

**OHA - Drinking Water Services - Surface Water Quality Data Form**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

County: **Lincoln**  
 Month/Year: **Sep-22**

System Name: **Hiland WC - Boulder Creek** ID#: **41 00722** WTP: **TP - Membrane**

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
01	0.03	0.03	0.03	0.03	0.04	0.04	0.04
02	0.03	0.03	0.03	0.03	0.03	0.03	0.03
03	0.04	0.03	0.03	0.03	0.03	0.03	0.04
04	0.04	0.03	0.03	0.04	0.03	0.03	0.04
05	0.03	0.03	0.04	0.04	0.04	0.03	0.04
06	0.03	0.03	0.03	0.03	0.03	0.04	0.04
07	0.03	0.03	0.03	0.03	0.03	0.03	0.03
08	0.03	0.03	0.04	0.03	0.03	0.04	0.04
09	0.03	0.04	0.04	0.04	0.03	0.04	0.04
10	0.03	0.03	0.03	0.03	0.04	0.03	0.04
11	0.03	0.03	0.03	0.03	0.03	0.03	0.03
12	0.03	0.04	0.03	0.03	0.04	0.04	0.04
13	0.04	0.04	0.04	0.03	0.04	0.04	0.04
14	0.03	0.03	0.03	0.04	0.03	0.04	0.04
15	0.03	0.03	0.03	0.03	0.03	0.04	0.04
16	0.04	0.03	0.03	0.04	0.04	0.03	0.04
17	0.04	0.04	0.03	0.04	0.04	0.03	0.04
18	0.03	0.03	0.04	0.03	0.04	0.03	0.04
19	0.03	0.03	0.03	0.03	0.04	0.03	0.04
20	0.03	0.03	0.04	0.04	0.03	0.03	0.04
21	0.04	0.03	0.04	0.04	0.03	0.04	0.04
22	0.03	0.04	0.03	0.04	0.03	0.04	0.04
23	0.03	0.03	0.03	0.04	0.03	0.03	0.04
24	0.03	0.04	0.04	0.03	0.03	0.03	0.04
25	0.03	0.04	0.04	0.03	0.04	0.04	0.04
26	0.04	0.03	0.04	0.03	0.04	0.03	0.04
27	0.03	0.03	0.04	0.03	0.03	0.03	0.04
28	0.04	0.04	0.03	0.03	0.03	0.03	0.04
29	0.04	0.04	0.03	0.04	0.04	0.04	0.04
30	0.03	0.04	0.03	0.04	0.03	0.04	0.04

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b> 95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes <input type="radio"/> No	<input checked="" type="radio"/> Yes <input type="radio"/> No
	<b>Monthly Summary (Answer Yes or No)</b> CT's met everyday? (see <input checked="" type="radio"/> Yes / <input type="radio"/> No)      All Cl2 residual at entry point <input checked="" type="radio"/> Yes / <input type="radio"/> No	
<b>Notes:</b>	PRINTED NAME: <b>Aaron Olson</b>	
	SIGNATURE: <i>Aaron Olson</i>	DATE: <b>10-8-22</b>
	PHONE #: <b>(971) 563-3128</b>	CERT #: <b>T-09128</b>

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may correspond to continuous readings' maximum. <sup>2</sup> Filtered systems only.  
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<b>OHA - Drinking Water Services - Surface Water Quality Data Form</b>				WTP - : <b>Membrane</b>	
System Name: Hiland WC - Boulder Creek      ID#: 41 00722      Month/Year: Sep-22				Disinfection <i>Giardia</i> Log Inactiv: <b>0.5</b>	

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	<b>C X T</b>	[° C]		formula	Yes / No	[GPM]
01	1.55	46	71.3	14.3	6.33	11.8	Yes	40
02	1.35	46	62.0	14.4	6.77	13.5	Yes	40
03	1.26	46	57.7	14.1	6.83	14.0	Yes	40
04	1.31	46	60.4	14.1	6.92	14.6	Yes	40
05	1.28	46	58.7	14.1	7.11	15.6	Yes	40
06	1.97	46	90.6	13.8	6.91	15.9	Yes	40
07	1.85	46	85.1	14.1	6.78	14.7	Yes	40
08	1.65	46	75.8	13.8	6.70	14.2	Yes	40
09	1.57	46	72.2	12.5	6.92	17.0	Yes	40
10	1.25	46	57.5	14.5	6.84	13.6	Yes	40
11	1.29	46	59.2	14.6	6.76	13.3	Yes	40
12	1.57	46	72.1	15.9	6.73	12.4	Yes	40
13	1.54	46	71.0	14.0	6.72	13.9	Yes	40
14	1.53	46	70.4	13.8	6.65	13.7	Yes	40
15	1.63	46	74.8	13.8	6.76	14.5	Yes	40
16	1.47	46	67.4	13.7	6.79	14.5	Yes	40
17	1.29	46	59.3	13.0	6.91	15.6	Yes	40
18	1.22	46	55.9	13.0	6.82	14.9	Yes	40
19	1.88	46	86.5	13.0	6.85	16.3	Yes	40
20	1.93	46	88.8	13.1	6.91	16.7	Yes	40
21	1.61	46	74.2	13.0	6.92	16.2	Yes	40
22	1.54	46	70.9	13.1	6.99	16.4	Yes	40
23	1.39	46	63.9	12.9	7.03	16.6	Yes	40
24	1.34	46	61.5	12.8	7.05	16.8	Yes	40
25	1.26	46	58.0	12.8	6.96	16.0	Yes	40
26	1.44	46	66.3	13.0	7.02	16.5	Yes	40
27	1.43	46	65.6	12.9	7.08	16.9	Yes	40
28	1.28	46	59.0	12.8	7.15	17.2	Yes	40
29	1.37	46	63.0	13.0	7.29	18.0	Yes	40
30	1.33	46	61.2	12.4	7.17	18.2	Yes	40

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.