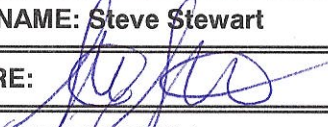


OHA - Drinking Water Program - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Lincoln**
 Month/Year: **Feb-24**
 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	0.017	0.018	0.014	P/O	0.019	
2	P/O	0.017	0.015	P/O	0.013	0.013	0.022	
3	P/O	P/O	P/O	0.021	0.015	0.014	0.025	
4	P/O	P/O	0.015	0.014	0.014	P/O	0.023	
5	P/O	P/O	0.014	0.014	0.014	P/O	0.016	
6	P/O	P/O	0.014	0.015	0.013	P/O	0.016	
7	P/O	P/O	0.015	0.014	0.014	0.013	0.024	
8	P/O	P/O	0.014	0.015	0.014	0.013	0.021	
9	P/O	P/O	P/O	0.014	0.014	P/O	0.021	
10	P/O	P/O	0.015	0.014	0.014	P/O	0.020	
11	P/O	P/O	0.014	0.014	0.014	P/O	0.022	
12	P/O	P/O	0.015	0.016	0.015	P/O	0.019	
13	P/O	P/O	0.014	0.023	0.013	P/O	0.027	
14	P/O	P/O	P/O	0.020	0.014	P/O	0.020	
15	P/O	P/O	P/O	0.014	0.015	P/O	0.024	
16	P/O	P/O	P/O	0.016	0.015	P/O	0.019	
17	P/O	P/O	P/O	0.014	0.016	0.015	0.018	
18	P/O	P/O	P/O	0.017	0.015	P/O	0.022	
19	P/O	P/O	0.015	0.014	0.015	P/O	0.022	
20	P/O	P/O	0.014	0.017	0.015	P/O	0.020	
21	P/O	P/O	0.016	0.015	0.014	P/O	0.019	
22	P/O	P/O	0.015	0.015	0.016	P/O	0.021	
23	P/O	P/O	0.015	0.014	0.015	P/O	0.020	
24	P/O	P/O	0.017	0.015	0.016	P/O	0.020	
25	P/O	P/O	0.014	0.016	0.014	P/O	0.019	
26	P/O	P/O	P/O	0.016	P/O	P/O	0.021	
27	0.014	0.016	P/O	0.022	0.017	0.016	0.035	
28	P/O	P/O	P/O	0.016	0.016	0.015	0.032	
29	P/O	P/O	0.015	P/O	0.016	P/O	0.020	

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: 	3/1/2024
	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: Feb-24

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]
2/1/2024 8:53	1.1	88	98	10	7.6	24	Yes	2624
2/2/2024 14:23	1.1	90	103	10	7.6	24	Yes	2605
2/3/2024 8:30	1.1	86	95	10	7.6	25	Yes	2662
2/4/2024 7:40	1.1	91	97	9	7.7	26	Yes	2612
2/5/2024 7:21	1.1	88	96	9	7.7	26	Yes	2602
2/6/2024 7:31	1.1	78	85	9	7.7	26	Yes	2878
2/7/2024 5:10	1.1	88	97	9	7.8	27	Yes	2553
2/8/2024 7:26	1.1	90	99	9	7.9	28	Yes	2611
2/9/2024 7:51	1.0	87	90	9	7.9	28	Yes	2615
2/10/2024 7:08	1.0	87	89	9	7.9	28	Yes	2604
2/11/2024 7:28	1.0	88	84	9	7.9	27	Yes	2591
2/12/2024 6:46	1.0	90	93	9	7.9	27	Yes	2609
2/13/2024 7:27	1.1	88	94	9	7.9	28	Yes	2548
2/14/2024 7:55	1.0	89	90	9	8.0	29	Yes	2594
2/15/2024 12:55	1.0	88	86	9	7.9	28	Yes	2617
2/16/2024 7:57	0.9	90	80	9	7.9	29	Yes	2606
2/17/2024 8:41	0.9	88	80	9	7.9	29	Yes	2604
2/18/2024 8:37	0.9	90	82	9	8.0	29	Yes	2609
2/19/2024 5:37	1.0	88	87	9	8.0	29	Yes	2556
2/20/2024 6:52	1.0	89	89	9	7.9	28	Yes	2617
2/21/2024 9:37	1.0	90	90	9	7.9	28	Yes	2546
2/22/2024 10:43	1.0	87	90	9	7.9	28	Yes	2622
2/23/2024 6:51	0.9	87	80	9	7.9	27	Yes	2601
2/24/2024 5:05	1.0	85	88	9	7.9	28	Yes	2609
2/25/2024 7:05	1.0	88	87	10	7.9	28	Yes	2603
2/26/2024 23:47	1.0	90	94	9	7.8	27	Yes	2560
2/27/2024 11:42	1.0	91	93	9	7.8	27	Yes	2553
2/28/2024 11:30	0.9	87	74	9	7.9	27	Yes	2603
2/29/2024 13:32	1.0	92	93	9	7.8	28	Yes	2550

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