

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Douglas

Cartridge or Bag Filtration

Month/Year: SEPT 23

System Name:	Umpqua Ranch Cooperative		ID#:	41 00714	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	43	30	13	30	.02	.02	
2	45	33	12		.02	.02	
3	43	30	13		.02	.02	
4	42	28	14		.02	.02	
5	43	30	13		.02	.02	
6	43	29	14		.02	.02	
7	43	30	13		.02	.02	
8	43	30	13		.02	.02	
9	43	30	13		.02	.02	
10	46	32	14		.02	.02	
11	47	27	13		.02	.02	
12	48	30	18		.03	.03	
13	43	29	14		.02	.02	
14	42	29	13		.02	.02	
15	43	29	14		.03	.03	
16	43	29	14		.02	.02	
17	47	34	13		.02	.02	
18	42	29	13		.02	.02	
19	45	29	16		.02	.02	
20	55	35	20		.13	.02	
21	44	30	14		.02	.02	
22	44	30	14		.02	.02	
23	44	30	14		.02	.02	
24	44	30	14		.02	.02	
25	42	29	13		.02	.02	
26	47	30	17		.02	.02	
27	59	36	23		.152	.02	
28	46	32	14		.02	.02	
29	45	30	15		.02	.02	
30	45	30	15		.02	.02	
31							

Cartridge & Bag Filtration	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> 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: Jonathan Woody	
	SIGNATURE: John Woody	DATE: 10-9-23
	PHONE #: (541) 643-6137	CERT #: 7232

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: Umpqua Ranch Cooperative

ID#: 41 00714

Month/Year: 09/23

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	1.07	105	112	18	8.26	22	yes	70
2	1.19	105	124	17	7.49	15	yes	70
3	1.21	105	127	18	7.77	19	yes	70
4	.97	105	102	17	7.84	18	yes	70
5	1.15	105	121	16	7.81	19	yes	70
6	1.28	105	134	16	7.67	19	yes	70
7	1.19	105	125	16	7.79	19	yes	70
8	1.14	105	119	16	7.87	19	yes	70
9	1.09	105	114	18	7.84	19	yes	70
10	1.18	105	123	17	7.95	19	yes	70
11	1.13	105	119	16	7.86	19	yes	70
12	1.25	105	131	16	7.82	19	yes	70
13	1.36	105	143	16	7.85	19	yes	70
14	1.40	105	147	17	7.76	19	yes	70
15	1.28	105	134	17	7.80	19	yes	70
16	1.25	105	131	18	7.84	19	yes	70
17	1.34	105	140	18	7.94	19	yes	70
18	1.34	105	140	16	7.73	19	yes	70
19	1.70	105	179	15	7.94	20	yes	70
20	1.45	105	152	15	7.66	19	yes	70
21	1.66	105	173	14	7.68	30	yes	70
22	1.41	105	148	14	7.89	29	yes	70
23	1.32	105	138	14	7.81	28	yes	70
24	1.35	105	141	15	8.42	23	yes	70
25	1.13	105	119	15	7.92	19	yes	70
26	1.07	105	112	15	7.80	19	yes	70
27	1.35	105	142	14	7.83	28	yes	70
28	1.12	105	118	14	7.72	28	yes	70
29	1.15	105	120	14	7.91	28	yes	70
30	1.11	105	116	14	7.92	28	yes	70
31		105						70

² 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