1	48	Yes	850
23 / 11 AM	1.2	105	129	12.2	8.1	50	Yes	850
24 / 11 AM	1.3	105	140	11.7	8.2	54	Yes	850
25 / 11 AM	1.2	105	129	11.1	8.3	58	Yes	850
26 / 11 AM	1.3	105	133	10.6	8.3	61	Yes	850
27 / 11 AM	----	----	----	----	----	----	----	----
28 / 11 AM	----	----	----	----	----	----	----	----
29 / 11 AM	----	----	----	----	----	----	----	----
30 / 11 AM	----	----	----	----	----	----	----	----
31 / 11 AM	----	----	----	----	----	----	----	----

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.

Revised February 2012