

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

County: Grant
 Month/Year: May-24

System Name: Prairie City		ID# 41	00673	WTP : TP - A			
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							0.08
2							0.04
3							0.03
4							0.06
5							0.06
6							0.06
7							0.06
8							0.06
9							0.05
10							0.05
11							0.04
12							0.05
13							0.05
14							0.06
15							0.60
16							0.08
17							0.08
18							0.03
19							0.03
20							0.03
21							0.02
22							0.02
23							0.05
24							0.03
25							0.06
26							0.05
27							0.06
28							0.06
29							0.05
30							0.05
31							0.05

<p>Slow Sand/Membrane/DE Filtration/Unfiltered</p> <p>95% of daily turbidity readings ≤ 1 NTU? ² Yes / No</p> <p>All daily turbidity readings ≤ 5 NTU? Yes / No</p>	<p>Monthly Summary (Answer Yes or No)</p> <p>CT's met everyday? (see back) Yes / No</p> <p>All Cl2 residual at entry point ≥ 0.2 mg/l? Yes / No</p>
<p>Notes:</p>	
<p>PRINTED NAME: Chris Camarena</p> <p>SIGNATURE: </p> <p>PHONE # (541)820-3636</p>	
<p>6/1/2024</p> <p>CERT # 08546</p>	

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- : A
 Disinfection *Giardia* Log Inactiv: 1.0

System Name: **Prairie City** ID# **41** 00673 Month/Year: **May-24**

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)+7	Actual CT	Temp	pH	Required CT	CT Met? ³	Plant Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.4	272	108.8	15.0	8.00	36.8	YES	183
2	0.5	265	132.5	15.0	8.00	37.3	YES	188
3	0.4	265	106.0	15.0	8.00	36.8	YES	188
4	0.4	259	103.6	15.0	8.00	36.8	YES	192
5	0.4	272	108.8	15.0	8.00	36.8	YES	183
6	0.4	272	108.8	15.0	8.00	36.8	YES	183
7	0.4	269	107.6	15.0	8.00	36.8	YES	185
8	0.4	269	107.6	15.0	8.00	36.8	YES	185
9	0.4	267	106.8	15.0	8.00	36.8	YES	186
10	0.4	262	104.8	15.0	8.00	36.8	YES	190
11	0.4	249	99.6	15.0	8.00	36.8	YES	200
12	0.4	257	102.8	15.0	8.00	36.8	YES	194
13	0.4	269	107.6	15.0	8.00	36.8	YES	185
14	0.4	252	100.8	15.0	8.00	36.8	YES	198
15	0.4	252	100.8	15.0	8.00	36.8	YES	198
16	0.4	250	100.0	15.0	8.00	36.8	YES	199
17	0.4	219	87.6	15.0	8.00	36.8	YES	228
18	0.4	213	85.2	15.0	8.00	36.8	YES	235
19	0.4	250	100.0	15.0	8.00	36.8	YES	199
20	0.4	270	108.0	15.0	8.00	36.8	YES	184
21	0.4	252	100.8	15.0	8.00	36.8	YES	198
22	0.4	246	98.4	15.0	8.00	36.8	YES	203
23	0.4	249	99.6	15.0	8.00	36.8	YES	200
24	0.4	267	106.8	15.0	8.00	36.8	YES	186
25	0.4	267	106.8	15.0	8.00	36.8	YES	186
26	0.4	314	125.6	15.0	8.00	36.8	YES	158
27	0.4	312	124.8	15.0	8.00	36.8	YES	159
28	0.4	316	126.4	15.0	8.00	36.8	YES	157
29	0.4	310	124.0	15.0	8.00	36.8	YES	160
30	0.4	301	120.4	15.0	8.00	36.8	YES	165
31	0.4	308	123.2	15.0	8.00	36.8	YES	161

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

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Return by 10th of following month by email, fax, or mail to:
 dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350