

**OHA - Drinking Water Services -Turbidity Monitoring Report Form**  
**Conventional or Direct Filtration**

County: **Yamhill**  
 Month/Year: **Aug-24**

System Name: **City of Sheridan** ID#: **41 00811** WTP : **WTP-A**

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	OFF	OFF	0.070	0.135	0.200	OFF	0.200
2	OFF	OFF	0.075	0.070	OFF	OFF	0.075
3	OFF	OFF	OFF	0.080	OFF	OFF	0.080
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF
5	OFF	OFF	0.070	0.090	OFF	OFF	0.090
6	OFF	OFF	0.060	0.140	OFF	OFF	0.140
7	OFF	OFF	0.060	0.150	OFF	OFF	0.150
8	OFF	OFF	0.080	OFF	OFF	OFF	0.080
9	OFF	OFF	0.100	0.150	OFF	OFF	0.150
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12	OFF	OFF	0.080	0.091	OFF	OFF	0.091
13	OFF	OFF	0.070	0.090	0.181	OFF	0.181
14	OFF	OFF	0.093	OFF	OFF	OFF	0.093
15	OFF	OFF	0.080	OFF	OFF	OFF	0.080
16	OFF	OFF	0.150	OFF	OFF	OFF	0.150
17	OFF	OFF	OFF	OFF	OFF	OFF	OFF
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF
19	OFF	OFF	0.098	OFF	OFF	OFF	0.098
20	OFF	OFF	0.151	OFF	OFF	OFF	0.151
21	OFF	OFF	0.081	0.120	OFF	OFF	0.120
22	OFF	OFF	OFF	OFF	OFF	OFF	OFF
23	OFF	OFF	OFF	OFF	OFF	OFF	OFF
24	OFF	OFF	OFF	OFF	OFF	OFF	OFF
25	OFF	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	0.080	0.104	OFF	OFF	0.104
27	OFF	OFF	0.070	0.105	OFF	OFF	0.105
28	OFF	OFF	0.091	OFF	OFF	OFF	0.091
29	OFF	OFF	0.110	OFF	OFF	OFF	0.110
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31	OFF	OFF	OFF	OFF	OFF	OFF	OFF

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	✓ Yes / No	CT's met everyday? (see back)	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	✓ Yes / No	✓ Yes / No	✓ Yes / No
All turbidity readings < IFE <sup>2</sup> triggers	✓ Yes / No		

Notes:	PRINTED NAME: Gary N Mathis	
	SIGNATURE: <i>Gary N Mathis</i>	9/9/2024
	PHONE #: ( 971 ) 312-1892	CERT #:127558

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM correspond to continuous readings' maximum. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : WTP-A

System Name: City of Sheridan

ID#: 41 00811

Month/Year: Aug-24

Disinfection  
Giardia Log  
Inactiv:

0.5

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]		<b>formula</b>	Yes / No	[GPM]
1	200PM	0.42	65	27.3	15.7	7.0	12.2	Yes	1200
2	630AM	0.54	65	35.1	14.3	7.2	14.6	Yes	1100
3	1215PM	0.75	65	48.8	18.5	6.7	9.3	Yes	1200
4	130PM	0.42	65	27.3	18.7	6.7	8.9	Yes	1200
5	630AM	0.65	65	42.3	17.6	7.1	11.4	Yes	1100
6	630AM	0.5	65	32.5	18.1	7.2	11.3	Yes	1200
7	12:00 AM	0.91	65	59.2	16.6	7.1	12.6	Yes	1100
8	215PM	0.49	65	31.9	18.1	6.7	9.3	Yes	1200
9	800AM	0.48	65	31.2	17.4	7.1	11.3	Yes	1200
10	830AM	0.61	65	39.7	18.3	6.9	10.0	Yes	1000
11	915AM	0.81	65	52.7	17.0	6.9	11.2	Yes	1200
12	700AM	0.48	65	31.2	18.1	7.4	12.1	Yes	1000
13	1100AM	0.51	65	33.2	18.2	7.2	11.2	Yes	1100
14	630AM	0.98	65	63.7	17.4	6.7	10.3	Yes	1000
15	700AM	0.56	65	36.4	16.1	7.6	15.0	Yes	1100
16	1000AM	0.41	65	26.7	19.1	7.1	10.0	Yes	1000
17	900AM	0.64	65	41.6	16.9	7.2	12.4	Yes	1200
18	900AM	0.5	65	32.5	17.4	7.1	11.4	Yes	1100
19	1045AM	0.41	65	26.7	18.0	7.1	10.8	Yes	1000
20	645AM	0.27	65	17.6	14.8	7.1	13.2	Yes	1000
21	1000AM	0.31	65	20.2	18.7	7.0	9.8	Yes	1000
22	1230PM	0.57	65	37.1	17.7	7.1	11.2	Yes	1100
23	8000AM	0.74	65	48.1	13.5	7.1	15.2	Yes	1200
24	830AM	0.63	65	41.0	15.3	7.0	12.8	Yes	1000
25	830AM	0.63	65	41.0	15.3	6.7	11.4	Yes	1100
26	700AM	0.61	65	39.7	16.8	6.7	10.3	Yes	1000
27	330PM	0.4	65	26.0	15.0	7.4	14.8	Yes	1100
28	630AM	0.3	65	19.5	14.9	6.8	11.7	Yes	1000
29	645AM	0.51	65	33.2	12.9	6.9	14.3	Yes	1100
30	645AM	0.46	65	29.9	17.2	7.1	11.5	Yes	1200
31	1100am	0.73	65	47.5	17.6	6.9	10.7	Yes	1100

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

Revised October 2013