

OHA - Drinking Water Services - Surface Water Quality Data Form

County:

Baker

Cartridge or Bag Filtration

Month/Year:

May-25

System Name:		Richland, City of		ID#:	41 00703	WTP ID:	TP-	A
Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day ¹ [NTU]		
1	22.30	21.60	0.70	25.00	0.15			
2	20.70	19.00	1.70	25.00	0.13			
3	21.10	19.20	1.90	25.00	0.11			
4	20.90	18.50	2.40	25.00	0.10			
5	20.70	17.70	3.00	25.00	0.12			
6	20.10	19.10	1.00	25.00	0.10			
7	21.90	21.40	0.50	25.00	0.15			
8	22.40	21.30	1.10	25.00	0.11			
9	22.70	22.10	0.60	25.00	0.17			
10	21.90	21.10	0.80	25.00	0.20			
11	17.30	5.00	12.30	25.00	0.15			
12	22.50	21.80	0.70	25.00	0.12			
13	21.70	20.60	1.10	25.00	0.19			
14	20.80	19.00	1.80	25.00	0.11			
15	20.90	5.00	15.90	25.00	0.15			
16	21.00	19.90	1.10	25.00	0.11			
17	21.40	19.60	1.80	25.00	0.10			
18	22.30	22.30	0.00	25.00	0.11			
19	22.40	22.30	0.10	25.00	0.09			
20	16.70	4.40	12.30	25.00	0.10			
21	20.90	20.00	0.90	25.00	0.16			
22	21.20	20.30	0.90	25.00	0.08			
23	20.60	19.20	1.40	25.00	0.11			
24	20.80	19.50	1.30	25.00	0.17			
25	21.00	19.50	1.50	25.00	0.28			
26	23.10	22.10	1.00	25.00	0.14			
27	28.50	4.60	23.90	25.00	0.19			
28	20.40	17.80	2.60	25.00	0.17			
29	21.40	19.60	1.80	25.00	0.11			
30	22.40	22.30	0.10	25.00	0.16			
31				25.00				

Cartridge & Bag Filtration

95% of daily turbidity readings $\leq$ 1 NTU?

Yes / No

All daily turbidity readings $\leq$ 5 NTU?

Yes / No

Monthly Summary (Answer Yes or No)

CT's met everyday?
(see back)

Yes / No

All Cl₂ residual at entry point $\geq$ 0.2 mg/l?

Yes / No

Notes: PSI = pounds per square inch

PSID = pounds per square inch difference (before filter - after filter)

PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.

PRINTED NAME:

SIGNATURE:

PHONE #:

30/06/2025

CERT #:

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not

correspond to continuous readings' maximum.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :

A

System Name:

Richland, City of

ID#: 41

00703

~~Aug 2024~~

06/2025

Disinfection
Giardia Log
Inactiv:

0.5

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.69	348	240.1	14.9	7.40	15.4	YES	400
2	0.77	379	291.8	14.3	7.40	16.1	YES	410
3	0.84	418	351.1	13.7	7.50	17.6	YES	405
4	1.07	523	559.6	13.7	7.40	17.4	YES	413
5	0.92	470	432.4	13.6	7.40	17.2	YES	395
6	0.81	411	332.9	15.8	7.50	15.2	YES	398
7	0.74	372	275.3	14.3	7.40	16.1	YES	401
8	0.69	352	242.9	15.0	7.40	15.2	YES	395
9	0.25	128	32.0	18.0	7.30	11.4	YES	392
10	0.34	176	59.8	17.0	7.40	12.8	YES	396
11	0.39	198	77.2	16.1	7.30	13.2	YES	396
12	0.52	262	136.2	15.6	7.40	14.4	YES	400
13	0.66	330	217.8	15.7	7.40	14.5	YES	404
14	0.69	343	236.7	15.1	7.40	15.1	YES	406
15	0.82	407	333.7	14.9	7.40	15.6	YES	406
16	0.57	295	168.2	15.9	7.40	14.2	YES	390
17	0.64	316	202.2	15.5	7.40	14.7	YES	409
18	0.75	385	288.8	15.5	7.40	14.9	YES	393
19	0.63	312	196.6	16.1	7.40	14.1	YES	407
20	0.71	356	252.8	16.1	7.40	14.2	YES	402
21	0.87	444	386.3	14.1	7.50	17.2	YES	395
22	0.75	378	283.5	14.1	7.50	16.9	YES	400
23	0.63	328	206.6	13.9	7.50	16.9	YES	387
24	0.52	270	140.4	10.9	7.50	20.5	YES	388
25	0.52	274	142.5	17.4	7.30	12.3	YES	383
26	0.51	256	130.6	15.9	7.50	14.6	YES	401
27	0.37	188	69.6	16.3	7.40	13.5	YES	396
28	0.53	277	146.8	15.7	7.40	14.3	YES	386
29	0.62	315	195.3	15.7	7.40	14.4	YES	397
30	0.49	255	125.0	16.0	7.40	13.9	YES	387
31								

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised 3/29/24

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

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