

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

County: Douglas

System Name: Sutherlin, City of ID# OR4100847 WTP: WTP-A December, 2025							
Nonpareil							
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	OFF	0.021	0.021	OFF	OFF	0.023
2	OFF	OFF	0.021	0.022	OFF	OFF	0.026
3	OFF	OFF	0.021	0.029	0.021	OFF	0.103
4	OFF	OFF	0.020	0.021	OFF	OFF	0.025
5	OFF	OFF	0.024	0.021	0.022	OFF	0.131
6	OFF	OFF	OFF	0.035	0.031	OFF	0.082
7	OFF	OFF	0.028	0.025	0.028	OFF	0.063
8	OFF	OFF	OFF	0.025	OFF	OFF	0.057
9	OFF	OFF	OFF	0.024	OFF	OFF	0.090
10	OFF	OFF	0.024	0.022	0.023	OFF	0.029
11	0.022	OFF	OFF	0.023	OFF	OFF	0.030
12	0.023	OFF	OFF	0.027	0.024	OFF	0.027
13	0.024	OFF	OFF	0.024	0.027	OFF	0.034
14	OFF	OFF	0.036	0.027	OFF	0.027	0.078
15	0.047	OFF	OFF	0.028	0.031	OFF	0.084
16	0.029	OFF	OFF	0.029	0.027	OFF	0.067
17	OFF	OFF	OFF	0.055	OFF	0.030	0.068
18	OFF	OFF	0.031	0.045	0.047	0.036	0.271
19	OFF	OFF	OFF	0.038	0.032	OFF	0.077
20	OFF	0.074	0.040	OFF	OFF	0.047	0.175
21	0.105	OFF	OFF	0.058	0.128	OFF	0.141
22	0.033	0.062	OFF	0.057	0.037	OFF	0.197
23	0.059	0.042	OFF	0.046	0.045	OFF	0.195
24	0.213	0.052	OFF	0.141	0.043	OFF	0.285
25	OFF	0.047	OFF	OFF	0.056	0.064	0.236
26	OFF	OFF	OFF	0.049	0.056	OFF	0.172
27	OFF	OFF	0.101	OFF	0.041	OFF	0.124
28	OFF	OFF	0.051	0.045	OFF	0.078	0.264
29	0.085	OFF	OFF	0.060	OFF	OFF	0.185
30	0.065	OFF	OFF	0.073	0.099	OFF	0.149
31	OFF	0.121	0.100	0.090	OFF	OFF	0.224

Conventional or Direct Filtration 95% of the 4-hour turbidity reading ≤ 0.3 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No All the 4-hour turbidity readings ≤ 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 ²		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No All Cl ₂ residual at entry point ≥ 0.2mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No	
Notes:		Printed Name: Alan Taylor	
		Signature: Alan Taylor	Date: 1/6/26
		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: December, 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	Y/N	[GPM]
1/ 10:00	1.6	50.9	81.44	12	6.75	40	YES	1400
2/ 10:35	1.6	50.9	81.44	11	6.71	40	YES	1400
3/ 10:30	1.6	50.9	81.44	11	6.76	40	YES	1400
4/ 9:45	1.6	50.9	81.44	10	6.73	40	YES	1400
5/ 10:00	1.6	50.9	81.44	10	6.68	40	YES	1400
6/ 12:30	1.5	50.9	76.35	10	6.75	40	YES	1400
7/ 10:15	1.5	50.9	76.35	12	6.62	40	YES	1400
8/ 10:50	1.6	50.9	81.44	13	6.74	40	YES	1400
9/ 10:20	1.6	50.9	81.44	13	6.89	40	YES	1400
10/ 9:50	1.6	50.9	81.44	14	6.78	40	YES	1400
11/ 10:40	1.6	50.9	81.44	14	6.76	40	YES	1400
12/ 11:00	1.5	50.9	76.35	14	6.77	40	YES	1400
13/ 11:55	1.5	50.9	76.35	14	6.95	40	YES	1400
14/ 10:00	1.5	50.9	76.35	9	6.71	53	YES	1400
15/ 11:50	1.5	50.9	76.35	14	6.73	40	YES	1400
16/ 11:30	1.5	50.9	76.35	13	6.60	40	YES	1400
17/ 11:20	1.4	50.9	71.26	12	6.76	39	YES	1400
18/ 10:00	1.5	50.9	76.35	13	6.67	40	YES	1400
19/ 10:55	1.5	50.9	76.35	13	7.02	48	YES	1400
20/ 10:00	1.4	50.9	71.26	12	6.89	39	YES	1400
21/ 14:00	1.6	50.9	81.44	12	6.60	40	YES	1400
22/ 13:00	1.5	50.9	76.35	13	6.60	40	YES	1400
23/ 11:20	1.5	50.9	76.35	12	6.60	40	YES	1400
24/ 13:00	1.6	50.9	81.44	12	6.67	40	YES	1400
25/ 12:20	1.5	50.9	76.35	12	6.67	40	YES	1400
26/ 12:10	1.6	50.9	81.44	11	6.65	40	YES	1400
27/ 11:00	1.6	50.9	81.44	11	6.61	40	YES	1400
28/ 11:50	1.5	50.9	76.35	10	6.77	40	YES	1400
29/ 10:47	1.6	50.9	81.44	10	6.77	40	YES	1400
30/ 10:32	1.6	50.9	81.44	11	6.62	40	YES	1400
31/ 8:05	1.5	50.9	76.35	10	6.64	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.