

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Douglas

Month/Year: 8/25

Cartridge or Bag Filtration

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	55	46	9	30.00	.11	.11	
2	48	42	6	30.00	.09	.09	
3	59	48	11	30.00	.09	.09	
4	55	42	13	30.00	.09	.09	
5	65	48	17	30.00	.10	.10	
6	54	50	4	30.00	.12	.12	
7	54	46	6	30.00	.12	.12	
8	46	42	4	30.00	.07	.04	
9	53	42	11	30.00	.13	.13	
10	56	42	14	30.00	.04	.04	
11	46	44	2	30.00	.04	.04	
12	44	42	2	30.00	.04	.04	
13	46	44	2	30.00	.05	.05	
14	47	44	3	30.00	.05	.05	
15	52	48	4	30.00	.04	.04	
16	54	44	10	30.00	.04	.04	
17	62	46	16	30.00	.03	.03	
18	65	46	19	30.00	.03	.03	
19	53	42	11	30.00	.03	.03	
20	57	44	13	30.00	.03	.03	
21	54	42	12	30.00	.03	.03	
22	58	42	16	30.00	.05	.05	
23	44	42	2	30.00	.05	.05	
24	44	42	2	30.00	.02	.02	
25	45	42	3	30.00	.08	.08	
26	47	39	8	30.00	.05	.05	
27	46	63	17	30.00	.05	.05	
28	54	44	10	30.00	.04	.04	
29	46	44	2	30.00	.08	.08	
30	44	42	2	30.00	.04	.04	
31	50	48	2	30.00	.04	.04	

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: 9-10-25
 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: Aug 2025

Disinfection Giardia
Log Inactiv:

0.1

Date / Time	Minimum Cl2 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	.78	105	82	18	7.73	18	yes	60
2	.65		68	18	7.84	18	yes	
3	1.04		109	18	7.82	19	yes	
4	.81		85	18	8.02	22	yes	
5	.80		84	18	7.75	18	yes	
6	.66		69	18	7.84	18	yes	
7	.79		83	19	7.69	18	yes	
8	1.04		114	18	7.69	19	yes	
9	.85		84	18	7.54	18	yes	
10	1.01		106	19	7.86	19	yes	
11	.79		83	17	7.86	18	yes	
12	.91		96	18	7.63	18	yes	
13	1.03		108	19	8.03	22	yes	
14	.98		103	19	8.13	22	yes	
15	.93		98	18	8.10	22	yes	
16	.76		80	20	7.44	11	yes	
17	.84		88	18	7.67	18	yes	
18	1.05		110	18	8.03	22	yes	
19	1.25		131	17	8.01	23	yes	
20	1.55		163	18	8.07	24	yes	
21	1.27		133	17	7.88	19	yes	
22	1.40		147	18	8.11	23	yes	
23	1.04		104	18	7.71	19	yes	
24	.84		93	20	8.01	16	yes	
25	.84		88	20	7.13	11	yes	
26	.79		83	19	7.33	15	yes	
27	.97		102	19	7.71	18	yes	
28	.86		92	19	7.76	18	yes	
29	.99		104	18	7.75	18	yes	
30	.89		94	17	7.77	18	yes	
31	1.05		110	19	7.85	19	yes	

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

Revised November 2022