

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** **FEBRURARY/2025**

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	0.033	OFF	OFF	0.056	0.026	0.036	0.175
2	0.061	OFF	OFF	0.052	0.025	0.048	0.191
3	0.032	OFF	OFF	0.031	0.027	0.051	0.106
4	OFF	OFF	OFF	0.040	0.080	0.149	0.200
5	0.036	OFF	OFF	OFF	0.036	0.034	0.180
6	0.040	OFF	OFF	0.124	0.107	0.069	0.236
7	0.263	OFF	OFF	OFF	0.027	0.031	0.263
8	0.083	OFF	OFF	OFF	0.039	0.036	0.114
9	0.034	OFF	OFF	OFF	0.031	0.034	0.103
10	0.067	OFF	OFF	0.029	0.033	0.026	0.067
11	OFF	OFF	OFF	0.035	0.039	0.027	0.045
12	0.028	OFF	OFF	0.035	0.024	0.020	0.072
13	OFF	OFF	OFF	OFF	0.041	0.026	0.066
14	0.023	OFF	OFF	0.070	0.029	0.030	0.206
15	0.027	0.063	OFF	0.025	0.021	0.041	0.079
16	0.025	0.026	0.026	0.026	0.025	0.024	0.061
17	0.027	0.023	0.029	0.024	0.023	0.024	0.040
18	0.035	0.115	0.030	0.030	0.025	0.042	0.115
19	0.030	OFF	OFF	0.041	0.050	0.129	0.213
20	0.117	OFF	OFF	0.173	0.147	OFF	0.271
21	0.202	0.160	0.177	0.053	0.037	0.031	0.227
22	0.035	0.028	0.044	0.036	0.036	OFF	0.085
23	OFF	0.129	0.254	0.034	0.031	0.030	0.254
24	0.024	0.026	OFF	0.036	0.054	0.030	0.117
25	0.041	OFF	OFF	OFF	0.069	0.076	0.173
26	0.045	OFF	OFF	OFF	0.095	OFF	0.226
27	OFF	OFF	OFF	0.049	0.077	0.045	0.199
28	0.037	OFF	0.050	0.031	OFF	OFF	0.167

Conventional or Direct Filtration

95% of the 4-hour turbidity reading $\leq$ 0.3 NTU? **Yes** / No
 All the 4-hour turbidity readings $\leq$ 1 NTU? **Yes** / No
 All turbidity readings < IFE² triggers? **Yes** / No²

Monthly Summary (Answer Yes or No)

CT's met everyday?
 (see back)
Yes / No

All Cl₂ residual at entry point $\geq$ 0.2mg/l?
Yes / No

Notes:

Printed Name: **Alan Taylor**

Signature: **Alan Taylor**

Date: **3/5/25**

Phone #: **(541) 459-5768**

Cert #: **8797**

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: FEBRUARY/2025		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	YES/NO	[GPM]	
1/ 12:00	1.5	50.9	76.35	10	6.67	40	YES	1400	
2/ 12:20	1.5	50.9	76.35	11	6.71	40	YES	1400	
3/ 10:53	1.6	50.9	81.44	9	6.69	53	YES	1400	
4/ 14:10	1.6	50.9	81.44	8	6.92	53	YES	1400	
5/ 14:45	1.6	50.9	81.44	9	6.85	53	YES	1400	
6/ 14:10	1.5	50.9	76.35	9	6.94	53	YES	1400	
7/ 12:50	1.5	50.9	76.35	9	6.78	53	YES	1400	
8/ 2:00	1.4	50.9	71.26	9	6.83	52	YES	1400	
9/ 13:20	1.6	50.9	81.44	10	6.77	40	YES	1400	
10/ 11:05	1.6	50.9	81.44	8	6.79	53	YES	1400	
11/ 10:10	1.5	50.9	76.35	8	6.94	53	YES	1400	
12/ 10:27	1.5	50.9	76.35	7	6.92	53	YES	1400	
13/ 10:00	1.6	50.9	81.44	8	6.87	53	YES	1400	
14/ 14:00	1.6	50.9	81.44	10	6.62	40	YES	1400	
15/ 1:00	1.3	50.9	66.17	10	6.87	39	YES	1400	
16/ 11:30	1.6	50.9	81.44	11	6.83	40	YES	1400	
17/ 9:16	1.4	50.9	71.26	11	6.80	39	YES	1400	
18/ 10:30	1.5	50.9	76.35	11	6.68	40	YES	1400	
19/ 13:35	1.5	50.9	76.35	12	6.77	40	YES	1400	
20/ 14:20	1.5	50.9	76.35	12	6.92	40	YES	1400	
21/ 1:00	1.5	50.9	76.35	12	6.73	40	YES	1400	
22/ 9:30	1.4	50.9	71.26	12	6.95	39	YES	1400	
23/ 14:45	1.4	50.9	71.26	12	6.90	39	YES	1400	
24/ 10:45	1.5	50.9	76.35	13	6.69	40	YES	1400	
25/ 13:20	1.4	50.9	71.26	11	6.69	39	YES	1400	
26/ 16:30	1.6	50.9	81.44	12	6.75	40	YES	1400	
27/ 11:30	1.6	50.9	81.44	10	7.16	48	YES	1400	
28/ 13:11	1.6	50.9	81.44	11	6.92	40	YES	1400	

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