

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: Nov-22

System Name:	City of Rogue River		ID#: 41-00712				WTP : TP -	WTP-A
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	0.07	---	---	---	0.06	---	0.07	
2	---	---	0.06	0.06	---	0.05	0.06	
3	---	0.07	0.07	0.07	---	---	0.07	
4	0.07	---	0.08	0.08	---	---	0.08	
5	---	0.10	0.11	---	---	---	0.11	
6	---	---	0.14	0.15	0.15	---	0.15	
7	0.17	---	---	0.17	---	---	0.17	
8	---	---	0.04	---	---	---	0.04	
9	---	---	0.04	0.10	---	---	0.10	
10	---	---	0.02	0.10	---	0.04	0.10	
11	---	---	0.03	---	---	---	0.03	
12	---	0.07	0.05	---	---	0.14	0.14	
13	---	---	---	0.05	---	---	0.05	
14	---	---	0.08	0.07	0.05	---	0.08	
15	---	---	0.09	0.08	0.06	---	0.09	
16	---	0.08	0.09	0.07	---	0.07	0.09	
17	---	---	0.06	0.05	---	0.06	0.06	
18	---	0.06	0.06	0.08	0.03	0.09	0.09	
19	---	---	0.07	---	---	0.06	0.07	
20	---	0.07	0.07	---	0.04	---	0.07	
21	---	---	0.05	0.07	---	0.04	0.07	
22	---	0.08	---	0.06	---	0.09	0.09	
23	---	---	0.05	0.06	---	---	0.06	
24	0.05	---	0.04	---	---	0.05	0.05	
25	---	---	0.05	---	0.04	---	0.05	
26	---	---	0.05	0.06	---	---	0.06	
27	---	---	0.09	---	---	---	0.09	
28	0.04	---	0.04	0.04	---	0.04	0.04	
29	---	0.05	0.04	0.04	---	---	0.05	
30	---	---	0.05	0.05	---	---	0.05	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <b>Yes / No</b>	CT's met everyday? (see back) <b>Yes / No</b>	All Cl2 residual at entry point ≥ 0.2 mg/l? <b>Yes / No</b>
All 4-hour turbidity readings ≤ 1 NTU? <b>Yes / No</b>		
All turbidity readings < IFE <sup>2</sup> triggers <b>Yes / No</b>		
	PRINTED NAME: Michael Bollweg	
	SIGNATURE: <i>Michael Bollweg</i>	DATE: 12-9-22
	PHONE #: ( 541 ) 415-1117	CERT #: 5296

<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> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : WTP-A

System Name:	City of Rogue River	ID#: 41-00712	Month/Year:	Nov-22	Disinfection <i>Giardia</i> Log Inactive:	0.5
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Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.22	76	93	10.4	7.9	26	YES	801
2	1.16	76	88	8.3	7.8	29	YES	789
3	1.73	76	131	8.1	7.8	32	YES	798
4	1.82	76	138	8.0	7.9	33	YES	791
5	1.56	76	119	10.4	7.8	27	YES	778
6	1.45	76	110	10.2	7.8	27	YES	802
7	1.28	76	97	8.5	7.8	29	YES	790
8	0.85	76	65	9.9	7.7	24	YES	778
9	0.81	76	62	9.8	7.8	25	YES	781
10	0.81	76	62	8.9	7.8	27	YES	787
11	1.71	76	130	10.8	7.6	24	YES	765
12	1.83	76	139	7.6	7.7	32	YES	785
13	1.40	76	106	11.9	7.9	24	YES	755
14	1.93	76	147	8.0	7.7	31	YES	783
15	1.70	76	129	7.3	7.7	32	YES	785
16	1.45	76	110	6.6	7.7	33	YES	787
17	1.11	76	84	8.2	7.6	27	YES	787
18	1.55	76	118	7.2	7.7	32	YES	785
19	1.71	76	130	6.2	7.6	33	YES	779
20	1.56	76	119	6.2	7.7	34	YES	771
21	1.53	76	116	6.4	7.8	35	YES	771
22	1.36	76	103	6.5	7.7	33	YES	784
23	1.73	76	131	9.2	7.6	27	YES	779
24	1.42	76	108	8.2	7.7	29	YES	764
25	1.50	76	114	7.5	7.7	31	YES	773
26	1.47	76	112	7.8	7.6	29	YES	776
27	1.57	76	119	9.9	7.4	24	YES	762
28	1.51	76	115	8.8	7.7	28	YES	773
29	1.38	76	105	8.7	7.7	28	YES	781
30	1.58	76	120	8.7	7.6	28	YES	761

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

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

[dwp\\_dmce@state.or.us](mailto:dwp_dmce@state.or.us); 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350