

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Douglas

Cartridge or Bag Filtration

Month/Year: 12/23

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	43	30	13		.03	.03	
3	42	29	13		.03	.03	
4	42	29	13		.05	.05	
5	45	34	11		.03	.03	
6	42	30	12		.04	.04	
7	51	32	19		.03	.03	
8	47	30	17		.03	.03	
9	48	30	18		.03	.03	
10	51	36	15		.03	.03	
11	46	28	18		.02	.02	
12	46	28	18		.02	.02	
13	46	30	16		.04	.04	
14	47	31	16		.02	.02	
15	46	30	16		.04	.04	
16	47	30	17		.02	.02	
17	52	36	16		.02	.02	
18	49	34	15		.04	.04	
19	45	30	15		.02	.02	
20	45	28	17		.04	.04	
21	47	31	16		.02	.02	
22	45	30	15		.02	.02	
23	45	30	15		.03	.03	
24	45	29	16		.02	.02	
25	45	30	15		.02	.02	
26	44	28	16		.04	.04	
27	46	32	14		.04	.04	
28	44	30	14		.02	.02	
29	43	29	14		.02	.02	
30	49	35	14		.02	.02	
31	44	30	14		.03	.03	

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 Cl ₂ 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	PRINTED NAME: Jonathan Woody	
PSID = pounds per square inch difference (before filter - after filter)	SIGNATURE: <i>John Woody</i>	DATE: 1-10-24
PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter at what PSID	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: Dec. 2023
2024^m

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	1.39	105	145	8	7.60	38	yes	70
2	1.01	105	106	9	7.50	31	yes	70
3	1.03	105	108	11	7.28	83	yes	70
4	1.02	105	107	11	7.58	28	yes	70
5	1.06	105	111	11	8.11	28	yes	70
6	1.05	105	110	11	7.37	23	yes	70
7	1.11	105	117	10	7.31	23	yes	70
8	1.07	105	112	10	7.14	23	yes	70
9	1.01	105	106	9	7.51	31	yes	70
10	.94	105	97	11	7.29	22	yes	70
11	.95	105	100	11	7.47	22	yes	70
12	.96	105	100	10	7.51	27	yes	70
13	1.00	105	105	10	7.18	22	yes	70
14	1.22	105	128	10	7.61	28	yes	70
15	1.05	105	110	11	7.54	28	yes	70
16	1.49	105	156	8	7.60	55	yes	70
17	1.52	105	159	9	7.54	55	yes	70
18	1.49	105	156	9	7.42	32	yes	70
19	1.30	105	137	10	7.50	23	yes	70
20	1.02	105	107	10	7.55	28	yes	70
21	1.40	105	147	9	7.32	31	yes	70
22	1.36	105	142	9	7.44	31	yes	70
23	1.21	105	127	8	7.62	38	yes	70
24	1.47	105	154	8	7.49	32	yes	70
25	1.24	105	130	9	7.49	31	yes	70
26	1.32	105	139	9	7.57	38	yes	70
27	1.38	105	145	9	7.41	31	yes	70
28	1.27	105	133	9	7.68	38	yes	70
29	1.58	105	165	10	7.62	29	yes	70
30	1.22	105	128	10	7.39	23	yes	70
31	1.32	105	138	10	8.23	34	yes	70

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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

Revised July 2018