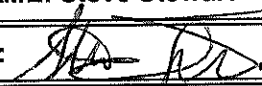


**OHA - Drinking Water Program - Surface Water Quality Data Form**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

County: **Lincoln**  
 Month/Year: **Apr-23**  
 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 <sup>1</sup> [NTU]	
1	P/O	P/O	0.013	0.013	P/O	P/O	0.015	
2	P/O	P/O	0.015	0.012	0.012	P/O	0.022	
3	P/O	P/O	P/O	0.014	0.012	0.012	0.018	
4	P/O	P/O	P/O	0.013	0.012	0.012	0.022	
5	P/O	P/O	P/O	0.013	0.012	0.012	0.019	
6	P/O	P/O	P/O	0.016	0.013	0.012	0.016	
7	P/O	P/O	P/O	0.013	0.012	P/O	0.017	
8	P/O	P/O	P/O	0.012	0.013	P/O	0.016	
9	P/O	P/O	P/O	0.015	0.012	P/O	0.015	
10	P/O	P/O	P/O	0.014	0.012	P/O	0.018	
11	P/O	0.012	0.012	P/O	P/O	0.012	0.017	
12	0.012	P/O	P/O	0.015	0.012	P/O	0.015	
13	P/O	P/O	P/O	0.017	0.012	0.012	0.017	
14	P/O	P/O	P/O	0.013	0.012	P/O	0.029	
15	P/O	P/O	P/O	0.017	0.012	0.012	0.018	
16	P/O	P/O	P/O	0.013	0.012	P/O	0.017	
17	P/O	P/O	P/O	0.012	0.012	P/O	0.026	
18	P/O	P/O	P/O	0.012	0.012	P/O	0.024	
19	P/O	P/O	P/O	0.014	0.012	P/O	0.016	
20	P/O	P/O	P/O	0.014	0.012	P/O	0.030	
21	P/O	P/O	P/O	0.012	0.012	P/O	0.018	
22	P/O	P/O	P/O	0.013	0.012	P/O	0.023	
23	P/O	P/O	P/O	0.012	0.012	0.012	0.013	
24	P/O	P/O	P/O	0.014	0.012	0.012	0.018	
25	P/O	P/O	P/O	0.013	0.012	P/O	0.020	
26	P/O	P/O	0.014	0.012	0.012	P/O	0.017	
27	P/O	0.013	0.014	P/O	P/O	0.012	0.016	
28	0.012	P/O	P/O	0.012	0.012	0.012	0.017	
29	P/O	P/O	P/O	0.012	0.012	0.012	0.037	
30	P/O	P/O	P/O	0.014	0.012	P/O	0.025	

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings $\leq$ 1 NTU? <sup>2</sup>	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday?	All Cl <sub>2</sub> residual at entry point $\geq$ 0.2 mg/l?
All daily turbidity readings $\leq$ 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
<b>Notes: P/O = PLANT OFF</b>		<b>PRINTED NAME: Steve Stewart</b>	
		<b>SIGNATURE:</b> 	<b>DATE: 5/1/2023</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: Apr-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]	C X T	[° C]		formula	Yes / No	[GPM]
4/1/2023 6:17	1.1	83	92	9	7.8	28	Yes	2639
4/2/2023 6:19	1.1	85	93	9	7.8	28	Yes	2641
4/3/2023 9:28	1.1	85	92	8	7.8	29	Yes	2652
4/4/2023 10:13	1.1	86	93	9	7.8	28	Yes	2622
4/5/2023 8:49	1.1	85	91	9	7.8	28	Yes	2632
4/6/2023 9:49	1.1	87	96	9	8.0	29	Yes	2575
4/7/2023 8:50	1.1	85	93	9	8.0	29	Yes	2634
4/8/2023 8:48	1.1	85	94	10	7.9	28	Yes	2633
4/9/2023 8:27	0.9	88	83	10	7.8	26	Yes	2638
4/10/2023 8:33	0.9	86	81	10	7.8	26	Yes	2634
4/11/2023 15:51	1.0	87	84	9	7.8	26	Yes	2585
4/12/2023 10:08	1.0	88	89	9	7.8	26	Yes	2578
4/13/2023 9:40	1.1	85	90	9	7.8	27	Yes	2626
4/14/2023 8:59	1.0	85	88	9	7.8	27	Yes	2639
4/15/2023 8:20	0.9	89	83	10	7.8	25	Yes	2626
4/16/2023 8:45	1.0	88	84	10	7.8	25	Yes	2629
4/17/2023 8:33	0.9	88	82	10	7.8	25	Yes	2636
4/18/2023 8:28	0.9	87	80	10	7.8	26	Yes	2576
4/19/2023 9:18	1.0	85	89	9	7.8	27	Yes	2628
4/20/2023 8:43	1.0	85	84	10	7.9	26	Yes	2633
4/21/2023 8:38	0.9	87	78	10	7.8	26	Yes	2629
4/22/2023 7:59	0.9	87	76	10	7.8	25	Yes	2633
4/23/2023 10:23	1.0	86	85	10	7.9	26	Yes	2638
4/24/2023 10:48	1.0	88	90	10	7.9	26	Yes	2569
4/25/2023 9:18	1.0	86	86	11	7.9	25	Yes	2635
4/26/2023 7:28	1.0	83	81	11	7.9	25	Yes	2642
4/27/2023 16:01	0.8	88	74	11	7.8	23	Yes	2575
4/28/2023 10:53	1.0	88	84	12	7.8	23	Yes	2580
4/29/2023 9:12	1.0	86	85	12	7.9	23	Yes	2620
4/30/2023 9:15	1.0	86	84	13	7.9	22	Yes	2632

<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