

OHA - Drinking Water Program - Turbidity Monitoring Report Form

Conventional

County:

Douglas

Month/Year:

Aug-25

System Name:

Oakland, City of

ID#: 41-00581

WTP: TP -

41-00581

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	0.03	0.03	0.03	0.03	0.03	0.03	0.03
2	0.03	0.03	0.03	0.03	0.03	0.03	0.03
3	0.03	0.03	0.03	0.03	0.03	0.03	0.03
4	0.03	0.03	0.03	0.03	0.03	0.03	0.03
5	0.03	0.03	0.03	0.03	0.03	0.03	0.03
6	0.03	0.03	0.03	0.03	0.03	0.03	0.03
7	0.03	0.03	0.03	0.03	0.03	0.03	0.03
8	0.03	0.03	0.03	0.03	0.03	0.03	0.03
9	0.03	0.03	0.03	0.03	0.03	0.03	0.03
10	0.03	0.03	0.03	0.03	0.03	0.03	0.03
11	0.03	0.03	0.03	0.03	0.03	0.03	0.03
12	0.03	0.03	0.03	0.03	0.03	0.03	0.03
13	0.03	0.03	0.03	0.03	0.03	0.03	0.03
14	0.03	0.03	0.03	0.03	0.03	0.03	0.03
15	0.03	0.03	0.03	0.03	0.03	0.03	0.03
16	0.03	0.03	0.03	0.03	0.03	0.03	0.03
17	0.03	0.03	0.03	0.03	0.03	0.03	0.03
18	0.03	0.03	0.03	0.03	0.03	0.03	0.03
19	0.03	0.03	0.03	0.03	0.03	0.03	0.03
20	0.03	0.03	0.03	0.03	0.03	0.03	0.03
21	0.03	0.03	0.03	0.03	0.03	0.03	0.03
22	0.03	0.03	0.03	0.03	0.03	0.03	0.03
23	0.03	0.03	0.03	0.03	0.03	0.03	0.03
24	0.03	0.03	0.03	0.03	0.03	0.03	0.03
25	0.03	0.03	0.03	0.03	0.03	0.03	0.03
26	0.03	0.03	0.03	0.03	0.03	0.03	0.03
27	0.03	0.03	0.03	0.03	0.03	0.03	0.03
28	0.03	0.03	0.03	0.03	0.03	0.03	0.03
29	0.03	0.03	0.03	0.03	0.03	0.03	0.03
30	0.03	0.03	0.03	0.03	0.03	0.03	0.03
31	0.03	0.03	0.03	0.03	0.03	0.03	0.03

Conventional

Monthly Summary (Answer Yes or No)

95% of 4-hour turbidity readings $\leq$ 0.3 NTU?☒ Yes / ☐ NoAll 4-hour turbidity readings $\leq$ 1 NTU?☒ Yes / ☐ No

All turbidity readings < IFE2 triggers

☒ Yes / ☐ NoCT's met everyday?
(see back)☒ Yes / ☐ NoAll Cl₂ residual at entry point
 $\geq$ 0.2 mg/l?☒ Yes / ☐ No

NOTES: NTU remained between 0.01-0.1 NTU. Stain on optics present. CT is close at temperatures of 110 F

Late: sent to old OHA email "sorry"

PRINTED NAME: JAMES M. HART

PRINTED NAME: JAMES M. HART

9/10/2025

PHONE #: (541) 580-6617

C#: T08699-FE



OHA - Drinking Water Program - Surface Water Quality Data Form							WTP - :	DOUGLAS
System Name:	Oakland, City of		41-00581		Month/Year:	Aug-25	Disinfection Giardia Log Inactive:	1
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			formula		[GPM]
1	1.81	167	302	31	7.00	10.0	yes	320
2	1.82	167	304	32	7.00	9.4	yes	320
3	1.79	167	299	33	7.00	8.7	yes	320
4	1.80	167	301	33	7.00	8.7	yes	320
5	1.82	167	304	32	7.00	9.4	yes	320
6	1.83	167	306	33	7.00	8.7	yes	320
7	1.81	167	302	34	7.00	8.1	yes	320
8	1.81	167	302	34	7.00	8.1	yes	320
9	1.82	167	304	34	7.00	8.1	yes	320
10	1.65	167	276	32	7.00	9.2	yes	320
11	1.51	167	252	31	7.00	9.7	yes	320
12	1.51	167	252	30	7.00	10.4	yes	320
13	1.53	167	256	30	7.00	10.4	yes	320
14	1.52	167	254	32	7.00	9.0	yes	320
15	1.54	167	257	34	7.00	7.8	yes	320
16	1.53	167	256	36	7.00	6.8	yes	320
17	1.53	167	256	38	7.00	5.9	yes	320
18	1.54	167	257	40	7.00	5.0	yes	320
19	1.54	167	257	42	7.00	4.3	yes	320
20	1.54	167	257	43	7.00	4.0	yes	320
21	1.53	167	256	42	7.00	4.3	yes	320
22	1.50	167	251	39	7.00	5.4	yes	320
23	1.48	167	247	38	7.00	5.8	yes	320
24	1.50	167	251	37	7.00	6.3	yes	320
25	1.48	167	247	38	7.00	5.8	yes	320
26	1.50	167	251	39	7.00	5.4	yes	320
27	1.51	167	252	40	7.00	5.0	yes	320
28	1.51	167	252	41	7.00	4.7	yes	320
29	1.49	167	249	42	7.00	4.3	yes	320
30	1.50	167	251	42	7.00	4.3	yes	320
31	1.49	167	249	42	7.00	4.3	yes	320

3 If Cl₂ at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.

Revised February 2012

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