


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

County: **Lincoln**  
 Month/Year: **Jan-23**

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 <sup>1</sup> [NTU]	
1	P/O	P/O	P/O	0.012	0.012	0.012	0.015	
2	P/O	P/O	P/O	0.012	0.012	0.012	0.014	
3	P/O	P/O	P/O	0.012	0.013	0.012	0.013	
4	P/O	P/O	P/O	0.012	0.012	0.012	0.015	
5	P/O	P/O	P/O	0.013	0.012	0.012	0.018	
6	P/O	P/O	P/O	0.012	0.012	0.012	0.014	
7	0.012	0.012	P/O	P/O	0.012	P/O	0.014	
8	P/O	P/O	P/O	0.013	0.012	0.012	0.019	
9	P/O	P/O	P/O	0.013	0.012	0.012	0.017	
10	0.012	P/O	P/O	0.012	0.012	0.012	0.013	
11	P/O	P/O	0.013	0.013	0.012	P/O	0.018	
12	P/O	P/O	0.014	0.012	P/O	P/O	0.017	
13	P/O	0.012	0.012	P/O	P/O	0.012	0.015	
14	0.012	0.012	P/O	0.012	0.012	0.012	0.014	
15	P/O	P/O	P/O	0.013	0.012	0.012	0.014	
16	P/O	P/O	P/O	0.013	0.012	0.012	0.014	
17	P/O	P/O	P/O	0.016	0.012	0.012	0.017	
18	P/O	P/O	P/O	0.019	0.012	0.012	0.019	
19	P/O	P/O	P/O	0.013	0.012	0.012	0.015	
20	P/O	P/O	P/O	0.013	0.012	0.012	0.017	
21	P/O	P/O	P/O	0.015	0.012	0.012	0.024	
22	P/O	P/O	P/O	0.012	0.012	0.012	0.015	
23	P/O	P/O	P/O	0.013	0.012	0.012	0.013	
24	P/O	P/O	P/O	0.012	0.015	0.012	0.018	
25	P/O	P/O	P/O	0.012	0.013	0.013	0.015	
26	P/O	P/O	0.012	0.014	0.012	0.012	0.021	
27	P/O	P/O	0.014	0.012	0.012	P/O	0.014	
28	P/O	P/O	0.013	0.013	0.012	P/O	0.015	
29	P/O	P/O	0.013	0.013	0.012	P/O	0.016	
30	P/O	P/O	0.013	0.013	0.012	P/O	0.015	
31	P/O	P/O	0.014	0.013	0.013	0.012	0.042	

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>	<input checked="" type="radio"/> Yes/ No	CT's met everyday?	All Cl <sub>2</sub> 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
<b>Notes: P/O = PLANT OFF</b>		<b>PRINTED NAME: Steve Stewart</b>	
		<b>SIGNATURE:</b> 	<b>DATE: 2/2/2023</b>
		<b>PHONE #: ( 541 ) 265-7421</b>	<b>CERT #: 2445</b>

<sup>1</sup> 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. <sup>2</sup> Filtered systems only.

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP: Membrane

System Name: NEWPORT, CITY OF

ID#: 41-00566

Month/Year: Jan-23

Disinfection  
Giardia Log  
Inactive: 0.5

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	CXT	[° C]		formula	Yes / No	[GPM]
1/1/2023 9:54	0.8	91	77	8	7.7	28	Yes	2603
1/2/2023 9:33	0.9	91	83	8	7.7	29	Yes	2622
1/3/2023 10:06	0.9	90	81	8	7.7	29	Yes	2606
1/4/2023 10:32	1.1	87	95	8	7.8	30	Yes	2609
1/5/2023 10:42	1.0	87	87	8	7.8	29	Yes	2615
1/6/2023 9:46	1.2	87	103	8	7.8	30	Yes	2617
1/7/2023 11:50	1.1	88	97	8	7.9	30	Yes	2559
1/8/2023 9:32	1.2	79	92	8	7.9	30	Yes	2874
1/9/2023 10:08	1.2	91	108	8	7.8	30	Yes	2536
1/10/2023 10:45	1.1	88	98	8	7.9	30	Yes	2556
1/11/2023 7:23	1.2	86	104	8	7.9	31	Yes	2628
1/12/2023 5:14	1.3	87	109	8	7.9	30	Yes	2620
1/13/2023 19:21	0.9	88	79	9	7.8	28	Yes	2622
1/14/2023 11:17	0.9	89	82	9	7.8	27	Yes	2600
1/15/2023 10:10	1.1	87	98	9	7.8	28	Yes	2627
1/16/2023 9:30	1.2	86	100	9	7.8	28	Yes	2632
1/17/2023 9:47	1.1	88	95	9	7.8	28	Yes	2616
1/18/2023 9:37	0.9	87	80	9	7.8	27	Yes	2634
1/19/2023 9:26	1.0	89	86	8	7.8	28	Yes	2613
1/20/2023 9:21	1.0	89	90	8	7.7	29	Yes	2616
1/21/2023 9:51	1.1	90	95	8	7.8	30	Yes	2540
1/22/2023 9:00	1.0	86	84	8	7.8	30	Yes	2616
1/23/2023 9:28	1.2	88	101	8	7.8	31	Yes	2621
1/24/2023 9:04	1.0	90	91	7	7.8	30	Yes	2609
1/25/2023 8:00	1.1	90	94	7	7.8	32	Yes	2617
1/26/2023 7:25	1.2	87	103	7	7.8	33	Yes	2636
1/27/2023 6:39	1.2	88	106	7	7.8	32	Yes	2577
1/28/2023 6:27	1.2	87	106	7	7.8	32	Yes	2672
1/29/2023 5:40	1.2	87	105	7	7.8	32	Yes	2603
1/30/2023 5:53	1.2	89	104	6	7.8	34	Yes	2616
1/31/2023 20:12	1.2	87	100	6	7.9	36	Yes	2619

<sup>3</sup> If Cl<sub>2</sub> 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

