

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

County: Douglas

System Name: Sutherlin, City of ID# OR4100847				WTP: WTP-A MONTH/YEAR		November/2023	
Nonpariel							
Day	12 AM NTU	4 AM NTU	8 AM NTU	Noon NTU	4 PM NTU	8 PM NTU	¹ Highest Reading of the Day NTU
1	OFF	0.068	OFF	0.026	0.017	OFF	0.102
2	0.018	OFF	OFF	0.017	OFF	OFF	0.021
3	0.018	OFF	OFF	0.019	0.018	OFF	0.021
4	OFF	OFF	0.019	0.019	OFF	OFF	0.021
5	0.023	OFF	OFF	0.028	0.026	OFF	0.181
6	0.031	OFF	OFF	0.025	OFF	OFF	0.031
7	0.024	OFF	OFF	0.028	0.026	OFF	0.034
8	OFF	0.030	0.024	OFF	OFF	OFF	0.056
9	0.024	OFF	OFF	0.026	OFF	OFF	0.029
10	0.026	0.025	OFF	0.025	OFF	0.027	0.027
11	0.025	OFF	0.027	0.027	OFF	OFF	0.035
12	OFF	0.028	OFF	0.028	OFF	OFF	0.032
13	0.030	OFF	OFF	0.032	OFF	OFF	0.039
14	OFF	0.035	OFF	OFF	OFF	0.038	0.042
15	0.038	OFF	OFF	0.022	0.039	OFF	0.096
16	OFF	0.023	0.022	OFF	0.022	OFF	0.024
17	OFF	0.043	0.023	0.023	OFF	0.025	0.043
18	0.023	OFF	OFF	0.023	OFF	OFF	0.044
19	0.023	OFF	OFF	0.030	OFF	OFF	0.243
20	0.028	0.028	0.033	OFF	OFF	0.059	0.120
21	0.033	OFF	0.032	0.037	0.047	OFF	0.109
22	OFF	OFF	0.036	0.048	0.040	OFF	0.143
23	OFF	0.036	OFF	0.037	0.039	OFF	0.068
24	OFF	OFF	0.044	0.046	OFF	OFF	0.080
25	0.052	0.053	OFF	OFF	0.061	OFF	0.143
26	OFF	0.065	0.073	0.073	OFF	OFF	0.230
27	0.118	0.084	OFF	0.020	0.055	0.077	0.205
28	0.138	OFF	OFF	0.098	0.020	OFF	0.218
29	OFF	0.028	0.034	0.062	OFF	0.074	0.280
30	OFF	0.021	OFF	0.038	OFF	OFF	0.065
Conventional or Direct Filtration				Monthly Summary (Answer Yes or No)			
95% of the 4-hour turbidity reading \leq 0.3 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No				CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No		All Cl ₂ residual at entry point \geq 0.2mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No	
All the 4-hour turbidity readings \leq 1 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No							
All turbidity readings < IFE ² triggers? <input checked="" type="radio"/> Yes <input type="radio"/> No							
Notes:				Printed Name: Alan Taylor			
				Signature: Alan Taylor		Date: 12/5/23	
				Phone #: (541) 459-5768		Cert #: 08797	

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 IFE = Individual Filter Effluent. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

Sutherlin, City of		ID# OR4100847	WTP: WTP-A		MONTH/YEAR:	November/2023		Required Log Inactivation: 1.0
Nonpariel								
Date/ Time	Minimum CL ₂ Residual at 1st user (C) ³	Contact Time (T)	Actual CT	Temp.	pH	Required CT	CT Met ³	Peak Hourly Demand Flow
	PPM or MG/L	Minutes	C x T	° C		Use Tables	Y/N	[GPM]
1/ 11:00	1.6	50.9	81.44	10	7.04	48	Y	1400
2/ 11:00	1.6	50.9	81.44	12	7.05	48	Y	1400
3/ 11:00	1.6	50.9	81.44	14	7.09	48	Y	1400
4/ 8:55	1.6	50.9	81.44	14	6.99	40	Y	1400
5/ 11:00	1.5	50.9	76.35	13	6.52	40	Y	1400
6/ 11:00	1.5	50.9	76.35	14	6.81	40	Y	1400
7/ 11:40	1.6	50.9	81.44	13	6.89	40	Y	1400
8/ 9:45	1.6	50.9	81.44	11	6.89	40	Y	1400
9/ 10:00	1.5	50.9	76.35	10	7.02	48	Y	1400
10/ 11:15	1.7	50.9	86.53	12	6.99	41	Y	1400
11/ 9:53	1.6	50.9	81.44	12	7.02	48	Y	1400
12/ 10:30	1.6	50.9	81.44	11	7.06	48	Y	1400
13/ 10:30	1.6	50.9	81.44	12	7.05	48	Y	1400
14/ 10:30	1.5	50.9	76.35	12	7.01	48	Y	1400
15/ 10:00	1.5	50.9	76.35	13	7.01	48	Y	1400
16/ 8:30	1.5	50.9	76.35	12	7.04	48	Y	1400
17/ 8:30	1.4	50.9	71.26	12	7.02	47	Y	1400
18/ 11:13	1.5	50.9	76.35	13	7.05	48	Y	1400
19/ 11:03	1.6	50.9	81.44	12	6.87	40	Y	1400
20/ 9:00	1.5	50.9	76.35	10	6.94	40	Y	1400
21/ 9:50	1.5	50.9	76.35	10	7.08	48	Y	1400
22/ 10:15	1.5	50.9	76.35	10	6.98	40	Y	1400
23/ 13:15	1.5	50.9	76.35	11	7.03	48	Y	1400
24/ 9:45	1.5	50.9	76.35	10	7.07	48	Y	1400
25/ 11:00	1.6	50.9	81.44	8	7.14	64	Y	1400
26/ 6:07	1.6	50.9	81.44	8	6.95	53	Y	1400
27/ 2:30	1.4	50.9	71.26	5	7.17	62	Y	1400
28/ 11:20	1.6	50.9	81.44	6	7.03	64	Y	1400
29/ 10:30	1.7	50.9	86.53	6	7.26	65	Y	1400
30/ 10:30	1.5	50.9	76.35	8	7.02	64	Y	1400

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.