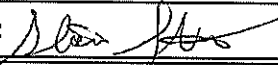


OHA - Drinking Water Program - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Lincoln**
 Month/Year: **Jan-21**
 WTP: TP - **Membrane**

System Name:	Newport, City of			ID#: 41-00566 A			WTP: TP -	Membrane
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	P/O	P/O	0.013	0.013	P/O	P/O	0.016	
2	0.013	0.013	P/O	P/O	0.013	0.013	0.016	
3	P/O	P/O	P/O	0.013	0.013	0.013	0.019	
4	P/O	P/O	P/O	0.015	0.013	0.013	0.016	
5	P/O	P/O	0.015	0.014	0.014	P/O	0.023	
6	P/O	0.013	0.014	P/O	0.013	0.013	0.016	
7	0.013	P/O	P/O	0.015	0.013	0.013	0.021	
8	P/O	0.013	0.014	P/O	P/O	0.013	0.015	
9	0.013	P/O	P/O	0.013	0.014	0.013	0.020	
10	P/O	P/O	P/O	0.019	0.013	0.013	0.019	
11	P/O	P/O	P/O	0.015	0.013	0.013	0.015	
12	P/O	P/O	0.016	0.014	0.016	0.013	0.017	
13	P/O	P/O	0.014	0.014	0.013	0.013	0.019	
14	P/O	P/O	0.013	0.013	0.013	0.015	0.015	
15	0.013	P/O	P/O	0.018	0.013	0.013	0.020	
16	P/O	P/O	0.016	0.013	0.013	P/O	0.016	
17	0.014	0.013	0.013	P/O	0.013	0.013	0.019	
18	0.013	P/O	P/O	0.014	0.013	0.013	0.015	
19	P/O	P/O	0.013	0.013	0.013	0.013	0.015	
20	P/O	P/O	0.013	0.013	0.013	P/O	0.015	
21	P/O	P/O	0.013	0.013	0.013	0.013	0.015	
22	P/O	P/O	0.014	0.013	0.013	P/O	0.016	
23	0.013	0.013	0.015	P/O	0.013	0.013	0.016	
24	0.014	P/O	0.014	0.013	0.013	P/O	0.015	
25	P/O	P/O	0.013	0.013	0.013	P/O	0.018	
26	0.013	0.013	P/O	P/O	0.014	0.013	0.039	
27	P/O	P/O	0.013	0.013	P/O	P/O	0.016	
28	0.018	P/O	P/O	0.015	0.013	0.013	0.018	
29	P/O	P/O	P/O	0.013	0.013	0.013	0.016	
30	0.013	P/O	P/O	0.016	0.013	0.013	0.016	
31	P/O	P/O	0.015	0.013	0.013	0.013	0.015	

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ²	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday?	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
Notes: P/O = PLANT OFF		PRINTED NAME: Steve Stewart	
		SIGNATURE: 	DATE: 2/2/2021
		PHONE #: (541) 265-7421	CERT #: 2445

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM 8 PM may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP: Membrane

Disinfection
Giardia Log
Inactive: 0.5

System Name: NEWPORT, CITY OF

ID#: 41-00566

Month/Year: Jan-21

Date / Time	Minimum Cl ₂ Residual at 1st 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]		formula	Yes / No	[GPM]
1/1/2021 5:05	1.2	104	123	8	8.1	33	Yes	2226
1/2/2021 13:14	0.9	113	101	8	8.1	32	Yes	2178
1/3/2021 10:36	0.9	98	93	9	8.1	30	Yes	2268
1/4/2021 10:43	1.2	101	120	9	8.0	30	Yes	2254
1/5/2021 7:27	0.9	101	90	9	8.1	30	Yes	2254
1/6/2021 15:03	0.9	104	90	9	8.0	29	Yes	2180
1/7/2021 9:40	1.2	106	128	9	8.0	30	Yes	2166
1/8/2021 16:23	1.0	106	102	9	7.9	29	Yes	2155
1/9/2021 11:09	1.1	99	113	9	8.0	31	Yes	2269
1/10/2021 9:44	1.0	101	100	9	8.0	29	Yes	2261
1/11/2021 9:29	1.0	102	104	9	8.0	29	Yes	2264
1/12/2021 7:37	1.1	103	116	9	8.0	30	Yes	2245
1/13/2021 5:43	1.2	106	123	10	8.0	29	Yes	2156
1/14/2021 6:41	1.2	102	122	9	8.0	29	Yes	2253
1/15/2021 10:36	0.9	100	95	9	8.0	28	Yes	2264
1/16/2021 23:38	1.2	89	106	10	7.9	28	Yes	2535
1/17/2021 12:05	1.0	101	105	9	7.9	28	Yes	2261
1/18/2021 20:03	1.2	101	122	9	7.9	29	Yes	2258
1/19/2021 5:11	1.1	100	113	9	7.9	30	Yes	2266
1/20/2021 4:03	1.1	101	115	8	8.0	32	Yes	2250
1/21/2021 5:58	1.1	102	110	8	8.0	31	Yes	2285
1/22/2021 23:28	1.1	100	112	8	8.0	32	Yes	2266
1/23/2021 13:16	1.0	103	106	8	8.1	33	Yes	2173
1/24/2021 5:23	1.1	101	113	8	8.1	34	Yes	2278
1/25/2021 3:56	1.1	100	107	7	8.1	34	Yes	2281
1/26/2021 0:41	1.1	100	112	7	8.1	36	Yes	2282
1/27/2021 5:51	1.1	104	115	7	8.0	35	Yes	2158
1/28/2021 11:46	1.1	104	111	7	8.0	34	Yes	2209
1/29/2021 9:45	1.0	91	94	7	8.1	35	Yes	2469
1/30/2021 9:24	1.1	100	107	7	8.1	35	Yes	2255
1/31/2021 14:02	1.1	98	108	7	8.2	36	Yes	2268

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised September 2016

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, P.O. Box 14350, Portland, OR 97293-0350