

**OHA - Drinking Water Services -Turbidity Monitoring Report Form**

County: **Malheur**  
 Month/Year: **10/21**

**Conventional or Direct Filtration**

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	0.11	0.11	0.11	0.11	0.12	0.10	0.12
2	0.10	0.09	0.11	0.11	0.19	0.19	0.19
3	0.17	0.16	0.15	0.17	0.14	0.12	0.17
4	0.12	0.10	0.10	0.13	0.12	0.11	0.13
5	0.11	0.10	0.09	0.08	0.08	0.07	0.11
6	0.07	0.07	0.07	0.11	0.09	0.08	0.11
7	0.08	0.08	0.08	0.15	0.11	0.10	0.15
8	0.10	0.09	0.09	0.09	0.11	0.11	0.11
9	0.11	0.11	0.11	0.11	0.10	0.10	0.11
10	0.10	0.10	0.28	0.11	0.11	0.11	0.28
11	0.12	0.12	0.12	0.13	0.14	0.11	0.14
12	0.10	0.09	0.09	0.08	0.08	0.08	0.10
13	0.08	0.08	0.07	0.07	0.07	0.07	0.08
14	0.09	0.10	0.11	0.09	0.08	0.08	0.11
15	0.08	0.07	0.07	0.06	0.06	0.06	0.08
16	0.06	0.06	0.06	0.06	0.08	0.10	0.10
17	0.10	0.12	0.12	0.15	0.15	0.09	0.15
18	0.08	0.08	0.08	0.07	0.07	0.07	0.08
19	0.06	0.06	0.06	0.06	0.06	0.14	0.14
20	0.07	0.06	0.06	0.07	0.08	0.08	0.08
21	0.08	0.08	0.08	0.08	0.06	0.06	0.08
22	0.05	0.05	0.05	0.05	0.05	0.05	0.05
23	0.05	0.05	0.07	0.13	0.10	0.09	0.13
24	0.08	0.08	0.08	0.08	0.07	0.07	0.08
25	0.07	0.07	0.07	0.06	0.09	0.10	0.10
26	0.14	0.15	0.16	0.10	0.08	0.08	0.16
27	0.10	0.07	0.07	0.07	0.06	0.06	0.10
28	0.06	0.06	Plant off	0.07	0.12	0.09	0.12
29	0.09	0.08	0.08	0.08	0.08	0.08	0.09
30	0.07	0.07	0.07	0.07	0.07	0.07	0.07
31	Plant off	Plant off	0.09	0.11	0.12	0.12	0.12

<b>Conventional or Direct Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 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
All turbidity readings < IFE <sup>2</sup> triggers	<input checked="" type="radio"/> Yes <input type="radio"/> No		

<b>Notes:</b>	<b>PRINTED NAME: Robert Crites</b>	
	<b>SIGNATURE:</b> <i>Robert Crites</i>	<b>4-Oct-21</b>
	<b>PHONE #: ( 541 )889-8011</b>	<b>#: T629575</b>

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may correspond to continuous readings' maximum. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

System Name: City of Ontario Water System ID#: 4100587

Month/Year: Oct-21

Disinfection *Giardia*  
Log Inactiv:

0.5

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sub>3</sub>	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]
1/1115	0.95	131.6	125.0	17.3	7.98	16.7	Yes	2408
2/0953	1.24	107.2	132.9	17.1	7.88	16.9	Yes	3143
3/1039	0.84	64.4	54.1	17.4	7.94	16.1	Yes	4432
4/1023	0.92	61.8	56.8	17.9	7.99	16.1	Yes	4512
5/0820	1.11	58.3	64.7	17.2	7.78	15.9	Yes	4616
6/1120	1.04	58.5	60.8	17.9	7.88	15.6	Yes	4610
7/1040	1.27	23.6	30.0	17.8	7.88	16.1	Yes	5660
8/1025	1.16	53.9	62.6	17.7	8.00	16.8	Yes	4747
9/1306	1.11	104.3	115.8	17.2	7.92	16.7	Yes	3229
10/1254	1.19	56.5	67.2	16.8	7.95	17.5	Yes	4670
11/1127	1.29	60.3	77.8	16.8	7.91	17.5	Yes	4556
12/0939	1.05	119.0	124.9	14.6	7.79	18.8	Yes	2788
13/0958	1.18	32.2	38.0	14.5	7.83	19.5	Yes	5403
14/0905	0.97	52.2	50.6	15.4	7.43	15.5	Yes	4801
15/0950	1.02	51.7	52.7	14.7	7.88	19.3	Yes	4816
16/0948	1.02	107.0	109.1	15.3	7.76	17.7	Yes	3149
17/1152	1.12	109.0	122.1	17.0	7.88	16.7	Yes	3089
18/1259	1.16	59.3	68.8	15.3	7.72	17.8	Yes	4586
19/1157	1.07	59.2	63.3	16.2	7.79	17.0	Yes	4590
20/1234	1.13	34.9	39.5	16.3	7.80	17.0	Yes	5320
21/1102	0.84	136.4	114.6	17.0	7.76	15.5	Yes	2264
22/1255	1.03	145.2	149.5	16.3	7.81	16.9	Yes	2000
23/1047	0.9	72.5	65.3	15.4	7.87	18.1	Yes	4187
24/0932	0.83	174.4	144.8	15.2	7.71	17.1	Yes	1118
25/1015	0.87	170.5	148.4	15.5	7.81	17.5	Yes	1235
26/1122	0.86	63.7	54.8	15.7	7.79	17.1	Yes	4453
27/1127	1.04	59.8	62.2	14.8	7.81	18.7	Yes	4570
28/1243	0.88	50.7	44.6	15.8	7.76	16.9	Yes	4845
29/1211	0.94	60.4	56.8	16.0	8.05	18.7	Yes	4553
30/1237	0.94	80.2	75.4	16.6	7.87	16.8	Yes	3956
31/1314	1.01	63.4	64.0	15.7	7.83	17.7	Yes	4463

<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 October 2013