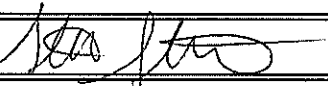


OHA - Drinking Water Program - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Lincoln**
 Month/Year: **Dec-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	P/O	0.014	0.015	0.014	0.017	
2	P/O	P/O	P/O	0.014	0.014	0.014	0.015	
3	P/O	P/O	P/O	0.015	0.014	0.014	0.016	
4	P/O	P/O	P/O	0.014	0.014	0.014	0.017	
5	P/O	P/O	P/O	0.014	0.014	0.014	0.023	
6	P/O	P/O	P/O	0.014	0.014	0.015	0.023	
7	0.014	P/O	P/O	0.014	0.014	0.015	0.016	
8	P/O	P/O	P/O	0.014	0.014	0.014	0.020	
9	P/O	P/O	0.015	0.015	0.014	0.014	0.017	
10	P/O	P/O	0.014	0.014	0.014	0.014	0.021	
11	P/O	P/O	P/O	0.015	0.014	0.015	0.017	
12	P/O	P/O	0.014	0.016	0.016	0.014	0.093	
13	P/O	P/O	P/O	0.016	0.014	0.014	0.018	
14	P/O	P/O	P/O	0.016	0.014	0.014	0.018	
15	P/O	P/O	P/O	0.015	0.015	0.014	0.019	
16	P/O	P/O	P/O	0.015	0.014	P/O	0.021	
17	P/O	P/O	P/O	0.015	0.014	0.014	0.017	
18	P/O	P/O	P/O	0.015	0.015	0.014	0.015	
19	P/O	P/O	P/O	0.024	0.015	P/O	0.034	
20	P/O	P/O	0.015	0.015	0.015	P/O	0.020	
21	P/O	0.014	0.014	0.014	P/O	0.014	0.018	
22	0.014	P/O	P/O	0.015	0.014	0.014	0.017	
23	P/O	P/O	0.015	0.015	0.014	P/O	0.015	
24	P/O	0.014	P/O	P/O	0.014	0.014	0.018	
25	P/O	P/O	P/O	0.015	0.014	P/O	0.016	
26	P/O	P/O	0.014	0.017	P/O	P/O	0.041	
27	P/O	0.014	0.015	P/O	0.015	0.014	0.017	
28	0.014	P/O	P/O	P/O	0.014	0.015	0.016	
29	P/O	P/O	P/O	0.015	0.015	0.014	0.015	
30	P/O	P/O	P/O	0.015	0.014	0.014	0.016	
31	P/O	P/O	0.015	0.015	0.015	P/O	0.017	

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 / 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 / No	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> Yes / No
Notes: P/O = PLANT OFF		PRINTED NAME: Steve Stewart	
		SIGNATURE: 	DATE: 1/3/2022
		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

System Name: NEWPORT, CITY OF

ID#: 41-00566

Month/Year: Dec-21

Disinfection
Giardia Log
Inactive: 0.5

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]
12/1/2021 5:14	1.2	96	114	10	8.0	28	Yes	2400
12/2/2021 7:48	1.1	91	102	10	7.9	27	Yes	2446
12/3/2021 8:01	1.2	93	109	10	8.0	29	Yes	2411
12/4/2021 8:35	0.6	104	62	10	8.0	27	Yes	2335
12/5/2021 8:05	0.7	94	62	9	8.1	29	Yes	2407
12/6/2021 8:01	1.2	93	109	9	8.2	32	Yes	2413
12/7/2021 9:01	0.8	90	69	9	8.2	30	Yes	2408
12/8/2021 8:31	1.1	95	103	9	8.0	30	Yes	2410
12/9/2021 7:35	0.7	94	70	9	8.0	30	Yes	2397
12/10/2021 7:12	0.7	87	58	9	8.1	30	Yes	2575
12/11/2021 8:34	0.7	99	73	9	8.1	30	Yes	2307
12/12/2021 8:27	1.2	97	117	9	8.1	32	Yes	2420
12/13/2021 8:29	1.0	92	90	8	8.0	31	Yes	2405
12/14/2021 8:59	1.0	93	92	8	8.0	32	Yes	2419
12/15/2021 8:40	0.7	91	68	8	8.0	32	Yes	2400
12/16/2021 7:52	0.8	94	73	8	8.1	31	Yes	2410
12/17/2021 7:50	1.0	96	92	8	8.1	32	Yes	2326
12/18/2021 9:52	1.3	94	118	8	8.1	33	Yes	2399
12/19/2021 8:00	1.2	92	109	8	8.1	33	Yes	2406
12/20/2021 5:22	1.2	92	107	8	8.1	33	Yes	2400
12/21/2021 3:07	1.2	95	117	9	8.1	32	Yes	2324
12/22/2021 10:17	0.8	96	77	9	8.1	30	Yes	2398
12/23/2021 7:37	1.0	98	94	9	8.0	30	Yes	2342
12/24/2021 12:17	1.2	93	116	9	8.1	32	Yes	2405
12/25/2021 8:44	1.0	92	97	8	8.1	32	Yes	2417
12/26/2021 23:46	1.1	92	102	7	8.1	34	Yes	2393
12/27/2021 15:25	1.1	94	108	7	8.1	36	Yes	2381
12/28/2021 12:00	1.2	95	117	7	8.1	37	Yes	2390
12/29/2021 10:32	1.0	97	100	7	8.1	36	Yes	2341
12/30/2021 9:22	1.2	93	114	7	8.1	36	Yes	2401
12/31/2021 6:07	1.3	92	115	7	8.1	36	Yes	2435

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

