

**OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Lincoln
Conventional or Direct Filtration**

System Name: SW LINCOLN CO WATER DIST ID #: OR4100925 **WTP:-WTP- A Month/Year:** February 2022

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day [NTU]
1	OFF	OFF	OFF	.068	.028	.026	.092
2	.020	.019	.019	.021	.025	.028	.035
3	.035	.067	OFF	.030	.024	.023	.094
4	.021	.023	OFF	.024	.025	OFF	.026
5	OFF						
6	OFF						
7	OFF	OFF	.054	.022	.023	.018	.099
8	.018	.019	.018	.020	.020	.022	.023
9	.020	OFF	OFF	.021	.027	OFF	.033
10	OFF	OFF	OFF	OFF	.023	.027	.037
11	.032	OFF	.026	.025	OFF	OFF	.033
12	OFF						
13	OFF						
14	OFF						
15	OFF	OFF	OFF	.022	.021	.021	.028
16	.031	unavailable					.031
17					.018	OFF	.039
18	OFF	OFF	.020	.041	OFF	OFF	.041
19	OFF						
20	OFF						
21	OFF						
22	OFF	OFF	OFF	.024	.019	.023	.029
23	.022	.021	.022	.022	.027	.029	.030
24	.026	.037	.025	.029	.027	.030	.048
25	.032	OFF	.060	OFF	OFF	OFF	.060
26	OFF						
27	OFF						
28	OFF						
29							
30							
31							

Conventional or Direct Filtration 95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All the 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All turbidity readings < IFE ² triggers? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No ²	Monthly Summary (Answer Yes or No)	
	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
Notes:	PRINTED NAME: BARRY ARNOLD	
	SIGNATURE: Barry Arnold	DATE: 3-4-22
	PHONE #: (541) 547-3315	CERT #: 3636

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. IFE = Individ. Filter Eff. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program -- Surface Water Quality Data Form

SW LINCOLN CO WATER DIST ID #: OR4100925 WTP: WTP- A Month/Year: February 2022 Required Log Inactivation: 5

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C.X.T	[°C]		Use tables	Yes / No	[GPM]
1/	1.3	155	202	13°	7.6	20.1	YES	105
2/12:00	1.3	155	202	13°	7.6	20.1	YES	105
3/12:00	1.3	155	202	13°	7.6	20.1	YES	105
4/10:30	1.2	155	186	13°	7.6	19.9	YES	105
5/ OFF								> 105
6/ OFF								> 105
7/11:00	1.1	155	171	13°	7.5	18.9	YES	105
8/8:30	1.1	155	171	13°	7.3	17.6	YES	101
9/4:00	1.2	155	186	13°	7.6	19.9	YES	101
10/5:00	1.1	155	171	13°	7.5	18.9	YES	101
11/1:30	1.0	155	155	13°	7.4	18.0	YES	101
12/ OFF								101
13/ OFF								101
14/ OFF								101
15/7:00	1.2	155	186	13°	7.6	19.9	YES	104
16/11:30	1.1	155	171	13°	7.5	18.9	YES	104
17/12:30	1.2	155	186	13°	7.6	19.9	YES	104
18/12:30	1.2	155	186	13°	7.5	19.2	YES	104
19/ OFF								104
20/ OFF								104
21/ OFF								104
22/3:00	1.2	155	186	13°	7.5	19.2	YES	90
23/3:00	1.3	155	202	12°	7.6	21.6	YES	90
24/7:30	1.3	155	202	12°	7.7	22.4	YES	90
25/12:30	1.1	155	171	12°	7.7	21.9	YES	90
26/ OFF								90
27/ OFF								90
28/ OFF								90
29/								90
30/								
31/								

³ If Cl₂ at entry point < 0.2 mg/l, OR CT, not met, notify DWP by end of next business day.