

OHA - Drinking Water Services - Turbidity Monitoring Report
 Conventional or Direct Filtration County: Columbia

Name: Vernonia, City of ID# OR4100922 WTP:WTP-A Month/Year: Sept, 2024

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	off	off	.03	.03	off	.04	.17
2			.03	.03	off	off	.09
3			.04	.06	.04		.10
4			.04	.04	off		.08
5			.03	.05	.04		.20
6			.04	.08	off	↓	.14
7			off	.06	.05	off	.18
8			↓	.05	off		.07
9			.04	.04			.15
10			.04	.04			.15
11			.06	.05			.20
12			.05	.05			.17
13			.06	.04			.15
14			.04	.05			.15
15			.04	.03			.25
16			.05	.06			.16
17			.04	.09			.27
18			.05	.06			.18
19			.03	.03	↓		.06
20			.05	.05	.05		.22
21			off	.04	.05		.26
22			↓	.03	off		.15
23			.05	.05			.15
24			.04	.04			.24
25			.03	.06			.12
26			.04	.04			.09
27			.06	.05	↓		.22
28			.04	.05	↓		.16
29			off	.04	.06		.27
30	↓	↓	.05	.07	off	↓	.21
31	↓	↓	.	.	.	↓	

Conventional or Direct Filtration Monthly Summary		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings < 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	All the 4-hour turbidity readings < NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ² residuals at entry point > 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All turbidity reading < IFE ² triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No ²		Notes:	
PRINTED NAME: <u>Jeff Burd</u>		SIGNATURE: <u>Jeff Burd</u>	
Phone # 503-429-6921		Date: <u>10-10-24</u>	
		CERT# <u>6091</u>	

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12AM" - "8PM" may not correspond to continuous readings' maximum.

² IFE = Individ. Filter Effl. (OAR 333-061-0040(1)(d)(B&C))

Sept. 2024

OHA - Drinking Water Program - Surface Water Quality Data Form - Giardia Inactivation								
Name: Vernonia, City of			ID# OR4100922	WTP:- Month/Year:			Log Requirement: 0.5	
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]	CXT	[°C]		Use Tables	Yes / No	[GPM]
1/ 2:00	1.7	34	58	19	7.3	24	yes	605
2/ 1:00	1.3	34	44	20	7.5	23	yes	605
3/ 10:00	1.5	34	51	19	7.3	23		605
4/ 12:40	1.6	34	54	18	7.3	25		605
5/ 11:45	1.7	34	58	19	7.3	24		605
6/ 11:00	1.6	34	54	20	7.4	23		605
7/ 1:30	1.5	34	51	21	7.4	21		605
8/ 3:00	1.5	34	51	20	7.3	21		605
9/ 8:40	1.4	34	48	19	7.4	24		605
10/ 10:00	1.4	34	48	19	7.4	24		605
11/ 1:10	1.4	34	48	19	7.4	24		605
12/ 10:00	1.4	34	48	18	7.4	25		605
13/ 11:00	1.4	34	48	18	7.4	25		605
14/ 8:00	1.5	34	51	18	7.4	25		605
15/ 9:00	1.5	34	51	18	7.4	25		605
16/ 3:00	1.4	34	48	18	7.4	24		605
17/ 2:00	1.4	34	48	18	7.4	24		605
18/ 11:00	1.4	34	48	18	7.4	24		605
19/ 1:30	1.4	34	48	18	7.4	24		605
20/ 1:50	1.4	34	48	18	7.4	24		605
21/ 11:30	1.4	34	48	18	7.5	26		605
22/ 2:00	1.4	34	48	18	7.5	26		605
23/ 1:00	1.6	34	54	18	7.5	27		605
24/ 12:30	1.5	34	51	18	7.3	24		605
25/ 10:00	1.5	34	51	17	7.4	27		605
26/ 1:30	1.4	34	48	17	7.5	28		605
27/ 2:40	1.4	34	48	17	7.5	28		605
28/ 10:30	1.6	34	54	17	7.4	28		605
29/ 1:00	1.5	34	51	17	7.4	27		605
30/ 9:15	1.3	34	44	17	7.4	27		605
31/		34						605

³ If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours