

OHA - Drinking Water Services - Surface Water Quality Data Form

County: COOS

Slow Sand, Membrane, Diatomaceous Earth, or Unfiltered

Month/Year: Feb 2021

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]	Min. Cl ₂ Residual at 1st User [ppm or mg/L]
1					0.9			0.2
2					1.0	Stop Prod.		0.2
3					6.3	No Prod.		0.3
4					5.6	No Production		0.3
5					2.9	No Production		0.3
6				1.9		No Production		0.7
7					1.3	No Production		0.6
8			1.1		1.0	No Production		0.7
9				0.9				0.4
10			0.9					0.2
11					0.7			0.2
12					0.5			0.2
13					0.9			0.2
14					0.9	STOP Prod.		0.2
15					1.5	No Production		0.2
16					4.1	No Production		0.2
17					2.6	No Production		0.3
18					1.9	No Production		0.4
19					1.3	No Production		0.4
20			1.1		1.0	No Production		0.4
21					0.9			0.3
22					0.9			0.3
23					0.8			0.2
24					0.8			0.2
25					0.7			0.2
26					0.8			0.2
27					0.9			0.2
28						0.8		0.2
29								
30								
31								

Slow Sand/Membrane/DE Filtration/Unfiltered 95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="checkbox"/> Yes / No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No	Monthly Summary (Answer Yes or No) All Cl ₂ residual measurements at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No
Monthly UV Summary (circle Yes or No) Was the volume of off-spec water produced less than 5% for the month? Yes / No	PRINTED NAME: <u>Ernie Newton</u> SIGNATURE: <u>[Signature]</u> DATE: <u>3-5-21</u> PHONE #: <u>(541) 572-5877</u> CERT #: <u>2624</u>

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM correspond to continuous readings' maximum. ² Filtered systems only.

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Slow Sand Filtration with UV *Giardia/Crypto* Disinfection

Month/Year: Feb 2021

System Name: Bridge Water District

ID# 41- 00552

WTP ID: A

Minimum Dose requirement: 186 mJ/cm²

Date	Minimum Dose Indicator Light	All Lamps On?	Daily Water Produced {A}	Water outside Validated Conditions {B}	Cumulative % Off-Spec Water Produced
	[green or red]	[Y or N]	[gal]	[gal]	(Mo. Sum (B)) + (Mo. Sum (A)) * [%]
1			9 264		
2			10 529		
3			0		
4			0		
5			0		
6			0		
7			0		
8			0		
9			14 211		
10			12 697		
11			13 673		
12			14 202		
13			13 655		
14			12 422		
15			0		
16			0		
17			0		
18			0		
19			0		
20			0		
21			12 405		
22			13 422		
23			13 005		
24			12 291		
25			13 206		
26			12 865		
27			13 251		
28			12 863		
29			15		
30					
31					
Monthly Cumulative % Off-Spec Water Produced ³					

³ If ≥ 5% of total water produced is off-spec., notify DWS within 24 hours.

Return by 10th of following month by email, fax or mail to:
 dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350