

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

County: **Grant**
 Month/Year: **May-25**
 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 ¹ [NTU]
1							0.14
2							0.13
3							0.16
4							0.17
5							0.16
6							0.18
7							0.17
8							0.15
9							0.23
10							0.21
11							0.20
12							0.07
13							0.21
14							0.16
15							0.22
16							0.21
17							0.21
18							0.26
19							0.17
20							0.20
21							0.16
22							0.15
23							0.15
24							0.14
25							0.16
26							0.15
27							0.16
28							0.18
29							0.13
30							0.12
31							0.02

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

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

System Name: **Prairie City** ID# **41** 00673 Month/Year: **May-25**

Disinfection *Giardia* Log Inactiv: 1.0

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	0.6	255	153.0	10.0	8.00	52.5	YES	195
2	0.6	241	144.6	15.0	8.00	37.7	YES	207
3	0.6	239	143.4	15.0	8.00	37.7	YES	209
4	0.6	278	166.8	15.0	8.00	37.7	YES	179
5	0.6	287	172.2	15.0	8.00	37.7	YES	173
6	0.6	261	156.6	15.0	8.00	37.7	YES	191
7	0.6	261	156.6	15.0	8.00	37.7	YES	191
8	0.6	254	152.4	15.0	8.00	37.7	YES	196
9	0.6	258	154.8	15.0	8.00	37.7	YES	193
10	0.5	238	119.0	15.0	8.00	37.3	YES	210
11	0.4	220	88.0	15.0	8.00	36.8	YES	227
12	0.4	275	110.0	15.0	8.00	36.8	YES	181
13	0.4	289	115.6	15.0	8.00	36.8	YES	172
14	0.5	295	147.5	15.0	8.00	37.3	YES	168
15	0.5	306	153.0	15.0	8.00	37.3	YES	162
16	0.6	302	181.2	15.0	8.00	37.7	YES	248
17	0.7	254	177.8	15.0	8.00	38.1	YES	196
18	0.7	312	218.4	15.0	8.00	38.1	YES	159
19	0.6	324	194.4	15.0	8.00	37.7	YES	153
20	0.6	308	184.8	15.0	8.00	37.7	YES	161
21	0.6	290	174.0	15.0	8.00	37.7	YES	171
22	0.6	306	183.6	15.0	8.00	37.7	YES	162
23	0.6	371	222.6	15.0	8.00	37.7	YES	133
24	0.6	211	126.6	15.0	8.00	37.7	YES	237
25	0.6	259	155.4	15.0	8.00	37.7	YES	192
26	0.6	241	144.6	15.0	8.00	37.7	YES	207
27	0.6	263	157.8	15.0	8.00	37.7	YES	189
28	0.6	238	142.8	15.0	8.00	37.7	YES	210
29	0.6	239	143.4	15.0	8.00	37.7	YES	209
30	0.6	226	135.6	15.0	8.00	37.7	YES	221
31	0.6	222	133.2	15.0	8.00	37.7	YES	225

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