

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:** JUN 2025

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	.018	.018	.020	.028	.021	.018	.077
2	.018	.019	.018	.021	.022	.018	.080
3	.023	OFF	OFF	.018	.032	.017	.047
4	OFF	OFF	.018	.019	.027	.019	.122
5	OFF	OFF	OFF	OFF	OFF	OFF	—
6	OFF	OFF	.043	.019	.018	.018	.043
7	.018	.019	.035	.030	.020	.021	.062
8	.021	.021	.025	.023	.021	.021	.069
9	.021	.047	.022	.023	OFF	OFF	.051
10	.039	.023	.022	.021	.020	.024	.084
11	.021	.021	OFF	OFF	.029	.020	.083
12	off	off	off	off	off	off	—
13	off	off	off	off	off	off	—
14	OFF	OFF	.021	.019	.018	.019	.066
15	.018	.019	.033	.022	.020	.018	.054
16	.018	.018	.019	.018	.018	.023	.055
17	.020	.018	.018	.018	.020	.021	.058
18	.019	.019	.049	.023	.022	.021	.092
19	OFF	OFF	OFF	OFF	OFF	OFF	—
20	OFF	OFF	OFF	OFF	OFF	OFF	—
21	.018	.018	.018	.020	.029	.022	.062
22	.021	.023	.020	.020	.020	.019	.028
23	.019	.018	.038	.022	.020	.019	.046
24	.018	.018	.019	.027	.020	.019	.041
25	.019	.020	.020	.028	.024	OFF	.069
26	OFF	OFF	OFF	OFF	OFF	OFF	—
27	OFF	OFF	OFF	OFF	.025	.021	.038
28	.024	.024	.023	.021	.032	.026	.050
29	.029	.024	.027	.029	.028	.056	.064
30	.035	.023	.022	.026	.024	.025	.035
31	.025	OFF	.027	.027	OFF	OFF	.048

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <u>Yes</u> / No	CT's met everyday? (see back) <u>Yes</u> / No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <u>Yes</u> / No	
All the 4-hour turbidity readings ≤ 1 NTU? <u>Yes</u> / No			
All turbidity readings < IFE ² triggers? <u>Yes</u> / No ²			
Notes:	PRINTED NAME: <u>Rick McClung</u>		
	SIGNATURE: <u>R. McClung</u>		DATE: <u>7/31/25</u>
	PHONE #: <u>(541) 547-3315</u>		CERT #: <u>2725</u>

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: July 2025

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? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C.X.T	[° C]		Use tables	Yes / No	[GPM]
1/9:00	1.3	155	202	15	7.4	17.5	Yes	120
2/10:00	1.3	155	202	15	7.7	18.3	Yes	143
3/12:00	1.4	155	217	15	7.5	17.2	Yes	143
4/9:00	1.3	155	202	15	7.4	16.3	Yes	143
5/								143
6/10:00	1.3	155	202	15	7.3	15.8	Yes	143
7/8:00	1.3	155	202	15	7.4	16.3	Yes	143
8/10:00	1.2	155	186	15	7.7	18.1	Yes	128
9/9:00	1.3	155	202	15	7.6	17.6	Yes	128
10/10:00	1.3	155	202	15	7.7	18.3	Yes	128
11/11:00	1.3	155	202	15	7.6	17.6	Yes	128
12/								128
13/								128
14/3:00	1.4	155	217	16	7.6	16.7	Yes	128
15/11:00	1.3	155	202	15	7.6	17.6	Yes	118
16/8:00	1.4	155	217	15	7.6	17.8	Yes	118
17/11:00	1.3	155	202	16	7.7	17.1	Yes	118
18/2:00	1.3	155	202	16	7.5	15.9	Yes	118
19/								118
20/								118
21/9:00	1.4	155	217	16	7.3	14.9	Yes	118
22/11:00	1.5	155	233	16	7.4	15.6	Yes	146
23/10:00	1.3	155	202	16	7.3	14.7	Yes	146
24/8:00	1.4	155	217	15	7.5	17.2	Yes	146
25/10:00	1.5	155	233	16	7.5	16.2	Yes	146
26/								146
27/6:00	1.3	155	202	16	7.4	15.3	Yes	146
28/9:00	1.3	155	202	16	7.5	15.9	Yes	146
29/9:00	1.3	155	202	15	7.6	17.6	Yes	130
30/9:00	1.3	155	202	16	7.5	15.9	Yes	130
31/10:00	1.4	155	217	16	7.5	16.1	Yes	130

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

Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf