

OHA - Drinking Water Services -Turbidity Monitoring Report Form

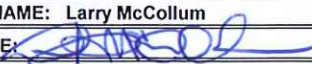
County: Wasco

Conventional or Direct Filtration

Month/Year: Feb-24

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 ¹ [NTU]
1	0.07	0.06	0.07	0.08	0.06	0.06	0.08
2	0.07	0.08	0.07	0.07	0.05	0.05	0.08
3	0.06	0.06	0.06	0.06	0.06	0.05	0.06
4	0.07	0.06	0.06	0.05	0.06	0.07	0.07
5	0.06	0.06	0.07	0.08	0.05	0.06	0.08
6	0.07	0.07	0.07	0.07	0.06	0.06	0.07
7	0.07	0.06	0.07	0.07	0.06	0.06	0.07
8	0.07	0.09	0.07	0.07	0.08	0.06	0.09
9	0.07	0.07	0.07	0.08	0.07	0.07	0.08
10	0.06	0.07	0.07	0.06	0.05	0.07	0.07
11	0.06	0.07	0.06	0.05	0.05	0.05	0.07
12	0.06	0.06	0.06	0.07	0.07	0.08	0.08
13	0.06	0.06	0.06	0.06	0.06	0.06	0.06
14	0.07	0.07	0.06	0.07	0.07	0.07	0.07
15	0.07	0.08	0.07	0.06	0.07	0.07	0.08
16	0.07	0.08	0.08	0.07	0.07	0.08	0.08
17	0.07	0.07	0.07	0.07	0.07	0.07	0.07
18	0.07	0.07	0.07	0.08	0.07	0.07	0.08
19	0.07	0.07	0.07	0.07	0.05	0.05	0.07
20	0.08	0.07	0.06	0.09	0.08	0.09	0.09
21	0.11	0.08	0.14	0.07	0.07	0.08	0.14
22	0.08	0.09	0.09	0.07	0.07	0.05	0.09
23	0.07	0.07	0.07	0.07	0.05	0.06	0.07
24	0.09	0.08	0.07	0.07	0.05	0.06	0.09
25	0.07	0.08	0.07	0.06	0.07	0.06	0.08
26	0.07	0.06	0.07	0.07	0.06	0.07	0.07
27	0.07	0.08	0.07	0.08	0.07	0.08	0.08
28	0.07	0.07	0.07	0.07	0.05	0.07	0.07
29	0.07	0.08	0.08	0.06	0.08	0.07	0.08

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	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?	Yes / No	Yes / No	Yes / No
All turbidity readings < IFE ² triggers	Yes / No		

Notes:	PRINTED NAME: Larry McCollum	
	SIGNATURE: 	6-Mar-24
	PHONE #: (541) 298-2248 x5000	CERT #: T-08756

¹ 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. ² 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:	Feb-24	Disinfection Giardia Log Inactive:	1
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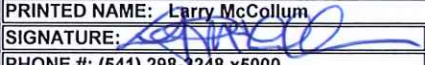
Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1 / 0900	1.08	1328	1434.2	4.3	7.23	61.8	YES	2080
2 / 0900	1.12	1328	1487.4	4.5	7.38	64.6	YES	2080
3 / 0900	1.19	1328	1580.3	4.5	7.32	63.8	YES	2080
4 / 0900	1.14	1805	2057.7	4.1	7.49	69.3	YES	1530
5 / 0900	1.11	1526	1693.9	4.9	7.46	64.7	YES	1810
6 / 0900	1.13	1328	1500.6	5.1	7.44	63.5	YES	2080
7 / 0900	1.07	1244	1331.1	4.3	7.24	61.9	YES	2220
8 / 0900	1.11	1244	1380.8	4.5	7.20	60.5	YES	2220
9 / 0900	1.16	1526	1770.2	5.0	7.35	62.1	YES	1810
10 / 0900	1.1	1654	1819.4	4.8	7.38	63.2	YES	1670
11 / 0900	1.04	1654	1720.2	4.8	7.32	61.4	YES	1670
12 / 0900	1.08	1170	1263.6	5.3	7.36	60.5	YES	2360
13 / 0900	1.14	1170	1333.8	4.4	7.31	63.6	YES	2360
14 / 0900	1.06	1328	1407.7	4.3	7.32	63.7	YES	2080
15 / 0900	1.17	1526	1785.4	3.1	7.31	69.8	YES	1810
16 / 0900	1.14	1526	1739.6	3.0	7.48	74.5	YES	1810
17 / 0900	1.15	1654	1902.1	3.2	7.35	70.1	YES	1670
18 / 0900	1.14	1987	2265.2	3.1	7.33	70.0	YES	1390
19 / 0900	1.15	1654	1902.1	3.7	7.43	69.8	YES	1670
20 / 0900	1.14	1654	1885.6	4.4	7.25	62.2	YES	1670
21 / 0900	1.07	1244	1331.1	4.8	7.26	60.3	YES	2220
22 / 0900	1.17	1105	1292.9	4.4	7.36	65.0	YES	2500
23 / 0900	0.99	1424	1409.8	4.4	7.37	63.9	YES	1940
24 / 0900	1.04	1424	1481.0	5.3	7.48	62.9	YES	1940
25 / 0900	1.11	1987	2205.6	6.1	7.29	56.1	YES	1390
26 / 0900	1.1	1328	1460.8	5.8	7.36	58.6	YES	2080
27 / 0900	1.04	1328	1381.1	3.9	7.39	67.0	YES	2080
28 / 0900	1.08	1328	1434.2	4.8	7.34	62.1	YES	2080
29 / 0900	1.16	1328	1540.5	5.5	7.31	59.2	YES	2080

³ If Cl₂ 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: 6-March-24
SIGNATURE: 	CERT #: T-08756
PHONE #: (541) 298-2248 x5000	