

OHA - Drinking Water Program - Turbidity Monitoring Report Form County:
 Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

System Name: City of Sumpter ID # 4100815 WTP: _____ Month/Year: July 2021

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1							0.046
2							0.042
3							0.046
4							0.046
5							0.045
6							0.045
7							0.045
8							0.043
9							0.043
10							0.044
11							0.045
12							0.045
13							0.045
14							0.046
15							0.044
16							0.045
17							0.046
18							0.044
19							0.043
20							0.045
21							0.048
22							0.051
23							0.043
24							0.049
25							0.049
26							0.048
27							0.045
28							0.045
29							0.046
30							0.047
31							0.045

Slow Sand/Membrane/DE Filtration/Unfiltered 95% of daily turbidity readings ≤ 1 NTU? ² <u>Yes / No</u> All daily turbidity readings ≤ 5 NTU? <u>Yes / No</u>	Monthly Summary (Answer Yes or No)	
	CT's met everyday? (see back) <u>Yes / No</u>	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <u>Yes / No</u>
Notes:	PRINTED NAME: <u>Ken Tucker</u>	
	SIGNATURE: <u>[Signature]</u>	DATE: <u>7-08-2021</u>
	PHONE #: <u>541 1760-9362</u>	CERT #: <u>8/10/21</u>

¹ 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. ² Filtered systems only.

System Name: City of Sumpter

ID #: 4100845

WTP

Month/Year

21-Jun

July 2021

Including continuous turbidity data, if applicable, for optimization recording purposes. readings' maximum. 2 Filtered systems only.

Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous

Date/ Time	Beginning	Ending	Difference	Minimum Cl ₂ Residual at 1" User (C) 3	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? 3	Peak Hourly Deand Flow
Jul-21				[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes/N o	
1 /	498246600	498597400	350800	0.6	66	18	22.0	7	36	Y	1218
2 /	498597400	498950800	353400	0.6	65	18	21.0	7	36	Y	1227
3 /	498950800	499295900	345100	0.5	67	28	19.9	7.1	23	Y	1198
4 /	499295900	499619700	323800	0.6	71	21	21.0	7	23	Y	1124
5 /	499619700	499983900	364200	0.4	63	21	20.1	7.1	23	Y	1265
6 /	499983900	500337600	353700	0.5	65	21	20.6	7	24	Y	1228
7 /	500337600	500673600	336000	0.6	69	21	20.8	7.1	20	Y	1167
8 /	500673600	500928900	255300	0.6	90	15	21.0	6.9	36	Y	886
9 /	500928900	501196300	267400	0.7	86	22	20.0	7	36	Y	928
10 /	501196300	501483000	286700	0.4	67	17	20.9	6.9	31	Y	995
11 /	501483000	501788800	305800	0.6	65	18	21.5	6.9	37	Y	1062
12 /	501788800	502059700	270900	0.5	69	21	21.2	7	37	Y	941
13 /	502059700	502301000	241300	0.7	70	18	20.9	6.9	15	Y	838
14 /	502301000	502655700	354700	0.5	65	21	20.3	7.1	15	Y	1232
15 /	502655700	502932100	276400	0.4	63	21	20.3	7.3	15	Y	960
16 /	502932100	503192000	259900	0.5	65	18	20.7	6.9	15	Y	902
17 /	503192000	503501300	309300	0.4	74	21	20.4	7.1	15	Y	1074
18 /	503501300	503767000	265700	0.5	87	21	20.3	7	15	Y	923
19 /	503767000	504056800	289800	0.6	80	18	20.9	6.9	15	Y	1006
20 /	504056800	504316400	259600	0.6	89	18	20.7	6.8	15	Y	901
21 /	504316400	504637100	320700	0.5	72	18	21.1	6.9	15	Y	1114
22 /	504637100	504906800	269700	0.5	85	18	20.2	6.7	15	Y	936
23 /	504906800	505171300	264500	0.4	87	23	19.8	6.7	15	Y	918
24 /	505171300	505454800	283500	0.4	81	15	20.7	6.5	15	Y	984
25 /	505454800	505724600	269800	0.6	85	18	20.5	6.6	10	Y	937
26 /	505724600	505973200	248600	0.5	93	15	20.2	6.8	15	Y	863
27 /	505973200	506245200	272000	0.6	85	13	20.6	6.4	15	Y	944
28 /	506245200	506514200	269000	0.4	86	12	21.5	6.5	10	Y	934
29 /	506514200	506773400	259200	0.5	89	15	21.0	6.8	15	Y	900
30 /	506773400	507043700	270300	0.5	85	15	21.4	6.6	12	Y	939
31 /	507043700	507329200	285500	0.5	81	13	21.7	6.5	10	y	991

3 If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours.Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-alt-unfiltered.pdf

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350