

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Malheur**

Conventional or Direct Filtration

Month/Year: **Jan 22**

System Name: **City of Ontario** ID#: **4100587** WTP : **TP - Old Plant**

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	0.05	0.06	0.05	0.07	0.15	0.06	0.15
2	0.05	0.05	0.05	0.06	0.07	0.05	0.07
3	0.06	0.05	0.05	0.04	0.05	0.05	0.06
4	0.06	0.05	0.05	plant off	plant off	0.07	0.07
5	0.06	0.04	0.04	0.04	0.04	0.04	0.06
6	0.04	plant off	0.07	0.06	0.07	0.06	0.07
7	0.05	plant off	0.06	0.06	0.06	0.07	0.07
8	0.06	0.06	0.06	0.06	0.05	0.06	0.06
9	0.06	0.06	0.06	0.06	0.06	0.07	0.07
10	0.09	0.08	0.09	0.10	0.08	0.10	0.10
11	0.06	0.08	0.11	0.07	0.05	0.05	0.11
12	0.05	0.06	0.05	0.05	0.05	0.07	0.07
13	plant off	plant off	plant off	0.05	0.06	0.05	0.06
14	0.05	0.04	0.04	0.04	0.07	0.05	0.07
15	0.05	0.04	0.04	0.04	0.04	0.05	0.05
16	0.04	0.05	0.04	0.04	0.05	0.05	0.05
17	0.05	0.06	0.05	0.06	0.06	0.06	0.06
18	0.05	0.05	0.04	0.05	0.05	0.05	0.05
19	0.05	0.05	0.06	0.06	0.07	0.07	0.07
20	0.09	0.08	0.09	0.06	0.06	0.07	0.09
21	0.08	0.08	0.09	0.08	0.06	0.05	0.09
22	0.05	0.05	0.05	0.05	0.06	0.06	0.06
23	0.05	0.05	0.06	0.07	0.06	0.05	0.07
24	0.07	0.10	0.08	0.07	0.05	0.05	0.10
25	0.05	0.05	0.05	0.06	0.07	0.11	0.11
26	0.08	0.10	0.12	0.06	0.20	0.08	0.20
27	0.09	0.08	0.10	0.08	0.18	0.08	0.18
28	0.10	0.14	0.16	0.09	0.06	0.05	0.16
29	0.04	0.04	0.04	0.04	0.04	0.04	0.04
30	0.04	0.04	0.06	0.07	0.08	0.08	0.08
31	0.11	0.11	0.13	0.15	0.07	0.08	0.15

Conventional or Direct Filtration			Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> 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="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
All turbidity readings < IFE ² triggers	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No			

Notes:	PRINTED NAME: Casey Mordhorst/Robert Crites	
	SIGNATURE: <i>[Signature]</i>	DATE: 1-21
	PHONE #: (541)889-8011	CERT #: 629575

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not

System Name: City of Ontario Water System ID#: 4100587	Month/Year: Jan-22	Disinfection <i>Giardia</i> Log Inactiv: 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]
1/1302	1.06	135.2	143.3	7.2	7.80	31.1	Yes	2300
2/1239	0.89	139.1	123.8	7.2	7.76	30.1	Yes	2182
3/1111	0.98	120.8	118.4	7.8	7.72	28.7	Yes	2734
4/0948	1.03	134.4	138.4	7.6	7.62	28.3	Yes	2324
5/1044	1.27	86.3	109.6	8.5	7.63	27.4	Yes	3773
6/1041	0.99	83.8	83.0	8.7	7.81	28.0	Yes	3847
7/0934	0.94	120.3	113.0	13.8	7.77	19.5	Yes	2750
8/1256	1.22	78.6	95.9	11.1	7.96	25.8	Yes	4005
9/1216	1.12	74.2	83.1	11.0	7.94	25.5	Yes	4137
10/1032	1.03	74.7	77.0	9.3	7.86	27.5	Yes	4121
11/1218	1.15	72.3	83.1	8.5	7.84	29.2	Yes	4195
12/1145	1.12	92.3	103.4	10.2	7.79	25.5	Yes	3592
13/1126	1.03	124.3	128.0	10.2	7.88	26.0	Yes	2628
14/1025	0.85	81.7	69.4	13.8	7.84	19.8	Yes	3912
15/1013	1.21	76.2	92.2	9.5	7.92	28.3	Yes	4076
16/0902	1	74.3	74.3	8.7	7.84	28.3	Yes	4133
17/1203	1.03	87.2	89.8	8.7	7.71	27.1	Yes	3746
18/1409	1.16	85.3	99.0	10.3	7.83	25.8	Yes	3802
19/1015	0.95	63.3	60.2	8.2	7.79	28.6	Yes	4464
20/0945	0.9	161.1	145.0	11.9	7.64	21.1	Yes	1520
21/1052	0.86	160.3	137.8	8.2	7.68	27.2	Yes	1544
22/1026	1.13	83.3	94.2	9.1	7.92	28.8	Yes	3862
23/1339	1.04	132.6	137.9	9.2	7.55	24.8	Yes	2379
24/1142	1.1	68.3	75.1	10.5	7.92	26.1	Yes	4315
25/1239	0.84	67.3	56.5	8.7	7.90	28.4	Yes	4345
26/1150	0.97	67.6	65.5	10.5	7.88	25.4	Yes	4337
27/1302	1.12	94.1	105.4	8.4	7.99	30.9	Yes	3537
28/1152	1.11	100.0	111.0	10.9	7.91	25.4	Yes	3360
29/1140	1.07	97.8	104.7	10.1	7.96	27.1	Yes	3426
30/1247	1.03	82.8	85.3	8.2	8.03	31.5	Yes	3877
31/1142	1	83.7	83.7	8.5	7.97	30.1	Yes	3850

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.