

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	50	44	6	30	.11	.11
2	78	48	30		.12	.12
3	44	42	2		.05	.05
4	44	43	1		.05	.05
5	50	49	1		.06	.06
6	44	43	1		.06	.06
7	58	52	6		.15	.15
8	69	63	6		.03	.03
9	51	50	1		.15	.15
10	44	42	2		.03	.03
11	44	43	1		.03	.03
12	45	44	1		.03	.03
13	44	43	1		.03	.03
14	46	44	2		.05	.05
15	43	42	1		.04	.04
16	57	52	5		.15	.15
17	44	42	2		.04	.04
18	44	42	2		.04	.04
19	47	49	2		.04	.04
20	44	46	2		.04	.04
21	63	54	9		.22	.22
22	43	42	1		.08	.08
23	65	51	14		.18	.18
24	46	43	3		.05	.05
25	49	43	6		.05	.05
26	44	43	1		.05	.05
27	44	43	1		.06	.06
28	56	53	4		.23	.23
29	48	45	3		.07	.07
30	63	50	13		.21	.21
31	44	42	2		.09	.09

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes / No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes / No	<input checked="" type="checkbox"/> Yes / No	<input checked="" type="checkbox"/> 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: 11-9-24
		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: October 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	1.47	105	154	13	7.80	29	yes	60
2	1.30	105	137	13	7.19	23	yes	60
3	1.36	105	143	12	7.23	27	yes	60
4	1.26	105	132	13	7.69	28	yes	60
5	1.27	105	133	13	7.28	23	yes	60
6	1.22	105	128	13	7.28	23	yes	60
7	1.29	105	135	13	7.49	23	yes	60
8	1.28	105	134	14	6.97	19	yes	60
9	1.25	105	131	13	6.45	19	yes	60
10	1.19	105	125	13	6.75	19	yes	60
11	1.26	105	132	13	7.02	23	yes	60
12	1.24	105	130	14	7.12	23	yes	60
13	1.20	105	126	14	7.61	28	yes	60
14	1.27	105	133	14	7.35	23	yes	60
15	1.09	105	114	15	7.75	28	yes	60
16	1.18	105	124	13	7.07	19	yes	60
17	.92	105	97	14	6.94	19	yes	60
18	1.25	105	131	12	7.17	23	yes	60
19	1.16	105	121	11	7.28	23	yes	60
20	1.50	105	157	13	7.33	24	yes	60
21	1.41	105	148	13	7.27	24	yes	60
22	1.43	105	150	12	7.27	24	yes	60
23	1.45	105	152	11	6.97	20	yes	60
24	1.36	105	143	11	7.18	23	yes	60
25	1.21	105	127	10	7.80	28	yes	60
26	1.06	105	111	13	7.36	23	yes	60
27	1.30	105	137	13	7.48	23	yes	60
28	1.19	105	125	12	7.32	23	yes	60
29	1.25	105	131	12	7.25	23	yes	60
30	1.18	105	124	11	7.38	23	yes	60
31	.96	105	101	10	7.11	22	yes	60

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.dmca@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

Revised July 2018