

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

County: Wasco  
 Month/Year: Apr-22

System Name: City of The Dalles ID#: 41-00869 WTP: A

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	<del>0.07</del>	0.05	0.05	0.05	0.05	0.05	0.05
2	0.05	0.05	0.04	0.04	0.05	0.04	0.05
3	0.05	0.05	0.05	0.05	0.04	0.05	0.05
4	0.05	0.05	0.05	0.05	0.04	0.04	0.05
5	0.04	0.05	0.04	0.05	0.05	0.04	0.05
6	0.04	0.05	0.05	0.05	0.04	0.04	0.05
7	0.04	0.05	0.05	0.07	0.05	0.05	0.07
8	0.05	0.04	0.04	0.05	0.05	0.05	0.05
9	0.05	0.05	0.05	0.05	0.05	0.05	0.05
10	0.05	0.05	0.05	0.05	0.05	0.05	0.05
11	0.05	0.05	0.06	0.06	0.05	0.05	0.06
12	0.05	0.05	0.05	0.05	0.05	0.05	0.05
13	0.05	0.05	0.05	0.05	0.05	0.05	0.05
14	0.05	0.05	0.05	0.05	0.05	0.05	0.05
15	0.05	0.05	0.05	0.05	0.05	0.05	0.05
16	0.05	0.05	0.05	0.05	0.05	0.05	0.05
17	0.05	0.05	0.05	0.05	0.05	0.05	0.05
18	0.05	0.05	0.06	0.06	0.05	0.05	0.06
19	0.05	0.05	0.06	0.05	0.05	0.05	0.06
20	0.05	0.05	0.05	0.05	0.05	0.05	0.05
21	0.05	0.05	0.05	0.05	0.05	0.05	0.05
22	0.05	0.05	0.05	0.05	0.05	0.05	0.05
23	0.05	0.05	0.05	0.05	0.04	0.05	0.05
24	0.05	0.05	0.05	0.05	0.05	0.05	0.05
25	0.05	0.05	0.05	0.05	0.05	0.05	0.05
26	0.05	0.05	0.05	0.06	0.05	0.05	0.06
27	0.05	0.05	0.05	0.05	0.05	0.06	0.06
28	0.05	0.05	0.05	0.05	0.05	0.05	0.05
29	0.05	0.05	0.05	0.05	0.06	0.05	0.06
30	0.05	0.05	0.05	0.05	0.05	0.05	0.05

<b>Conventional or Direct Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	<input checked="" type="checkbox"/> Yes / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes / No	<input checked="" type="checkbox"/> Yes / No	<input checked="" type="checkbox"/> Yes / No
All turbidity readings < IFE <sup>2</sup> triggers	<input checked="" type="checkbox"/> Yes / No		
1AM Lab April 1st Plant was offline <input checked="" type="checkbox"/>		PRINTED NAME: <u>Larry McCollum</u>	<u>04 MAY 22</u>
		SIGNATURE:	DATE: <u>April 9, 2022</u>
		PHONE #: <u>(541) 298-2248 x5000</u>	CERT #: <u>T-08756</u>

<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)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP : A

System Name:	City of The Dalles	ID#: 41	-00869	Month/Year:	Apr-22	Disinfection Giardia Log Inactive:	1
--------------	--------------------	---------	--------	-------------	--------	--	---

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1 / 0900	1.13	1105	1248.7	6.5	7.39	56.7	YES	2500
2 / 0900	1.14	1105	1259.7	7.5	7.32	51.8	YES	2500
3 / 0900	1.12	1424	1594.9	7.1	7.34	53.4	YES	1940
4 / 0900	1.13	1424	1609.1	7.6	7.39	52.7	YES	1940
5 / 0900	1.17	1424	1666.1	5.7	7.55	63.7	YES	1940
6 / 0900	1.15	1424	1637.6	5.6	7.28	58.1	YES	1940
7 / 0900	1.22	1244	1517.7	7.1	7.23	52.0	YES	2220
8 / 0900	1.19	1046	1244.7	7.9	7.50	54.1	YES	2640
9 / 0900	1.25	1046	1307.5	5.9	7.43	60.8	YES	2640
10 / 0900	1.4	1046	1464.4	5.5	7.36	61.9	YES	2640
11 / 0900	1.24	1170	1450.8	3.4	7.35	69.9	YES	2360
12 / 0900	1.24	1424	1765.8	5.2	7.22	59.0	YES	1940
13 / 0900	1.17	1424	1666.1	5.3	7.24	58.5	YES	1940
14 / 0900	1.15	1424	1637.6	6.0	7.26	56.1	YES	1940
15 / 0900	1.18	1424	1680.3	5.4	7.35	60.6	YES	1940
16 / 0900	1.22	1424	1737.3	6.0	7.30	57.4	YES	1940
17 / 0900	1.16	1424	1651.8	5.4	7.20	57.2	YES	1940
18 / 0900	1.11	1424	1580.6	6.0	7.18	54.3	YES	1940
19 / 0900	1.11	1244	1380.8	6.8	7.20	51.8	YES	2220
20 / 0900	1.18	1105	1303.9	7.5	7.24	50.5	YES	2500
21 / 0900	1.15	994	1143.1	6.5	7.35	56.0	YES	2780
22 / 0900	1.2	1105	1326.0	6.3	7.34	56.9	YES	2500
23 / 0900	1.14	1244	1418.2	6.1	7.28	56.1	YES	2220
24 / 0900	1.14	1244	1418.2	6.5	7.23	53.6	YES	2220
25 / 0900	1.18	1244	1467.9	7.6	7.17	49.0	YES	2220
26 / 0900	1.15	1244	1430.6	7.6	7.15	48.5	YES	2220
27 / 0900	1.14	994	1133.2	7.8	7.28	50.0	YES	2780
28 / 0900	1.16	903	1047.5	7.5	7.21	49.9	YES	3060
29 / 0900	1.17	903	1056.5	6.7	7.26	53.6	YES	3060
30 / 0900	1.05	903	948.2	8.5	7.19	45.8	YES	3060

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

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

PRINTED NAME: Larry McCollum	DATE: April 3, 2022
SIGNATURE: <i>[Signature]</i>	CERT #: T-08756
PHONE #: (541) 298-2248 x5000	