

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: 2023

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	0.02	----	0.03
2	----	----	0.03	0.03	0.03	----	0.03
3	----	----	0.02	0.02	0.02	----	0.02
4	----	----	0.02	0.03	0.02	----	0.03
5	----	----	0.03	0.03	0.03	----	0.03
6	----	----	----	----	----	----	----
7	----	----	----	----	----	----	----
8	----	----	----	0.03	0.03	----	0.03
9	----	----	0.03	0.03	0.03	----	0.03
10	----	----	0.03	0.03	0.03	----	0.03
11	----	----	0.03	0.03	0.03	----	0.03
12	----	----	0.03	0.03	----	----	0.03
13	----	----	----	----	----	----	----
14	----	----	----	----	----	----	----
15	----	----	----	0.03	0.03	----	0.03
16	----	----	0.03	0.03	0.03	----	0.03
17	----	----	0.03	0.03	----	----	0.03
18	----	----	0.03	----	----	----	0.03
19	----	----	----	0.04	----	----	0.04
20	----	----	----	----	----	----	----
21	----	----	----	----	----	----	----
22	----	----	----	0.04	0.04	----	0.04
23	----	----	0.04	0.05	----	----	0.05
24	----	----	0.04	----	----	----	0.04
25	----	----	0.04	----	----	----	0.04
26	----	----	0.05	0.04	----	----	0.05
27	----	----	----	----	----	----	----
28	----	----	----	----	----	----	----
29	----	----	0.04	0.05	----	----	0.05
30	----	----	0.05	0.03	0.03	----	0.05
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? Yes / No	CT's met everyday? (see back)	All Cl ₂ residual at entry point \geq 0.2 mg/l?
All the 4 hour turbidity readings \leq 1 NTU? Yes / No	Yes / No	Yes / No
All turbidity readings < IFE ² triggers? Yes / No²		
Notes:	PRINTED NAME: Ryan A. Sherman	
	SIGNATURE: <i>Ryan A. Sherman</i>	DATE: June 1, 2023
	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: 2023

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	96	11.7	8.0	48	Yes	850
2 / 11 AM	1.3	105	132	12.2	8.1	51	Yes	850
3 / 11 AM	1.3	105	133	12.8	8.1	49	Yes	850
4 / 11 AM	1.2	105	127	12.2	7.8	45	Yes	850
5 / 11 AM	0.8	105	84	12.2	7.8	43	Yes	850
6 / 11 AM	----	----	----	----	----	----	----	----
7 / 11 AM	----	----	----	----	----	----	----	----
8 / 11 AM	1.0	105	108	13.3	7.8	41	Yes	850
9 / 11 AM	1.2	105	122	14.4	7.7	37	Yes	850
10 / 11 AM	1.2	105	123	13.9	7.8	41	Yes	850
11 / 11 AM	1.2	105	128	14.4	7.9	40	Yes	850
12 / 11 AM	1.3	105	137	14.4	7.9	40	Yes	850
13 / 11 AM	----	----	----	----	----	----	----	----
14 / 11 AM	----	----	----	----	----	----	----	----
15 / 11 AM	1.0	105	108	16.7	7.6	31	Yes	850
16 / 11 AM	1.2	105	122	16.7	7.7	33	Yes	850
17 / 11 AM	1.0	105	104	17.2	7.6	29	Yes	850
18 / 11 AM	1.1	105	112	17.2	7.6	30	Yes	850
19 / 11 AM	0.9	105	93	17.2	7.7	30	Yes	850
20 / 11 AM	----	----	----	----	----	----	----	----
21 / 11 AM	----	----	----	----	----	----	----	----
22 / 11 AM	1.2	105	127	17.2	7.8	32	Yes	850
23 / 11 AM	1.3	105	139	17.8	7.9	33	Yes	850
24 / 11 AM	1.3	105	138	17.8	8.0	34	Yes	850
25 / 11 AM	1.1	105	120	17.8	7.9	32	Yes	850
26 / 11 AM	1.1	105	117	17.8	7.9	32	Yes	850
27 / 11 AM	----	----	----	----	----	----	----	----
28 / 11 AM	----	----	----	----	----	----	----	----
29 / 11 AM	1.1	105	114	18.3	8.0	32	Yes	850
30 / 11 AM	1.1	105	111	18.3	8.1	33	Yes	850
31 / 11 AM	1.3	105	140	18.3	8.0	33	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