

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

System Name: COUNTRY VIEW MH ESTATES ID #: OR4100006 WTP: WTP-A Month/Year: 7/24

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day [NTU]
1	↓	↓	↓	Wells	↓	↓	Wells
2	↓	↓	↓	↓	↓	↓	↓
3	↓	↓	↓	.27	↓	↓	.27
4	↓	↓	↓	Wells	↓	↓	Wells
5	↓	↓	↓	Wells	↓	↓	↓
6	↓	↓	↓	↓	↓	↓	↓
7	↓	↓	↓	↓	↓	↓	↓
8	↓	↓	↓	.28	↓	↓	.28
9	↓	↓	↓	.27	↓	↓	.27
10	↓	↓	↓	.25	↓	↓	.25
11	↓	↓	↓	.24	↓	↓	.24
12	↓	↓	↓	Wells	↓	↓	Wells
13	↓	↓	↓	↓	↓	↓	↓
14	↓	↓	↓	↓	↓	↓	↓
15	↓	↓	↓	.26	↓	↓	.26
16	↓	↓	↓	.24	↓	↓	.24
17	↓	↓	↓	.20	↓	↓	.20
18	↓	↓	↓	.24	↓	↓	.24
19	↓	↓	↓	Wells	↓	↓	Wells
20	↓	↓	↓	↓	↓	↓	↓
21	↓	↓	↓	↓	↓	↓	↓
22	↓	↓	↓	↓	↓	↓	↓
23	↓	↓	↓	↓	↓	↓	↓
24	↓	↓	↓	↓	↓	↓	↓
25	↓	↓	↓	↓	↓	↓	↓
26	↓	↓	↓	.28	↓	↓	.28
27	↓	↓	↓	Wells	↓	↓	Wells
28	↓	↓	↓	↓	↓	↓	↓
29	↓	↓	↓	↓	↓	↓	↓
30	↓	↓	↓	↓	↓	↓	↓
31	↓	↓	↓	↓	↓	↓	↓

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	All the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
All turbidity readings < IFE ² trigger? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		PRINTED NAME: AL EATINGER SIGNATURE: <i>[Signature]</i> DATE: 8/9/24 PHONE #: 1541 1973-9200 CERT #: 6097	

Note: PLANT RUN'S 3 TO 4-hrs

Including continuous turbidity data, if applicable, for optimization/recording purposes. Compliance values in columns "4 AM" through "8 PM" may not correspond to continuous readings' maximum. IFE = In-line Filter Eff. (OAR 333-061-0046(T)(4)(B)(C))

OHA - Drinking Water Program -- Surface Water Quality Data Form

COUNTRY VIEW MH ESTATES ID #: CM410000 WTP: WTP-A Month/Year: 7/2024

Required Log
Inspection: 0.5

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ² [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT CXT	Temp [°C]	pH	Required CT Use tables	CT Met? ² Yes / No	Peak Hourly Demand Flow [GPM]
1/ 11:45 AM	—	180	—	—	—	—	—	—
2/ ✓	—	✓	—	—	—	—	(GCM)	—
3/	.26		46.8	16	9.1	23	✓	—
4/	Wells		—	—	—	—	—	32
5/	—		—	—	—	—	—	Wells
6/	—		—	—	—	—	—	—
7/	—		—	—	—	—	—	—
8/	.32		52.6	16	8.9	23	—	↓
9/	.32		52.6	16	8.9	23	—	32
10/	.30		54.0	17	8.9	23	—	—
11/	.32		57.6	17	8.9	23	—	—
12/	Wells		—	Wells	—	—	—	↓
13/	—		—	—	—	—	—	Wells
14/	—		—	↓	—	—	—	↓
15/	.30		54.0	17	9.1	23	—	↓
16/	.30		54.0	17	9.1	23	—	32
17/	.30		54.0	17	9.0	23	—	32
18/	.30		54.0	17	8.9	23	—	32
19/	Wells		—	Wells	—	—	—	32
20/	—		—	—	—	—	—	Wells
21/	—		—	—	—	—	—	—
22/	—		—	—	—	—	—	—
23/	—		—	—	—	—	—	—
24/	—		—	—	—	—	—	—
25/	—		—	—	—	—	—	—
26/	.32		57.6	17	—	—	—	↓
27/	Wells		—	Wells	9.1	23	—	32
28/	—		—	—	—	—	—	Wells
29/	—		—	—	—	—	—	—
30/	—		—	—	—	—	—	—
31/ ✓	—	↓	—	—	—	—	—	↓

²If Cl₂ at entry point = 0.2 mg/L, OR CT not met, notify DWP by end of next business day.