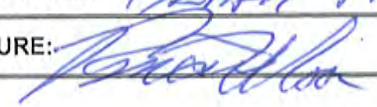


# OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Tillamook Cartridge or Bag Filtration

System Name: **NEHÀLEM, CITY OF** ID #: **OR4100554** WTP: **WTP-A** Month/Year: **Sept 2023**

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	58	54	4	20	.06	.10
2	58	53	5	20	.07	.10
3						off
4	58	53	5	20	.07	.09
5						off
6	58	53	5	20	.07	.10
7						off
8	58	53	5	20	.07	.09
9	58	53	5	20	.07	.10
10	58	53	5	20	.07	.09
11	58	53	5	20	.06	.09
12	58	52	6	20	.07	.10
13	58	52	6	20	.06	.09
14	58	52	6	20	.06	.09
15	58	52	6	20	.07	.10
16	58	52	6	20	.07	.09
17	58	52	6	20	.07	.09
18	58	52	6	20	.07	.10
19	58	52	6	20	.07	.09
20	58	52	6	20	.07	.10
21	58	52	6	20	.07	.10
22	58	52	6	20	.07	.10
23	58	52	6	20	.07	.09
24	58	52	6	20	.07	.10
25	58	52	6	20	.07	.10
26	58	52	6	20	.07	.10
27						off
28	58	51	7	20	.08	.11
29	58	51	7	20	.08	.10
30	58	51	7	20	.07	.10
31						

<b>Cartridge Filtration</b>  95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No	<b>Monthly Summary (Answer Yes or No)</b>  CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / No
<b>Notes:</b> PSI = pounds per square inch PSID = pounds per square inch difference (before filter – after filter) PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change the filter, at what PSID.	PRINTED NAME: <b>Bejan Maske</b> SIGNATURE:  DATE: <b>9-30-2023</b> Both level 2 PHONE #: <b>(503) 861-5001</b> CERT #: <b>D-09185</b> <b>T-09363</b>

<sup>1</sup> Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.



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

NEHALEM, CITY OF ID #: OR4100554 WTP-: WTP-A Month/Year: *September 2023*

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User ( C ) <sup>2</sup>	Contact Time ( T )	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1 <i>800</i>	<i>.43</i>	<i>240</i>	<i>103</i>	<i>17</i>	<i>7.10</i>	<i>22</i>	<i>Yes</i>	<i>110</i>
2 <i>800</i>	<i>.40</i>	<i>222</i>	<i>88</i>	<i>17</i>	<i>7.15</i>	<i>22</i>	<i>Yes</i>	<i>120</i>
3 <i>800</i>	<i>off</i>							
4 <i>800</i>	<i>.50</i>	<i>192</i>	<i>96</i>	<i>17</i>	<i>7.20</i>	<i>22</i>	<i>Yes</i>	<i>120</i>
5 <i>800</i>	<i>off</i>							
6 <i>800</i>	<i>.40</i>	<i>240</i>	<i>96</i>	<i>17</i>	<i>7.20</i>	<i>22</i>	<i>Yes</i>	<i>100</i>
7 <i>800</i>	<i>off</i>							
8 <i>800</i>	<i>.38</i>	<i>240</i>	<i>91</i>	<i>17</i>	<i>7.22</i>	<i>22</i>	<i>Yes</i>	<i>110</i>
9 <i>800</i>	<i>.42</i>	<i>240</i>	<i>100</i>	<i>17</i>	<i>7.25</i>	<i>22</i>	<i>Yes</i>	<i>110</i>
10 <i>800</i>	<i>.40</i>	<i>206</i>	<i>82</i>	<i>17</i>	<i>7.15</i>	<i>22</i>	<i>Yes</i>	<i>115</i>
11 <i>800</i>	<i>.31</i>	<i>206</i>	<i>64</i>	<i>17</i>	<i>7.15</i>	<i>22</i>	<i>Yes</i>	<i>115</i>
12 <i>800</i>	<i>.50</i>	<i>262</i>	<i>131</i>	<i>16</i>	<i>7.20</i>	<i>24</i>	<i>Yes</i>	<i>110</i>
13 <i>800</i>	<i>.48</i>	<i>262</i>	<i>125</i>	<i>16</i>	<i>7.18</i>	<i>23</i>	<i>Yes</i>	<i>100</i>
14 <i>800</i>	<i>.44</i>	<i>262</i>	<i>115</i>	<i>16</i>	<i>7.15</i>	<i>23</i>	<i>Yes</i>	<i>100</i>
15 <i>800</i>	<i>.45</i>	<i>240</i>	<i>108</i>	<i>16</i>	<i>7.20</i>	<i>23</i>	<i>Yes</i>	<i>110</i>
16 <i>800</i>	<i>.40</i>	<i>240</i>	<i>96</i>	<i>16</i>	<i>7.21</i>	<i>23</i>	<i>Yes</i>	<i>115</i>
17 <i>800</i>	<i>.40</i>	<i>240</i>	<i>115</i>	<i>16</i>	<i>7.17</i>	<i>23</i>	<i>Yes</i>	<i>120</i>
18 <i>800</i>	<i>.39</i>	<i>222</i>	<i>86</i>	<i>16</i>	<i>7.15</i>	<i>23</i>	<i>Yes</i>	<i>120</i>
19 <i>800</i>	<i>.45</i>	<i>288</i>	<i>129</i>	<i>16</i>	<i>7.18</i>	<i>23</i>	<i>Yes</i>	<i>100</i>
20 <i>800</i>	<i>.50</i>	<i>262</i>	<i>131</i>	<i>16</i>	<i>7.16</i>	<i>23</i>	<i>Yes</i>	<i>100</i>
21 <i>800</i>	<i>.41</i>	<i>288</i>	<i>118</i>	<i>16</i>	<i>7.12</i>	<i>23</i>	<i>Yes</i>	<i>100</i>
22 <i>800</i>	<i>.43</i>	<i>288</i>	<i>124</i>	<i>16</i>	<i>7.17</i>	<i>23</i>	<i>Yes</i>	<i>100</i>
23 <i>800</i>	<i>.41</i>	<i>240</i>	<i>98</i>	<i>16</i>	<i>7.16</i>	<i>23</i>	<i>Yes</i>	<i>105</i>
24 <i>800</i>	<i>.43</i>	<i>240</i>	<i>103</i>	<i>16</i>	<i>7.15</i>	<i>23</i>	<i>Yes</i>	<i>100</i>
25 <i>800</i>	<i>.42</i>	<i>222</i>	<i>93</i>	<i>15</i>	<i>7.18</i>	<i>24</i>	<i>Yes</i>	<i>110</i>
26 <i>800</i>	<i>.40</i>	<i>262</i>	<i>104</i>	<i>15</i>	<i>7.16</i>	<i>24</i>	<i>Yes</i>	<i>100</i>
27 <i>800</i>	<i>off</i>							
28 <i>800</i>	<i>.38</i>	<i>240</i>	<i>91</i>	<i>15</i>	<i>7.21</i>	<i>25</i>	<i>Yes</i>	<i>100</i>
29 <i>800</i>	<i>.35</i>	<i>222</i>	<i>77</i>	<i>15</i>	<i>7.20</i>	<i>25</i>	<i>Yes</i>	<i>110</i>
30 <i>800</i>	<i>.36</i>	<i>288</i>	<i>103</i>	<i>14</i>	<i>7.18</i>	<i>26</i>	<i>Yes</i>	<i>100</i>
31 /								

<sup>2</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.Download form at: [www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf](http://www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf)