

**OHA - Drinking Water Program - Turbidity Monitoring Report Form** County: Jackson  
**Conventional or Direct Filtration**

System Name: COUNTRY VIEW MH ESTATES ID #: OR4100808 WTP:-WTP-A Month/Year: 7/22

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]
1	↓	↓	↓	.068	↓	↓	.068
2	↓	↓	↓	.070	↓	↓	.070
3	↓	↓	↓	-	↓	↓	-
4	↓	↓	↓	-	↓	↓	-
5	↓	↓	↓	.069	↓	↓	.069
6	↓	↓	↓	.069	↓	↓	.069
7	↓	↓	↓	.065	↓	↓	.065
8	↓	↓	↓	.068	↓	↓	.068
9	↓	↓	↓	-	↓	↓	-
10	↓	↓	↓	-	↓	↓	-
11	↓	↓	↓	.070	↓	↓	.070
12	↓	↓	↓	.068	↓	↓	.068
13	↓	↓	↓	.088	↓	↓	.088
14	↓	↓	↓	.060	↓	↓	.060
15	↓	↓	↓	.089	↓	↓	.089
16	↓	↓	↓	-	↓	↓	-
17	↓	↓	↓	-	↓	↓	-
18	↓	↓	↓	.068	↓	↓	.068
19	↓	↓	↓	.059	↓	↓	.059
20	↓	↓	↓	.049	↓	↓	.049
21	↓	↓	↓	.051	↓	↓	.051
22	↓	↓	↓	.066	↓	↓	.066
23	↓	↓	↓	-	↓	↓	-
24	↓	↓	↓	-	↓	↓	-
25	↓	↓	↓	.054	↓	↓	.054
26	↓	↓	↓	.057	↓	↓	.057
27	↓	↓	↓	.059	↓	↓	.059
28	↓	↓	↓	.068	↓	↓	.068
29	↓	↓	↓	.072	↓	↓	.072
30	↓	↓	↓	-	↓	↓	-
31	↓	↓	↓	-	↓	↓	-

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No of the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No turbidity readings < IFE <sup>2</sup> triggers? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No <sup>2</sup>	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl <sub>2</sub> residuals at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
PRINTED NAME: AL EATINGER		SIGNATURE: <i>[Signature]</i>	
PHONE #: 1541 1973-9200		DATE: 8/3/22	
		CERT #: 6097	

<sup>1</sup>Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum.  
<sup>2</sup>IFE = Individ. Filter Eff. (CAR 333-051-0040(1)(e)(B&C))

dwp.dmlce @state.or.us

OHA - Drinking Water Program - Surface Water Quality Data Form

COUNTRY VIEW MH ESTATES ID #: OR4100808 WTP: WTP-A Month/Year: 7/22

Required Log Inactivation: 0.5

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>3</sup> [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT Use tables	CT Met? <sup>3</sup> Yes / No	Peak Hourly Demand Flow [GPM]
1/ 11:45 AM	.30	180	54.0	17	8.4	17	Yes	37
2/ ✓	.30	✓	54.0	17	8.4	17	Yes	37
3/	-		-	-	-	-		-
4/	-		-	-	-	-		-
5/	.30		54.0	16	8.1	17		34
6/	↓		↓	↓	8.2	↓		↓
7/	↓		↓	↓	8.3	↓		↓
8/	↓		↓	↓	8.3	↓		32
9/	-		-	-	-	-		-
10/	-		-	-	-	-		-
11/	.30		54.0	16	8.3	17		32
12/	↓		↓	↓	8.4	↓		↓
13/	↓		↓	↓	8.5	↓		↓
14/	↓		↓	↓	8.4	↓		↓
15/	↓		↓	↓	8.5	↓		↓
16/	-		-	-	-	-		-
17/	-		-	-	-	-		-
18/	.30		54.0	14	8.3	17		32
19/	.30		54.0	14	8.2	↓		↓
20/	.35		63.0	13	8.3	↓		↓
21/	.30		54.0	↓	↓	↓		↓
22/	.30		54.0	↓	↓	↓		↓
23/	-		-	-	-	-		-
24/	-		-	-	-	-		-
25/	.30		54.0	14	8.4	17		32
26/	.30		54.0	↓	↓	↓		↓
27/	.33		59.4	↓	↓	↓		↓
28/	.30		54.0	↓	↓	↓		↓
29/	.30		54.0	↓	↓	↓		↓
30/	-		-	-	-	-		-
31/ ✓	✓	✓	✓	✓	✓	✓	✓	✓

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.