

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Douglas

Cartridge or Bag Filtration

Month/Year: 7/25

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	44	41	3	30.00	.07	.07			
2	44	41	3	30.00	.07	.07			
3	45	43	2	30.00	.07	.07			
4	45	42	3	30.00	.07	.07			
5	45	42	3	30.00	.07	.07			
6	46	42	4	30.00	.08	.08			
7	45	42	3	30.00	.07	.07			
8	45	42	3	30.00	.06	.06			
9	48	46	2	30.00	.07	.07			
10	45	42	3	30.00	.07	.07			
11	48	44	4	30.00	.17	.17			
12	56	46	10	30.00	.08	.08			
13	68	48	20	30.00	.08	.08			
14	44	42	2	30.00	.07	.07			
15	45	44	1	30.00	.07	.07			
16	52	48	4	30.00	.08	.08			
17	44	42	2	30.00	.07	.07			
18	55	50	5	30.00	.10	.10			
19	56	46	10	30.00	.10	.10			
20	54	52	2	30.00	.10	.10			
21	44	42	2	30.00	.09	.09			
22	45	42	3	30.00	.07	.07			
23	48	44	4	30.00	.07	.07			
24	52	48	4	30.00	.07	.07			
25	52	46	6	30.00	.07	.07			
26	46	42	4	30.00	.08	.08			
27	44	42	2	30.00	.08	.08			
28	45	42	3	30.00	.07	.07			
29	46	42	4	30.00	.08	.08			
30	45	42	3	30.00	.08	.08			
31	50	48	2	30.00	.08	.08			

Cartridge & Bag Filtration

Monthly Summary (Answer Yes or No)

95% of daily turbidity readings $\leq$ 1 NTU?

Yes / No

CT's met everyday?
(see back)All Cl2 residual at entry point $\geq$ 0.2 mg/l?All daily turbidity readings $\leq$ 5 NTU?

Yes / No

Yes / No

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

SIGNATURE: *John Woody*

DATE: 8-8-25

PHONE #: 541 1643-6137

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:

Disinfection *Giardia*
Log Inactiv:

0.1

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	1.36	105	143	19	7.82	23	yes	
2	1.54		162	18	7.90	19	yes	
3	1.58		166	17	7.84	19	yes	
4	1.95		205	17	7.86	19	yes	
5	1.62		176	17	7.69	20	yes	
6	1.58		166	17	7.75	19	yes	
7	1.62		170	17	7.97	20	yes	
8	1.25		132	18	8.06	23	yes	
9	1.33		170	19	8.20	23	yes	
10	1.31		138	18	8.04	23	yes	
11	1.70		179	17	7.45	16	yes	
12	.82		86	18	8.07	22	yes	
13	.59		62	19	7.59	17	yes	
14	.58		61	19	7.82	17	yes	
15	.75		79	18	7.55	18	yes	
16	.89		93	18	7.72	18	yes	
17	.93		98	18	7.63	18	yes	
18	.88		92	18	7.83	18	yes	
19	.50		53	19	7.50	14	yes	
20	.56		59	18	7.43	14	yes	
21	.51		47	19	7.60	17	yes	
22	.65		68	17	7.58	18	yes	
23	.65		68	18	7.66	18	yes	
24	.40		42	19	7.63	17	yes	
25	.91		96	18	7.49	15	yes	
26	1.02		107	18	7.82	19	yes	
27	1.11		117	17	7.30	15	yes	
28	1.09		119	17	7.73	17	yes	
29	1.14		119	18	7.80	17	yes	
30	.73		77	18	7.97	18	yes	
31	.93		98	18	7.81	18	yes	

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

Revised November 2022

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350