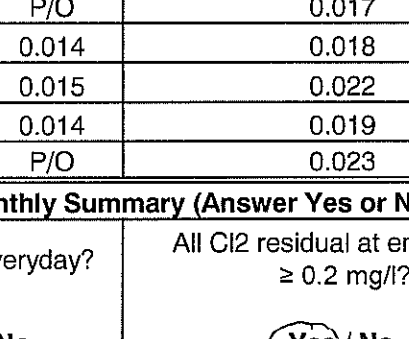


OHA - Drinking Water Program - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: Lincoln
Month/Year: May-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 ¹ [NTU]	
1	P/O	P/O	P/O	0.013	0.013	0.013	0.016	
2	P/O	P/O	P/O	0.013	0.013	P/O	0.024	
3	P/O	P/O	0.015	0.013	0.012	P/O	0.034	
4	P/O	P/O	0.013	0.017	P/O	0.015	0.037	
5	P/O	P/O	P/O	0.014	0.015	0.014	0.020	
6	P/O	P/O	P/O	0.015	0.015	0.014	0.024	
7	P/O	P/O	P/O	0.015	0.014	0.014	0.041	
8	P/O	P/O	P/O	0.014	0.014	0.014	0.018	
9	P/O	P/O	P/O	0.021	0.014	0.015	0.021	
10	P/O	P/O	P/O	0.015	0.014	0.015	0.037	
11	P/O	P/O	P/O	0.014	0.014	0.014	0.022	
12	P/O	P/O	0.019	0.015	0.014	0.014	0.027	
13	P/O	P/O	P/O	0.014	0.016	0.016	0.032	
14	0.015	P/O	P/O	0.017	0.014	0.015	0.031	
15	0.014	P/O	0.015	0.018	0.016	P/O	0.028	
16	P/O	0.015	0.019	P/O	0.014	0.014	0.020	
17	0.014	P/O	P/O	0.015	0.015	0.014	0.047	
18	0.014	P/O	P/O	0.014	0.014	0.014	0.017	
19	P/O	0.014	0.015	0.014	0.014	P/O	0.023	
20	P/O	P/O	0.014	0.014	0.015	P/O	0.043	
21	P/O	P/O	0.017	0.017	0.026	0.017	0.081	
22	P/O	P/O	0.017	0.019	0.017	P/O	0.034	
23	P/O	0.015	0.015	P/O	P/O	0.014	0.041	
24	0.016	P/O	P/O	0.017	0.014	0.014	0.035	
25	P/O	P/O	P/O	0.014	0.014	0.014	0.016	
26	P/O	P/O	0.014	0.014	0.014	P/O	0.017	
27	P/O	P/O	0.014	0.014	0.015	P/O	0.017	
28	P/O	P/O	0.014	0.016	0.014	0.014	0.018	
29	P/O	P/O	P/O	0.014	0.014	0.015	0.022	
30	P/O	P/O	P/O	0.014	0.014	0.014	0.019	
31	P/O	P/O	0.023	0.014	0.014	P/O	0.023	

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: 6/1/2023
	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 readings¹ 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: May-23

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]
5/1/2023 10:08	1.1	85	91	13	7.8	21	Yes	2629
5/2/2023 8:13	1.0	86	90	13	7.8	21	Yes	2638
5/3/2023 7:23	1.1	90	98	13	7.8	21	Yes	2503
5/4/2023 4:25	1.1	87	98	13	7.7	20	Yes	2630
5/5/2023 11:19	0.9	86	80	13	7.7	20	Yes	2641
5/6/2023 10:44	0.9	86	79	13	7.7	20	Yes	2635
5/7/2023 9:05	0.9	88	77	13	7.8	20	Yes	2628
5/8/2023 8:00	0.9	87	80	13	7.8	20	Yes	2580
5/9/2023 9:50	1.1	86	91	13	7.8	20	Yes	2623
5/10/2023 10:53	1.1	89	96	13	7.8	21	Yes	2633
5/11/2023 9:43	1.1	86	91	14	7.8	20	Yes	2637
5/12/2023 7:03	1.1	84	90	14	7.8	20	Yes	2642
5/13/2023 7:50	0.9	87	80	14	7.9	20	Yes	2642
5/14/2023 8:05	1.0	87	84	15	7.9	19	Yes	2559
5/15/2023 8:06	1.0	86	85	15	7.9	19	Yes	2627
5/16/2023 13:23	0.9	86	74	15	7.9	18	Yes	2622
5/17/2023 9:37	1.1	85	97	16	7.9	18	Yes	2628
5/18/2023 7:46	0.9	88	81	16	7.7	16	Yes	2633
5/19/2023 3:38	1.2	85	100	17	7.7	16	Yes	2583
5/20/2023 7:43	1.1	87	92	17	7.7	16	Yes	2632
5/21/2023 8:01	1.0	87	89	17	7.7	16	Yes	2640
5/22/2023 8:38	1.0	84	86	17	7.8	16	Yes	2630
5/23/2023 18:24	0.8	82	65	17	7.8	16	Yes	2644
5/24/2023 11:00	0.9	86	80	17	9.2	26	Yes	2614
5/25/2023 9:00	1.0	86	87	17	9.2	27	Yes	2616
5/26/2023 4:16	1.1	85	98	17	9.1	25	Yes	2644
5/27/2023 6:21	1.1	86	98	17	8.7	22	Yes	2633
5/28/2023 7:13	1.1	83	95	17	8.2	19	Yes	2637
5/29/2023 8:56	1.1	87	96	17	8.1	19	Yes	2642
5/30/2023 8:07	0.9	86	74	17	8.1	18	Yes	2644
5/31/2023 7:38	0.9	85	77	17	8.1	17	Yes	2629

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