

**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- B **Month/Year:** January 2023

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						
2	OFF						
3	OFF						
4	OFF						
5	OFF						
6	OFF						
7	OFF						
8	OFF						
9	OFF						
10	OFF						
11	OFF						
12	OFF						
13	OFF	OFF	OFF	.068	.079	OFF	.084
14	OFF						
15	OFF						
16	OFF						
17	OFF						
18	OFF	OFF	OFF	.057	OFF	OFF	.073
19	OFF						
20	OFF	OFF	OFF	.063	OFF	OFF	.081
21	OFF						
22	OFF						
23	OFF						
24	OFF	OFF	OFF	OFF	.065	OFF	.086
25	OFF						
26	OFF	OFF	OFF	.071	OFF	OFF	.085
27	OFF						
28	OFF						
29	OFF						
30	OFF						
31	OFF	OFF	OFF	.058	OFF	OFF	.077

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> 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	
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			
Notes:	PRINTED NAME: K. McClung		DATE: 2/10/23
	SIGNATURE: <i>Kick McClung</i>		CERT #: 2725
	PHONE #: (541) 547-3315		

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.B Month/Year: January 2023

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 / OFF	—	—	—	—	—	—	—	18
2 / OFF	—	—	—	—	—	—	—	18
3 / OFF	—	—	—	—	—	—	—	18
4 / OFF	—	—	—	—	—	—	—	18
5 / OFF	—	—	—	—	—	—	—	18
6 / OFF	—	—	—	—	—	—	—	18
7 / OFF	—	—	—	—	—	—	—	23
8 / OFF	—	—	—	—	—	—	—	23
9 / OFF	—	—	—	—	—	—	—	23
10 / OFF	—	—	—	—	—	—	—	23
11 / OFF	—	—	—	—	—	—	—	23
12 / OFF	—	—	—	—	—	—	—	23
13 / 11:45	1.0	105	105	10°	7.3	21.4	Yes	23
14 / OFF	—	—	—	—	—	—	—	20
15 / OFF	—	—	—	—	—	—	—	20
16 / OFF	—	—	—	—	—	—	—	20
17 / OFF	—	—	—	—	—	—	—	20
18 / 9:30	1.0	105	105	10°	7.4	22.2	Yes	20
19 / OFF	—	—	—	—	—	—	—	20
20 / 1:11	1.1	105	116	9°	7.4	24.0	Yes	20
21 / OFF	—	—	—	—	—	—	—	27
22 / OFF	—	—	—	—	—	—	—	27
23 / OFF	—	—	—	—	—	—	—	27
24 / 11:40	1.2	105	126	9°	7.3	23.4	Yes	27
25 / OFF	—	—	—	—	—	—	—	27
26 / 11:15	1.2	105	126	9°	7.1	21.8	Yes	27
27 / OFF	—	—	—	—	—	—	—	27
28 / OFF	—	—	—	—	—	—	—	24
29 / OFF	—	—	—	—	—	—	—	24
30 / OFF	—	—	—	—	—	—	—	24
31 / 1:27	1.3	105	137	9°	7.3	23.7	Yes	24

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