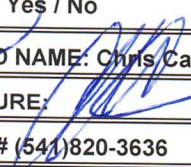


OHA - Drinking Water Services - Surface Water Quality Data Form  
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: Grant  
 Month/Year: Nov-24  
 WTP: TP - A

System Name: Prairie City ID# 41 00673

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							0.06
2							0.06
3							0.05
4							0.05
5							0.05
6							0.04
7							0.05
8							0.05
9							0.04
10							0.04
11							0.04
12							0.03
13							0.03
14							0.03
15							0.03
16							0.03
17							0.03
18							0.04
19							0.04
20							0.04
21							0.04
22							0.04
23							0.04
24							0.05
25							0.04
26							0.04
27							0.04
28							0.03
29							0.04
30							0.04
31							0.04

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>	Yes / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes / No	Yes / No	Yes / No
<b>Notes:</b>		PRINTED NAME: Chris Camarena	
		SIGNATURE: 	12/2/2024
		PHONE # (541)820-3636	CERT # 08546

<sup>1</sup> 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. <sup>2</sup> Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

System Name: <b>Prairie City</b>	ID# <b>41</b>	00673	Month/Year: <b>Nov-24</b>	WTP-: <b>A</b>	Disinfection <i>Giardia</i> Log Inactiv: <b>1.0</b>
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Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)+7	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Plant Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.4	301	120.4	20.0	8.00	26.4	YES	165
2	0.4	290	116.0	20.0	8.00	26.4	YES	171
3	0.4	289	115.6	20.0	8.00	26.4	YES	172
4	0.4	318	127.2	20.0	8.00	26.4	YES	156
5	0.4	301	120.4	20.0	8.00	26.4	YES	165
6	0.4	302	120.8	20.0	8.00	26.4	YES	164
7	0.4	301	120.4	20.0	8.00	26.4	YES	165
8	0.4	302	120.8	20.0	8.00	26.4	YES	164
9	0.4	301	120.4	20.0	8.00	26.4	YES	165
10	0.4	290	116.0	20.0	8.00	26.4	YES	171
11	0.4	318	127.2	20.0	8.00	26.4	YES	156
12	0.4	308	123.2	20.0	8.00	26.4	YES	161
13	0.4	302	120.8	20.0	8.00	26.4	YES	164
14	0.5	302	151.0	20.0	8.00	26.7	YES	164
15	0.5	310	155.0	20.0	8.00	26.7	YES	160
16	0.5	276	138.0	20.0	8.00	26.7	YES	180
17	0.5	287	143.5	20.0	8.00	26.7	YES	173
18	0.5	346	173.0	20.0	8.00	26.7	YES	143
19	0.5	304	152.0	20.0	8.00	26.7	YES	163
20	0.6	304	182.4	20.0	8.00	27.0	YES	163
21	0.6	304	182.4	20.0	8.00	27.0	YES	163
22	0.6	302	181.2	20.0	8.00	27.0	YES	164
23	0.6	272	163.2	20.0	8.00	27.0	YES	178
24	0.6	308	184.8	20.0	8.00	27.0	YES	161
25	0.6	324	194.4	20.0	8.00	27.0	YES	153
26	0.6	308	184.8	20.0	8.00	27.0	YES	161
27	0.6	306	183.6	20.0	8.00	27.0	YES	162
28	0.6	273	163.8	20.0	8.00	27.0	YES	182
29	0.6	290	174.0	20.0	8.00	27.0	YES	171
30	0.6	322	193.2	20.0	8.00	27.0	YES	154
31								

<sup>3</sup> If Cl<sub>2</sub> 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