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

County: Licolon
Month/Year: Date: 3/31/2024

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

Slow Sand/Membrane/DE Filtration/Unfiltered

95% of daily turbidity readings ≤ 1 NTU? [2] Yes No

All daily turbidity readings ≤ 5 NTU? Yes No

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back) Yes / No

All Cl2 residual at entry point ≥ 0.2 mg/l? Yes No

Notes:

PRINTED NAME: Martin Klinger

SIGNATURE: Martin Klinger Date: 3/31/2024

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: 3/31/2024 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	0.54	82.6	44.6	12.0	7.68	42.0	YES	4.07
2	0.47	82.6	38.8	12.1	7.61	38.0	YES	4.40
3	0.62	82.6	51.2	12.0	7.58	36.0	YES	4.38
4	0.68	82.6	56.2	12.1	7.62	39.0	YES	4.51
5	1.08	82.6	89.2	12.0	7.56	39.0	YES	4.40
6	1.14	82.6	94.2	12.1	7.65	41.0	YES	4.65
7	1.14	82.6	94.2	12.0	7.66	43.0	YES	5.11
8	1.14	82.6	94.2	12.1	7.17	43.0	YES	4.69
9	0.79	82.6	65.3	12.0	7.58	36.0	YES	5.06
10	0.71	82.6	58.6	12.1	7.67	39.0	YES	5.00
11	0.95	82.6	78.5	12.0	7.67	41.0	YES	5.00
12	0.73	82.6	60.3	12.1	7.68	39.0	YES	5.15
13	0.50	82.6	41.3	12.0	7.68	38.0	YES	5.74
14	0.98	82.6	80.9	12.1	7.65	42.0	YES	5.01
15	0.91	82.6	75.2	12.0	7.76	44.0	YES	4.46
16	0.51	82.6	42.1	12.1	7.69	40.0	YES	4.92
17	0.65	82.6	53.7	12.0	7.68	44.0	YES	4.72
18	0.85	82.6	70.2	12.1	7.74	40.0	YES	7.10
19	0.81	82.6	66.9	12.0	8.89	59.0	YES	6.67
20	0.81	82.6	66.9	12.1	9.00	61.0	YES	6.52
21	0.89	82.6	73.5	12.0	9.03	61.0	YES	5.67
22	0.90	82.6	74.3	12.1	8.95	61.0	YES	5.41
23	0.89	82.6	73.5	12.0	9.02	61.0	YES	5.76
24	1.38	82.6	114.0	12.1	9.08	61.0	YES	5.65
25	0.99	82.6	81.8	12.0	9.13	61.0	YES	6.61
26	1.13	82.6	93.3	12.1	9.09	61.0	YES	4.31
27	1.28	82.6	105.7	12.0	7.85	42.0	YES	7.01
28	1.12	82.6	92.5	12.1	9.33	65.0	YES	7.15
29	0.86	82.6	71.0	12.0	9.11	68.0	YES	0.31
30	1.05	82.6	86.7	12.1	8.85	59.0	YES	14.20
31	1.33	82.6	109.9	12.0	7.62	39.0	YES	7.42

[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