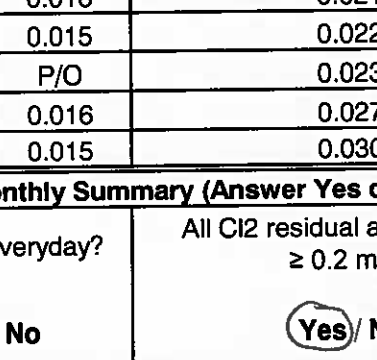


OHA - Drinking Water Program - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Lincoln**
 Month/Year: **Jul-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	0.015	P/O	P/O	0.014	0.014	0.014	0.020
2	0.014	P/O	P/O	0.016	0.015	0.015	0.019
3	P/O	P/O	0.015	0.014	0.015	0.015	0.017
4	0.015	P/O	P/O	0.016	0.015	0.015	0.018
5	0.015	P/O	P/O	0.015	0.014	0.014	0.026
6	0.014	P/O	P/O	0.014	0.014	0.014	0.022
7	0.014	0.014	0.014	0.015	P/O	P/O	0.022
8	0.014	0.014	0.014	0.014	0.015	0.014	0.019
9	P/O	P/O	P/O	0.014	0.014	0.014	0.034
10	0.014	0.014	P/O	0.014	0.015	0.014	0.018
11	P/O	P/O	0.014	0.016	0.014	0.014	0.023
12	P/O	P/O	P/O	0.014	0.014	0.014	0.023
13	0.015	P/O	P/O	0.014	0.015	0.015	0.018
14	P/O	P/O	0.014	0.014	0.014	0.014	0.021
15	P/O	0.016	0.015	P/O	0.014	0.015	0.022
16	0.016	P/O	0.021	0.015	0.015	0.015	0.021
17	P/O	P/O	0.015	P/O	0.014	0.015	0.019
18	0.015	P/O	0.017	0.014	0.015	0.015	0.021
19	P/O	P/O	0.018	0.014	0.014	0.014	0.021
20	0.015	0.015	P/O	0.015	0.015	0.015	0.019
21	0.015	P/O	P/O	0.015	0.015	0.015	0.021
22	P/O	P/O	P/O	0.015	0.016	0.015	0.022
23	0.016	P/O	0.026	0.018	0.017	0.021	0.030
24	0.017	P/O	P/O	0.015	0.018	0.017	0.027
25	P/O	P/O	P/O	0.016	0.018	0.020	0.020
26	0.015	P/O	0.018	0.015	0.016	0.016	0.026
27	0.016	P/O	0.021	0.015	0.016	0.016	0.021
28	P/O	P/O	P/O	0.015	0.015	0.015	0.022
29	P/O	P/O	0.016	0.015	0.015	P/O	0.023
30	P/O	P/O	0.016	0.015	0.015	0.016	0.027
31	P/O	P/O	0.016	0.015	0.015	0.015	0.030

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: 8/5/2024
		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

Disinfection
Giardia Log

System Name: NEWPORT, CITY OF

ID#: 41-00566

Month/Year: Jul-24

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]
7/1/2024 8:54	0.7	88	63	20	7.8	13	Yes	2597
7/2/2024 10:14	1.0	86	89	20	7.9	14	Yes	2598
7/3/2024 6:48	1.0	88	88	20	7.8	13	Yes	2596
7/4/2024 10:42	1.0	87	84	20	7.8	13	Yes	2607
7/5/2024 10:02	1.1	87	93	20	7.6	12	Yes	2587
7/6/2024 9:01	0.7	92	62	21	7.6	11	Yes	2493
7/7/2024 23:02	1.0	89	93	21	7.5	11	Yes	2611
7/8/2024 2:56	1.0	90	91	21	7.9	13	Yes	2597
7/9/2024 8:36	1.0	86	86	20	7.9	13	Yes	2594
7/10/2024 9:50	0.8	90	71	20	7.9	13	Yes	2611
7/11/2024 6:32	1.1	88	93	20	8.1	15	Yes	2597
7/12/2024 8:52	0.8	88	70	20	8.2	15	Yes	2594
7/13/2024 8:46	0.8	86	71	20	8.2	15	Yes	2597
7/14/2024 5:08	1.1	83	90	20	8.1	15	Yes	2607
7/15/2024 2:43	1.1	89	97	20	8.2	16	Yes	2594
7/16/2024 7:41	0.8	88	75	20	8.2	15	Yes	2596
7/17/2024 6:03	1.0	88	86	20	8.1	15	Yes	2589
7/18/2024 7:21	0.9	84	77	20	8.1	14	Yes	2612
7/19/2024 7:40	0.7	88	63	20	7.9	13	Yes	2607
7/20/2024 10:45	0.7	87	63	20	7.9	13	Yes	2600
7/21/2024 10:03	1.2	88	104	20	7.8	13	Yes	2607
7/22/2024 7:58	0.8	87	70	20	7.9	14	Yes	2600
7/23/2024 7:43	1.1	87	91	20	8.0	14	Yes	2578
7/24/2024 9:32	1.2	86	100	20	8.1	15	Yes	2586
7/25/2024 8:20	0.8	90	69	20	8.1	15	Yes	2498
7/26/2024 7:12	0.7	85	57	20	8.2	15	Yes	2600
7/27/2024 7:31	0.6	87	54	20	8.2	15	Yes	2608
7/28/2024 8:01	1.1	86	96	20	8.2	15	Yes	2592
7/29/2024 5:09	1.2	84	100	20	8.1	15	Yes	2608
7/30/2024 7:14	1.1	87	93	20	8.0	15	Yes	2547
7/31/2024 7:57	1.1	88	92	20	8.0	14	Yes	2548

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

