

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

County: **Licolon**
 Month/Year: **Date: 5/31/2023**

System Name:	ID#: 41	00603	WTP : TP -				
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			0.00				0.00
2			0.00				0.00
3			0.00				0.00
4			0.00				0.00
5			0.00				0.00
6			0.00				0.00
7			0.00				0.00
8			0.00				0.00
9			0.00				0.00
10			0.00				0.00
11			0.00				0.00
12			0.00				0.00
13			0.00				0.00
14			0.00				0.00
15			0.00				0.00
16			0.00				0.00
17			0.00				0.00
18			0.00				0.00
19			0.00				0.00
20			0.00				0.00
21			0.00				0.00
22			0.00				0.00
23			0.00				0.00
24			0.00				0.00
25			0.00				0.00
26			0.00				0.00
27			0.00				0.00
28			0.00				0.00
29			0.00				0.00
30			0.00				0.00
31			0.00				0.00

<u>Slow Sand/Membrane/DE Filtration/Unfiltered</u>		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ²	<input checked="" type="radio"/> Yes / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> Yes / No
Notes:		PRINTED NAME: Martin Klinger	
		SIGNATURE: <i>Martin Klinger</i>	Date: 5/31/2023
		PHONE #: (541) 994-4548	CERT #:7152

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP - :

System Name: Panther Creek W D ID#: 41 00603 Month/Year: Date: 5/31/2023 Disinfection *Giardia* Log Inactiv: 1.0

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	1.51	82.6	124.7	12.0	7.07	34.0	YES	2.48
2	1.26	82.6	104.1	12.1	7.05	33.0	YES	2.66
3	1.25	82.6	103.3	12.1	7.02	33.0	YES	2.58
4	1.27	82.6	104.9	12.0	7.19	34.0	YES	2.17
5	1.77	82.6	146.2	12.1	6.88	35.0	YES	2.78
6	1.57	82.6	129.7	12.0	7.28	39.0	YES	2.38
7	0.94	82.6	77.6	12.1	7.11	33.0	YES	2.35
8	1.32	82.6	109.0	12.1	7.40	39.0	YES	2.99
9	1.28	82.6	105.7	12.0	7.30	37.0	YES	2.40
10	1.88	82.6	155.3	12.1	7.24	38.0	YES	3.17
11	1.60	82.6	132.2	12.0	7.24	36.0	YES	2.69
12	1.92	82.6	158.6	12.1	7.39	42.0	YES	3.40
13	1.62	82.6	133.8	12.0	7.38	41.0	YES	3.14
14	0.95	82.6	78.5	12.1	7.40	37.0	YES	4.15
15	1.13	82.6	93.3	12.1	7.21	35.0	YES	4.32
16	1.41	82.6	116.5	12.1	8.60	55.0	YES	3.44
17	0.91	82.6	75.2	12.0	8.51	55.0	YES	3.46
18	1.60	82.6	132.2	12.1	8.68	63.0	YES	3.38
19	1.42	82.6	117.3	12.0	9.20	71.0	YES	3.32
20	1.32	82.6	109.0	12.1	8.53	62.0	YES	3.56
21	0.87	82.6	71.9	12.0	8.60	57.0	YES	3.31
22	1.16	82.6	95.8	12.1	8.77	61.0	YES	3.08
23	1.38	82.6	114.0	12.0	9.05	69.0	YES	3.39
24	1.39	82.6	114.8	12.1	8.64	60.0	YES	3.21
25	1.65	82.6	136.3	12.0	8.67	63.0	YES	3.83
26	1.48	82.6	122.2	12.1	9.64	66.0	YES	3.25
27	1.34	82.6	110.7	12.0	8.53	62.0	YES	3.40
28	0.85	82.6	70.2	12.1	8.36	51.0	YES	2.85
29	1.23	82.6	101.6	12.0	8.46	56.0	YES	3.90
30	1.45	82.6	119.8	12.1	8.09	49.0	YES	4.33
31	1.56	82.6	128.9	12.1	8.41	58.0	YES	3.06

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

Revised November 2022

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350