

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

System Name: City of Waldport ID #: 41 00926 Month/Year: 12/21

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	.05	.05	.05	.05	.05	.05	Ø.05	≤ 350
2	.05	.05	.05	.05	.05	off	Ø.05	≤ 350
3	off	off	.05	.06	.05	.05	Ø.06	≤ 350
4	.05	.05	.05	.05	.05	.05	Ø.05	≤ 350
5	off	off	.05	.05	.05	.05	Ø.05	≤ 350
6	.05	.05	.05	off	.05	.05	Ø.05	≤ 350
7	.08	.12	off	.05	.05	.05	Ø.12	≤ 350
8	off	off	.05	.05	.05	.05	Ø.05	≤ 350
9	.05	.06	.05	off	.05	.05	Ø.06	≤ 350
10	.06	.07	.05	.05	.05	.05	Ø.07	≤ 350
11	.05	off	off	off	off	off	Ø.05	≤ 350
12	off	off	.06	.06	.07	.05	Ø.07	≤ 350
13	off	off	.05	.05	.05	.05	Ø.05	≤ 350
14	.07	.05	.05	.05	.05	.06	Ø.07	≤ 350
15	.07	off	.06	.05	off	.05	Ø.07	≤ 350
16	.06	off	.05	.05	.06	.06	Ø.06	≤ 350
17	.05	.05	.05	.05	.05	.05	Ø.05	≤ 350
18	off	off	.05	.05	.05	off	Ø.05	≤ 350
19	off	off	off	off	off	off	Ø	≤ 350
20	off	off	off	off	.05	.05	Ø.05	≤ 350
21	.05	.05	.05	.05	.05	.07	Ø.07	≤ 350
22	.08	.05	.05	.05	.05	.06	Ø.08	≤ 350
23	.05	.05	.05	.05	.05	.06	Ø.06	≤ 350
24	off	off	.05	.05	.05	.05	Ø.05	≤ 350
25	off	off	off	off	off	off	Ø	≤ 350
26	off	off	.05	.05	.06	.05	Ø.06	≤ 350
27	.05	.05	.05	.05	.05	.05	Ø.05	≤ 350
28	.05	.05	.05	.05	.05	.05	Ø.05	≤ 350
29	.05	.05	.05	.05	.05	.05	Ø.05	≤ 350
30	.05	.06	.06	.06	.05	.05	Ø.06	≤ 350
31	.05	.05	.06	.07	.06	.05	Ø.07	≤ 350

<b>Conventional or Direct Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>		
95% of turbidity readings ≤ 0.3 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 <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	
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				
- OR -		PRINTED NAME: <u>Lyle T. Arrant</u>		
Slow Sand/Cartridge/Membrane/DE Filtration		SIGNATURE: <u>Lyle T. Arrant</u>	DATE: <u>01/06/21</u>	
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	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 00926

Month/Year: 12/21

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 Met
	ppm or mg/L	minutes	CXT	°C		Use tables	Yes / N
1/1/00	0.9	360	324	14	7.5	15	Yes
2/1/500	0.9	360	324	14	7.6	15	Yes
3/1/0:30	0.9	360	324	13	7.5	15	Yes
4/0920	0.9	360	324	13	7.5	15	Yes
5/1/000	0.9	360	324	13	7.4	15	Yes
6/1/800	1.0	360	360	14	7.5	15	Yes
7/1/700	1.0	360	360	14	7.5	15	Yes
8/1/630	1.0	360	360	13	7.5	15	Yes
9/2/000	1.0	360	360	13	7.5	15	Yes
10/1/730	1.0	360	360	14	7.5	15	Yes
11/1/400	0.9	360	324	13	7.6	15	Yes
12/1/630	0.9	360	324	12	7.6	22	Yes
13/1/800	0.8	360	288	12	7.5	22	Yes
14/1/600	0.8	360	288	12	7.5	22	Yes
15/1/100	0.9	360	324	12	7.5	22	Yes
16/1/330	0.8	360	288	13	7.5	15	Yes
17/1/0930	1.0	360	360	12	7.5	22	Yes
18/1/0930	0.9	360	324	12	7.4	22	Yes
19/1/0930	0.7	360	252	11	7.4	21	Yes
20/1/800	0.9	360	324	13	7.5	15	Yes
21/1/700	0.9	360	324	11	7.6	22	Yes
22/1/600	0.9	360	324	12	7.6	22	Yes
23/1/100	0.9	360	324	12	7.6	22	Yes
24/1/0930	0.8	360	288	15	7.5	15	Yes
25/1/9:45	.8	360	288	14	7.5	15	Yes
26/1/0945	1.0	360	396	10	7.4	22	Yes
27/1/600	1.0	360	360	11	7.5	22	Yes
28/1/800	0.9	360	324	11	7.5	22	Yes
29/1/500	0.9	360	324	11	7.5	22	Yes
30/1/730	1.0	360	360	11	7.6	22	Yes
31/1/800	1.0	360	360	11	7.6	22	Yes