

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

System Name: City of Waldport ID #: 41 00926 Month/Year: 03/22

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	off	.05	.05	.05	0.05	≤ 350
2	.06	.06	off	.05	.05	.06	0.06	≤ 350
3	.06	.07	.06	.05	.05	.05	0.07	≤ 350
4	.05	.05	.05	.05	.05	.05	0.05	≤ 350
5	.05	.05	.05	.05	.05	.05	0.05	≤ 350
6	.06	.06	.05	.05	.05	.05	0.06	≤ 350
7	off	off	.05	.05	.05	.05	0.05	≤ 350
8	.05	.05	.05	.05	.05	.05	0.05	≤ 350
9	off	off	off	off	.05	.05	0.05	≤ 350
10	.05	.05	.05	.06	.05	off	0.06	≤ 350
11	off	off	.05	.05	.05	.05	0.05	≤ 350
12	.05	.05	.05	.05	.05	off	0.05	≤ 350
13	off	off	.06	.05	.05	off	0.06	≤ 350
14	off	off	off	off	off	off	0	≤ 350
15	off	off	.05	.05	.07	.06	0.07	≤ 350
16	.05	.05	.05	.05	.06	.07	0.07	≤ 350
17	.05	.05	.05	.05	.05	.06	0.06	≤ 350
18	.05	.05	.05	.06	.05	.05	0.06	≤ 350
19	.05	off	.05	.05	.05	.05	0.05	≤ 350
20	.05	.05	.05	.06	.06	.05	0.06	≤ 350
21	.05	off	.05	.05	.05	.05	0.05	≤ 350
22	.06	.05	.05	.05	.05	.05	0.06	≤ 350
23	.05	.05	.05	.05	.05	.05	0.05	≤ 350
24	.05	.05	.05	.05	.05	.06	0.06	≤ 350
25	.05	.06	.05	.05	.05	.06	0.06	≤ 350
26	off	off	.05	.05	.05	.05	0.05	≤ 350
27	.05	.05	.06	.05	.05	.05	0.06	≤ 350
28	off	off	.05	.05	.05	.05	0.05	≤ 350
29	.05	.05	.05	.05	.05	off	0.05	≤ 350
30	off	off	.05	.07	.06	off	0.07	≤ 350
31	.05	.05	.05	.05	.05	.05	0.05	≤ 350

<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. Arcant</u>		
<b>Slow Sand/Cartridge/Membrane/DE Filtration</b> 95% of turbidity readings ≤ 1 NTU? Yes / No All turbidity readings < 5 NTU? Yes / No		SIGNATURE: <u>Lyle T. Arcant</u>		DATE: <u>04/06/22</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 #: 4100926

Month/Year: 03/22

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 / No
11/1800	1.0	360	360	13	7.5	15	Yes
21/1700	1.0	360	360	12	7.5	22	Yes
31/1700	1.0	360	360	12	7.6	22	Yes
4/0900	1.0	360	360	11	7.7	22	Yes
5/0930	0.8	360	288	12	7.7	22	Yes
6/0820	0.9	360	324	11	7.8	26	Yes
7/1600	1.1	360	396	12	7.7	22	Yes
8/1730	1.0	360	360	12	7.6	22	Yes
9/1800	1.0	360	360	12	7.6	22	Yes
10/1530	1.1	360	396	12	7.7	22	Yes
11/0830	1.1	360	396	11	7.7	22	Yes
12/0900	0.9	360	324	11	7.7	22	Yes
13/1000	0.9	360	324	13	7.7	15	Yes
14/9:35	0.9	360	324	12	7.7	22	Yes
15/1800	1.0	360	360	12	7.7	22	Yes
16/1600	1.0	360	360	12	7.6	22	Yes
17/1730	1.0	360	360	12	7.6	22	Yes
18/1235	1.0	360	360	14	7.7	15	Yes
19/1500	1.0	360	360	13	7.6	15	Yes
20/1300	1.1	360	396	13	7.6	15	Yes
21/1800	1.1	360	396	13	7.6	15	Yes
22/1500	1.1	360	396	13	7.5	15	Yes
23/1700	1.0	360	360	13	7.5	22	Yes
24/0850	0.9	360	324	15	7.4	15	Yes
25/10900	0.9	360	324	12	7.3	22	Yes
26/1000	0.9	360	324	13	7.4	15	Yes
27/10945	1.0	360	360	16	7.4	15	Yes
28/1000	1.0	360	360	14	7.4	15	Yes
29/1600	1.0	360	360	14	7.4	15	Yes
30/1800	1.0	360	360	13	7.5	15	Yes
31/1600	1.0	360	360	13	7.5	15	Yes