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

County: Douglas

Month/Year: September, 23

stem Nai	me: Sutherlin	, City of		ID#: 41 0084	17		WTP: TP-B, Cooper Creek WTP		
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	OFF	OFF	OFF	OFF	OFF		
2	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
3	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
5	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
6	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
7	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
8	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
9	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
12	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
13	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
14	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
16	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
17	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
19	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
20	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
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	OFF	OFF	OFF	OFF	OFF		
27	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
28	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
29	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
30	OFF	OFF	OFF	OFF	OFF	OFF	OFF		
6									
	Convention	nal or Direc	t Filtration		Monthly Summary (Answer Yes or No)				
95% of	4-hour turbidit	y readings ≤ 0.	3 NTU?	Yes No	CT's met everyday? (see back)		All Cl2 residual at entry point ≥ 0.2 mg/l?		
All 4	Lhour turbidity	readings ≤ 1 N	ITU?	Yes No					
	turbidity readir	-		(Yes ) No	(Yes ) No (Yes)/ No				
tes:					NAME:	Alan	Tevlar		
					SIGNATURI	710	- Isla DATE: 10/3/23		
					PHONE #: (	541 ) 459	-5768 CERT#: 8797		

<sup>&</sup>lt;sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not 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: B - Cooper Creek

System Name: Sutherlin, City of ID#: 41 00847 Month/Year: Sept, 23 Disinfection Glardia Log 0.500 Inactiv:

Day	Time	Minimum Cl <sub>2</sub> Residual at 1st User	Contact Time (T)	Actual CT	Temp	рН	Required CT	CT Met? 3	Peak Hourly Demand Flow
		[ppm or mg/L]	[minutes]	CXT	[° C]		formula	Yes / No	[GPM]
1	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
3	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
4	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
5	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
6	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
7	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
8	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
9	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
10	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
11	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
12	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
13	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
14	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
15	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
16	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
17	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
18	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
19	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
20	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
21	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
22	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
23	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
24	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
25	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
27	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
28	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
29	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF
30	OFF	OFF	70.00	OFF	OFF	OFF	OFF	OFF	OFF

If Cl2 at entry point < 0.2 mg/l or CT not met, DWS to be notified by end of next business day.

Revised October 2013