

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Douglas

Cartridge or Bag Filtration

Month/Year: 01/24

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	48	48	0	30	.05	.05
2	44	43	1		.04	.04
3	48	48	0		.05	.05
4	45	44	1		.11	.11
5	48	47	1		.04	.04
6	45	44	1		.04	.04
7	44	43	1		.04	.04
8	63	60	3		.17	.17
9	45	42	3		.04	.04
10	45	42	3		.04	.04
11	46	42	4		.03	.03
12	52	43	9		.03	.03
13	51	43	8		.03	.03
14	51	44	7		.03	.03
15	57	52	5		.03	.03
16	60	42	18		.03	.03
17	87	44	43		.07	.07
18	45	44	1		.03	.03
19	49	46	3		.03	.03
20	51	53	2		.04	0.06
21	64	76	12		.6	0.6
22	61	60	1		0.3	0.3
23	45	44	1		.2	0.2
24	43	42	-1		.02	.02
25	44	43	1		.02	.02
26	44	43	1		.03	.03
27	53	52	1		.03	.03
28	43	42	1		.03	.03
29	84	46	38		.10	.10
30	56	52	4		.03	.03
31	57	52	5		.18	.18

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> Yes / 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	DATE: 2-6-24
		SIGNATURE: <i>John Woody</i>	CERT #: 7232
		PHONE #: (541) 643-6137	

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: July 2024

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	1.37	105	144	19	7.32	16	yes	60
2	1.21	105	127	18	7.19	16	yes	60
3	1.47	105	154	18	7.57	19	yes	60
4	1.36	105	143	18	7.68	19	yes	60
5	1.04	105	110	19	7.73	19	yes	60
6	1.04	105	110	19	8.08	19	yes	60
7	.75	105	78	20	7.66	13	yes	60
8	.72	105	76	20	6.91	9	yes	60
9	.85	105	84	20	6.85	9	yes	60
10	.66	105	69	21	7.57	13	yes	60
11	.77	105	81	20	7.62	13	yes	60
12	1.08	105	113	21	7.52	12	yes	60
13	.76	105	79	21	7.59	11	yes	60
14	.89	105	93	21	7.38	11	yes	60
15	.83	105	87	21	7.53	14	yes	60
16	.95	105	100	20	7.44	11	yes	60
17	.87	105	91	20	7.75	14	yes	60
18	1.05	105	110	19	7.63	15	yes	60
19	1.21	105	137	20	8.32	14	yes	60
20	1.29	105	135	20	7.42	12	yes	60
21	1.13	105	118	20	7.81	14	yes	60
22	1.23	105	129	20	7.5	12	yes	60
23	1.89	105	145	20	7.57	14	yes	60
24	1.11	105	117	19	7.49	15	yes	60
25	1.13	105	119	19	7.58	19.4	yes	60
26	.61	105	64	17	7.45	11.5	yes	60
27	.76	105	79	18	7.58	18	yes	60
28	.66	105	69	18	7.63	18	yes	60
29	.33	105	31.65	18	7.34	14	yes	60
30	.56	105	58.8	19	7.40	14	yes	60
31	.79	105	83	18	7.54	15	yes	60

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