

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: March 2022

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

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
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 ₂ 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 ² triggers? <input checked="" type="radio"/> Yes <input type="radio"/> No ²		
Notes:	PRINTED NAME: RYAN A. SKERMAN	
	SIGNATURE: <i>[Signature]</i>	DATE: April 1, 2022
	PHONE #: (541) 572-2589	CERT #: 9184

¹ 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.

² 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: March 2022 Required Log Inactivation: 1

Date / Time	Min. 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]	C x T	[° C]	S.U.	Formula	Yes / No	[GPM]
1 / 11 AM	0.9	105	91	11.1	8.1	53	Yes	850
2 / 11 AM	1.0	105	100	11.1	8.2	54	Yes	850
3 / 11 AM	0.9	105	96	11.1	8.2	53	Yes	850
4 / 11 AM	1.1	105	114	11.7	8.2	54	Yes	850
5 / 11 AM	----	----	----	----	----	----	----	----
6 / 11 AM	----	----	----	----	----	----	----	----
7 / 11 AM	0.9	105	89	11.7	8.1	51	Yes	850
8 / 11 AM	1.0	105	101	10.6	7.9	51	Yes	850
9 / 11 AM	1.0	105	108	10.6	8.0	54	Yes	850
10 / 11 AM	1.0	105	105	11.1	7.9	49	Yes	850
11 / 11 AM	1.0	105	107	11.7	7.9	48	Yes	850
12 / 11 AM	----	----	----	----	----	----	----	----
13 / 11 AM	----	----	----	----	----	----	----	----
14 / 11 AM	0.9	105	95	11.1	8.0	50	Yes	850
15 / 11 AM	1.0	105	102	11.7	8.1	51	Yes	850
16 / 11 AM	1.1	105	112	11.7	8.2	53	Yes	850
17 / 11 AM	1.1	105	116	11.1	8.2	54	Yes	850
18 / 11 AM	1.0	105	108	11.7	8.2	54	Yes	850
19 / 11 AM	----	----	----	----	----	----	----	----
20 / 11 AM	----	----	----	----	----	----	----	----
21 / 11 AM	0.9	105	95	11.7	7.8	45	Yes	850
22 / 11 AM	0.9	105	93	12.2	8.3	51	Yes	850
23 / 11 AM	0.9	105	97	12.2	8.2	51	Yes	850
24 / 11 AM	0.9	105	93	11.7	8.0	48	Yes	850
25 / 11 AM	0.9	105	97	12.8	7.9	43	Yes	850
26 / 11 AM	----	----	----	----	----	----	----	----
27 / 11 AM	----	----	----	----	----	----	----	----
28 / 11 AM	0.9	105	95	13.3	7.8	41	Yes	850
29 / 11 AM	0.9	105	98	13.3	7.9	41	Yes	850
30 / 11 AM	1.1	105	113	13.9	7.8	40	Yes	850
31 / 11 AM	1.2	105	122	13.9	7.9	41	Yes	850

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

Revised February 2012