

**Oregon DHS - Drinking Water Program -- Turbidity Monitoring Report Form**

System Name: City of Waldport ID #: 41 00926 Month/Year: 06/21

DAY	12 AM (NTU)	4 AM (NTU)	8 AM (NTU)	NOON (NTU)	4 PM (NTU)	8 PM (NTU)	Highest Reading (NTU)	Peak Hourly Flow (GPM)
1	off	off	.05	.06	.12	.10	0.12	≤ 350
2	.06	.06	.05	.05	.05	.05	0.06	≤ 350
3	.05	.05	off	.05	.05	off	0.05	≤ 350
4	.06	.06	.05	.05	.05	.05	0.06	≤ 350
5	.05	.05	.05	off	off	off	0.05	≤ 350
6	off	off	.06	.05	.05	.05	0.06	≤ 350
7	.05	.05	.05	.05	.05	.05	0.05	≤ 350
8	.05	.05	.05	.05	.05	.05	0.05	≤ 350
9	.05	.05	.06	.05	.05	.05	0.06	≤ 350
10	.05	.05	.05	.05	.05	.05	0.05	≤ 350
11	.05	.05	.05	.05	.05	.05	0.05	≤ 350
12	.05	.05	.05	.05	.06	off	0.06	≤ 350
13	off	off	off	off	off	off	0	≤ 350
14	off	off	off	off	.05	.05	0.05	≤ 350
15	.05	.05	.05	.05	.05	.05	0.05	≤ 350
16	.05	.05	.05	.05	.05	.05	0.05	≤ 350
17	.05	.05	.05	.05	.05	.05	0.05	≤ 350
18	.05	.05	.05	.05	.05	.05	0.05	≤ 350
19	.05	.05	.05	.05	.05	.05	0.05	≤ 350
20	.05	.05	.05	.05	.05	.05	0.05	≤ 350
21	.05	.05	.05	.05	.05	.06	0.06	≤ 350
22	.05	.05	.05	.05	.05	.05	0.05	≤ 350
23	.05	.05	.05	off	off	off	0.05	≤ 350
24	off	off	.05	.05	.06	.07	0.07	≤ 350
25	.05	.05	.05	.05	.05	.05	0.05	≤ 350
26	.05	.05	.05	.05	.05	.05	0.05	≤ 350
27	off	off	.05	.05	.05	.05	0.05	≤ 350
28	.05	.05	.05	.05	.05	off	0.05	≤ 350
29	off	off	.06	.06	.06	.06	0.06	≤ 350
30	.06	.06	.06	.05	.05	.05	0.06	≤ 350
31								

<b>Conventional or Direct Filtration</b> 95% of turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All turbidity readings < 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All turbidity readings < IFE triggers? <input checked="" type="radio"/> Yes / <input type="radio"/> No <sup>1</sup>		<b>Monthly Summary (Answer Yes or No)</b> CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No Cl <sub>2</sub> residual measured in 95% of distribution samples? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
- OR -		PRINTED NAME: <u>Lyle T. Arrant</u>		
<b>Slow Sand/Cartridge/Membrane/DE Filtration</b> 95% of turbidity readings ≤ 1 NTU? <input type="radio"/> Yes / <input type="radio"/> No All turbidity readings < 5 NTU? <input type="radio"/> Yes / <input type="radio"/> No		SIGNATURE: <u>Lyle T. Arrant</u>		DATE: <u>07/07/21</u>
		PHONE #: <u>(541) 563-2929</u>		CERT #: <u>5292</u>

<sup>1</sup> IFE = Individual Filter Effluent

Oregon DHS - Drinking Water Program - Surface Water Quality Data Form

System Name:

City of Waldport

ID #: 41 00 926

Month/Year: 06/21

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C)	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT
	ppm or mg/L	minutes	CXT	°C		Use tables	Yes
11/1800	0.9	360	324	16	7.4	15	Yes
21/1630	0.9	360	324	16	7.5	15	Yes
31/1700	0.9	360	324	15	7.5	15	Yes
41/1400	0.9	360	324	16	7.5	15	Yes
51/840	0.9	360	324	15	7.5	15	Yes
61/850	1.0	360	360	15	7.4	15	Yes
71/1600	0.9	360	324	15	7.5	15	Yes
81/2000	1.0	360	360	17	7.5	15	Yes
91/1530	0.9	360	324	16	7.5	15	Yes
10/2000	0.9	360	324	16	7.5	15	Yes
11/1630	0.9	360	324	15	7.5	15	Yes
12/1700	0.9	360	324	16	7.5	15	Yes
13/1830	1.0	360	360	17	7.5	15	Yes
14/1600	1.0	360	360	17	7.5	15	Yes
15/1330	1.0	360	360	17	7.5	15	Yes
16/1800	0.9	360	324	17	7.5	15	Yes
17/1200	0.9	360	324	17	7.6	15	Yes
18/1930	1.0	360	360	16	7.6	15	Yes
19/1945	0.9	360	324	16	7.5	15	Yes
20/1950	1.0	360	360	18	7.5	15	Yes
21/1600	1.0	360	360	17	7.5	15	Yes
22/1700	1.0	360	360	17	7.5	15	Yes
23/1630	1.0	360	360	16	7.5	15	Yes
24/1730	1.0	360	360	17	7.4	15	Yes
25/10930	0.9	360	324	17	7.4	15	Yes
26/10900	1.0	360	360	18	7.4	11	Yes
27/10950	0.8	360	288	18	7.3	11	Yes
28/1530	0.9	360	324	19	7.5	11	Yes
29/1700	0.9	360	324	18	7.5	11	Yes
30/1800	0.9	360	324	19	7.4	11	Yes
31/							