

**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: August 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	----	----	----	----	----	----	----
2	----	----	0.04	0.04	0.03	----	0.04
3	----	----	0.04	0.04	0.03	----	0.04
4	----	----	0.04	0.03	0.03	----	0.04
5	----	----	0.04	0.03	0.03	----	0.04
6	----	----	----	0.03	----	----	0.03
7	----	----	----	----	----	----	----
8	----	----	----	----	----	----	----
9	----	----	----	0.04	0.03	----	0.04
10	----	----	0.04	0.04	0.03	----	0.04
11	----	----	0.03	0.03	0.03	----	0.03
12	----	----	0.03	0.03	0.03	----	0.03
13	----	----	0.03	0.03	0.03	----	0.03
14	----	----	----	----	----	----	----
15	----	----	----	----	----	----	----
16	----	----	----	0.04	0.03	----	0.04
17	----	----	0.04	0.04	0.03	----	0.04
18	----	----	0.04	0.03	0.03	----	0.04
19	----	----	0.04	0.04	0.04	----	0.04
20	----	----	----	0.03	----	----	0.03
21	----	----	----	----	----	----	----
22	----	----	----	----	----	----	----
23	----	----	0.05	0.04	0.04	----	0.05
24	----	----	0.04	0.04	0.04	----	0.04
25	----	----	0.04	0.04	0.04	----	0.04
26	----	----	0.04	0.04	0.04	----	0.04
27	----	----	0.04	0.04	----	----	0.04
28	----	----	----	----	----	----	----
29	----	----	----	----	----	----	----
30	----	----	0.06	0.04	0.04	----	0.06
31	----	----	0.04	0.03	0.03	----	0.04

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of the 4 hour turbidity readings $\leq$ 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 $\geq$ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All the 4 hour turbidity readings $\leq$ 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: <i>Ryan A. Sherman</i>	DATE: September 1, 2021
	SIGNATURE: <i>[Signature]</i>	CERT #: 9184
	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 333-061-0040(1)(e)(B&C))

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

**MYRTLE POINT, CITY OF ID #: OR4100551 WTP-: WTP-A Month/Year: August 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	----	----	----	----	----	----	----	----
2 / 11 AM	1.1	105	113	22.2	7.7	22	Yes	1200
3 / 11 AM	1.2	105	121	22.2	7.8	23	Yes	1200
4 / 11 AM	1.2	105	127	22.2	7.9	24	Yes	1200
5 / 11 AM	1.2	105	127	21.1	7.7	24	Yes	1200
6 / 11 AM	1.5	105	158	22.2	7.8	24	Yes	1200
7 / 11 AM	----	----	----	----	----	----	----	----
8 / 11 AM	----	----	----	----	----	----	----	----
9 / 11 AM	1.1	105	110	21.7	7.9	24	Yes	1200
10 / 11 AM	1.1	105	119	21.7	7.9	25	Yes	1200
11 / 11 AM	1.2	105	124	21.7	7.7	23	Yes	1200
12 / 11 AM	1.2	105	127	22.8	7.8	22	Yes	1200
13 / 11 AM	1.3	105	140	22.2	7.8	23	Yes	1200
14 / 11 AM	----	----	----	----	----	----	----	----
15 / 11 AM	----	----	----	----	----	----	----	----
16 / 11 AM	1.0	105	108	22.2	7.8	22	Yes	1200
17 / 11 AM	1.2	105	129	22.2	8.0	25	Yes	1200
18 / 11 AM	1.3	105	138	22.2	7.9	24	Yes	1200
19 / 11 AM	1.3	105	140	21.7	7.9	25	Yes	1200
20 / 11 AM	1.4	105	145	21.1	8.0	27	Yes	1200
21 / 11 AM	----	----	----	----	----	----	----	----
22 / 11 AM	----	----	----	----	----	----	----	----
23 / 11 AM	1.1	105	111	21.1	7.9	25	Yes	1200
24 / 11 AM	1.2	105	122	20.6	7.7	25	Yes	1200
25 / 11 AM	1.2	105	125	20.6	7.8	25	Yes	1200
26 / 11 AM	1.3	105	133	21.1	7.8	25	Yes	1200
27 / 11 AM	1.3	105	141	21.1	7.9	26	Yes	1200
28 / 11 AM	----	----	----	----	----	----	----	----
29 / 11 AM	----	----	----	----	----	----	----	----
30 / 11 AM	1.0	105	109	20.6	7.9	26	Yes	1200
31 / 11 AM	1.4	105	142	20.0	7.9	28	Yes	1200

<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