

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson
 Month/Year: Jun-23

Conventional or Direct Filtration

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 ¹ [NTU]	
1	-0.04--	0.04	0.05	0.05	0.05	0.04	0.05	
2	0.04	0.04	0.05	0.05	0.05	0.04	0.05	
3	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
4	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
5	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
6	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
7	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
8	---	---	0.04	0.04	0.04	0.04	0.04	
9	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
10	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
11	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
12	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
13	0.04	0.04	0.04	0.04	0.04	0.06	0.06	
14	0.06	0.05	0.05	0.05	0.05	0.05	0.06	
15	0.05	0.05	0.04	0.09	0.11	0.12	0.12	
16	0.10	0.08	0.08	0.12	0.01	0.02	0.12	
17	0.13	0.12	0.10	0.10	0.08	0.07	0.13	
18	---	0.06	0.05	---	0.05	---	0.06	
19	---	0.04	0.05	0.05	0.06	---	0.06	
20	---	---	0.05	0.10	0.10	0.09	0.10	
21	0.08	0.07	0.06	0.05	0.05	0.05	0.08	
22	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
23	0.05	0.05	0.05	0.05	0.09	---	0.09	
24	0.09	0.08	0.07	0.07	0.07	0.06	0.09	
25	---	0.06	0.05	0.05	0.05	0.05	0.06	
26	0.04	0.05	0.06	0.06	0.12	0.13	0.13	
27	0.12	0.11	0.10	0.10	0.09	0.08	0.12	
28	0.06	0.06	0.07	0.10	0.12	---	0.12	
29	0.11	0.10	0.10	0.10	0.09	0.08	0.11	
30	0.08	0.06	0.09	0.13	0.12	0.12	0.13	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? Yes / No	CT's met everyday? (see back) Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l? Yes / No
All 4-hour turbidity readings ≤ 1 NTU? Yes / No		
All turbidity readings < IFE ² triggers Yes / No		
PRINTED NAME: Michael Bollweg		DATE: 6/10/23
SIGNATURE: Michael Bollweg		CERT #: 5296
PHONE #: (541) 415-1117		

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 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:	Jun-23	Disinfection <i>Giardia</i> Log Inactive:	0.5
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.19	76	90	14.7	7.7	18	YES	614
2	1.39	76	106	14.8	7.8	19	YES	599
3	1.37	76	104	15.7	7.7	17	YES	614
4	1.48	76	112	16.4	7.7	17	YES	624
5	1.33	76	101	15.7	7.7	18	YES	609
6	1.33	76	101	16.1	7.6	16	YES	629
7	1.32	76	100	15.8	7.6	16	YES	608
8	1.26	76	96	16.3	7.4	15	YES	612
9	1.27	76	97	16.3	7.5	15	YES	613
10	1.40	76	106	16.3	7.6	16	YES	619
11	1.60	76	122	16.8	7.6	16	YES	613
12	1.17	76	89	16.5	7.6	16	YES	615
13	1.11	76	84	16.9	7.6	15	YES	626
14	1.15	76	87	15.8	7.6	16	YES	622
15	1.09	76	83	14.9	7.6	17	YES	618
16	1.12	76	85	16.2	7.5	16	YES	613
17	1.21	76	92	17.1	7.6	15	YES	619
18	1.09	76	83	15.9	7.3	15	YES	624
19	1.05	76	80	15.1	7.4	16	YES	610
20	0.85	76	65	14.2	7.4	17	YES	615
21	1.17	76	89	15.0	7.5	17	YES	612
22	1.23	76	93	15.8	7.6	17	YES	622
23	0.97	76	74	16.7	7.5	15	YES	607
24	1.11	76	84	15.7	7.4	15	YES	606
25	1.14	76	87	16.7	7.5	15	YES	673
26	0.90	76	68	17.4	7.6	14	YES	612
27	0.91	76	69	17.2	7.6	15	YES	617
28	1.02	76	78	17.2	7.6	15	YES	614
29	0.92	76	70	17.6	7.5	14	YES	617
30	0.86	76	65	17.9	7.5	13	YES	61

³ If Cl₂ 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; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350
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