

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Jackson

Conventional or Direct Filtration

Month/Year: Jun-25

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	0.03	0.03	0.17	---	---	0.07	0.17	
2	0.08	0.03	0.03	0.04	0.03	0.03	0.08	
3	0.03	0.03	0.05	---	0.19	0.03	0.19	
4	0.04	0.12	0.13	0.05	0.04	0.05	0.13	
5	0.04	0.07	0.03	0.08	0.04	0.03	0.08	
6	0.13	0.06	0.08	0.09	0.05	0.03	0.13	
7	0.05	0.04	0.09	0.07	0.03	0.05	0.09	
8	0.04	0.06	0.13	0.03	0.04	0.03	0.13	
9	0.04	0.15	0.06	0.04	0.02	0.03	0.15	
10	0.03	0.05	0.06	0.05	---	0.03	0.06	
11	0.04	0.10	0.05	0.05	0.07	0.03	0.10	
12	0.06	0.11	0.09	0.06	0.06	0.03	0.11	
13	0.08	0.11	0.11	0.06	0.03	0.03	0.11	
14	0.20	---	0.12	0.12	0.04	0.04	0.20	
15	0.05	0.06	0.12	0.07	---	0.06	0.12	
16	0.04	0.10	0.19	0.08	0.06	0.05	0.19	
17	0.04	0.07	0.19	0.04	0.07	0.07	0.19	
18	0.05	0.09	0.24	0.07	0.06	0.08	0.24	
19	0.08	0.09	0.21	0.19	0.04	0.07	0.21	
20	0.02	0.11	0.20	0.21	0.05	0.07	0.21	
21	0.08	0.12	0.07	0.19	0.09	0.04	0.19	
22	---	---	---	0.01	0.02	0.02	0.02	
23	0.02	0.02	0.02	0.06	0.03	0.03	0.06	
24	0.13	0.05	0.06	0.09	0.05	0.04	0.13	
25	0.12	0.06	0.09	0.08	0.09	0.04	0.12	
26	0.06	0.11	0.12	0.12	0.11	0.04	0.12	
27	0.06	0.14	0.11	0.09	0.09	0.03	0.14	
28	0.03	0.13	0.12	---	0.05	0.04	0.13	
29	0.05	0.08	0.08	0.06	0.06	0.03	0.08	
30	0.04	0.09	0.07	0.04	0.05	0.04	0.09	

Conventional or Direct Filtration

95% of 4-hour turbidity readings $\leq$ 0.3 NTU?

Yes / No

All 4-hour turbidity readings $\leq$ 1 NTU?

Yes / No

All turbidity readings < IFE² triggers

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

PRINTED NAME: Michael Bollweg

SIGNATURE: Michael Bollweg

DATE: 7.9.25

PHONE #: (541) 415-1117

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

System Name:

City of Rogue River

ID#: 41-00712

Month/Year:

Jun-25

Disinfection *Giardia*
Log Inactive:

0.5

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	1.56	76	119	17.9	8.3	19	YES	688
2	1.49	76	113	15.8	8.3	22	YES	695
3	1.49	76	113	15.9	8.3	22	YES	689
4	1.50	76	114	16.1	8.3	21	YES	695
5	1.38	76	105	16.5	7.9	18	YES	688
6	1.43	76	109	17.5	7.9	17	YES	696
7	1.07	76	81	15.8	8.0	19	YES	695
8	1.41	76	107	18.7	8.1	16	YES	694
9	1.30	76	99	17.4	8.0	17	YES	696
10	1.39	76	106	18.1	8.0	17	YES	686
11	1.42	76	108	18.9	8.0	16	YES	699
12	1.25	76	95	15.8	8.0	19	YES	687
13	1.38	76	105	15.9	7.9	19	YES	687
14	1.32	76	100	16.2	7.9	18	YES	685
15	1.44	76	109	16.7	7.8	17	YES	693
16	1.39	76	106	14.8	8.3	23	YES	689
17	1.24	76	94	15.4	7.1	14	YES	704
18	1.37	76	104	16.2	7.7	17	YES	696
19	1.40	76	106	15.6	7.7	17	YES	698
20	1.45	76	110	15.3	7.7	18	YES	703
21	1.45	76	110	15.3	7.5	17	YES	687
22	1.77	76	135	15.8	7.7	18	YES	681
23	1.54	76	117	15.6	8.1	21	YES	688
24	1.49	76	113	16.4	8.1	20	YES	704
25	1.44	76	109	16.8	8.1	19	YES	705
26	1.51	76	115	16.7	8.2	20	YES	681
27	1.51	76	115	15.4	8.2	22	YES	711
28	1.00	76	76	16.8	8.1	18	YES	721
29	1.56	76	119	17.4	8.2	19	YES	708
30	1.46	76	111	17.8	8.2	18	YES	695

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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