

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: Aug-24

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	0.02	0.05	0.05	0.05	0.02	0.03	0.05
2	0.09	0.23	0.06	0.02	0.02	0.02	0.23
3	0.02	0.05	0.03	0.07	0.09	0.09	0.09
4	0.02	---	0.07	0.04	---	0.02	0.07
5	0.03	---	0.05	0.05	0.09	0.06	0.09
6	0.04	0.03	0.23	0.12	0.03	0.04	0.23
7	0.04	0.10	0.22	0.03	0.04	0.04	0.22
8	0.11	0.14	---	---	0.04	0.04	0.14
9	---	0.08	0.05	0.07	0.05	0.04	0.08
10	0.06	---	0.24	0.05	0.03	0.05	0.24
11	0.05	0.06	0.13	0.04	0.03	0.03	0.13
12	---	0.05	---	---	0.03	0.04	0.05
13	0.06	0.07	0.12	---	0.03	0.04	0.12
14	0.04	0.04	0.09	0.06	0.03	0.04	0.09
15	0.04	0.04	0.06	---	0.05	0.04	0.06
16	0.04	0.04	0.05	0.04	0.04	0.04	0.05
17	0.04	0.05	---	0.04	0.04	---	0.05
18	---	---	0.04	0.16	0.04	---	0.16
19	0.04	0.06	0.04	0.04	0.07	0.04	0.07
20	0.04	0.04	0.05	0.04	---	0.04	0.05
21	0.05	0.05	0.08	0.05	0.04	0.04	0.08
22	0.04	0.04	0.05	0.01	0.02	0.03	0.05
23	0.02	---	0.03	0.03	0.04	0.03	0.04
24	0.02	0.10	0.03	0.02	0.03	---	0.10
25	0.02	0.02	0.02	0.02	0.02	0.02	0.02
26	0.04	0.04	0.02	0.03	0.02	0.02	0.04
27	---	---	0.05	---	0.02	0.02	0.05
28	0.02	0.02	0.02	0.03	0.02	0.03	0.03
29	0.03	0.03	0.07	0.03	0.02	0.02	0.07
30	0.02	0.03	0.07	0.02	0.02	0.02	0.07
31	0.02	0.04	0.08	0.02	0.02	---	0.08

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)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	Yes / No	Yes / No	Yes / No
All turbidity readings < IFE ² triggers	Yes / No		

PRINTED NAME: Michael Bollweg
 SIGNATURE: Michael Bollweg
 PHONE #: (541) 415-1117
 DATE: 9.9.24
 CERT #: 5296

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
Disinfection <i>Giardia</i> Log Inactive:	0.5

System Name:	City of Rogue River	ID#: 41-00712	Month/Year:	Jul-24
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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	1.25	76	95	20.1	7.7	13	YES	725
2	1.36	76	103	19.7	7.7	13	YES	730
3	0.85	76	65	20.3	7.8	13	YES	730
4	1.38	76	105	17.8	7.8	16	YES	725
5	0.51	76	39	20.0	7.8	12	YES	740
6	0.87	76	66	20.4	7.8	13	YES	727
7	1.04	76	79	18.9	8.1	16	YES	729
8	0.67	76	51	19.3	8.1	15	YES	733
9	1.22	76	93	19.5	8.0	15	YES	723
10	1.52	76	116	19.5	8.1	16	YES	725
11	1.41	76	107	19.6	8.0	15	YES	735
12	1.37	76	104	19.5	8.2	16	YES	710
13	1.44	76	109	18.8	7.7	14	YES	725
14	1.33	76	101	18.6	7.8	15	YES	723
15	1.41	76	107	18.8	7.8	15	YES	731
16	1.47	76	112	18.9	7.7	14	YES	741
17	1.51	76	115	20.0	7.7	13	YES	722
18	0.86	76	65	18.6	7.7	14	YES	722
19	1.61	76	122	18.6	7.7	15	YES	731
20	1.38	76	105	17.9	7.7	15	YES	720
21	1.46	76	111	18.5	7.7	15	YES	730
22	1.36	76	103	18.6	7.6	14	YES	726
23	1.12	76	85	17.1	7.7	16	YES	728
24	0.83	76	63	16.6	8.0	17	YES	719
25	1.57	76	119	17.1	7.7	16	YES	727
26	1.11	76	84	18.0	7.9	16	YES	726
27	1.79	76	136	18.2	8.1	18	YES	720
28	1.52	76	116	18.4	8.2	18	YES	722
29	0.96	76	73	18.0	8.3	18	YES	728
30	0.81	76	62	18.3	7.8	14	YES	728
31	1.10	76	84	19.1	7.7	14	YES	726

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