

Oregon DHS - Drinking Water Program – Turbidity Monitoring Report Form

System Name: City of Westfir

ID #: 41 00939

Month/Year: June 2024

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				.122			.122	200
2				.144			.144	200
3				.156			.156	200
4				.152			.152	200
5				.146			.146	200
6				.142			.142	200
7				.137			.137	200
8				.132			.132	200
9				.126			.126	200
10				.122			.122	200
11				.124			.124	200
12				.118			.118	200
13				.117			.117	200
14				.121			.121	200
15				.146			.146	200
16				.153			.153	200
17				.155			.155	200
18				.139			.139	200
19				.131			.131	200
20				.127			.127	200
21				.121			.121	200
22				.111			.111	200
23				.109			.109	200
24				.108			.108	200
25				.108			.108	200
26				.106			.106	200
27				.111			.111	200
28				.109			.109	200
29				.109			.109	200
30				.106			.106	200
31								200

<p>Conventional or Direct Filtration</p> <p>95% of turbidity readings ≤ 0.3 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All turbidity readings < 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All turbidity readings < IFE triggers? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No¹</p>	<p>Monthly Summary (Answer Yes or No)</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 33%; border: 1px solid black;"> CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No </td> <td style="width: 33%; border: 1px solid black;"> All Cl₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No </td> <td style="width: 33%; border: 1px solid black;"> Cl₂ residual measured in 95% of distribution samples? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No </td> </tr> </table>			CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	Cl ₂ residual measured in 95% of distribution samples? <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 residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	Cl ₂ residual measured in 95% of distribution samples? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No				
<p>- OR -</p>	<p>PRINTED NAME: Max Baker</p>					
<p>Slow Sand/Cartridge/Membrane/DE Filtration</p> <p>95% of turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All turbidity readings < 5 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No</p>	<p>SIGNATURE: <i>Max Baker</i></p>		<p>DATE: 7-1-24</p>			
	<p>PHONE #: (541) 782-3983 office</p>		<p>CERT #: 08801 FE</p>			

¹ IFE = Individual Filter Effluent

OHA - Drinking Water Program – Surface Water Quality Data Form

WESTFIR, CITY OF ID #: OR4100939 WTP-: WTP-A Month/Year: June 2024

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/	0.5	385	192	18	6.71	23	Yes	200
2/	0.5	385	192	18	6.73	23	Yes	200
3/	0.5	385	192	17	6.74	23	Yes	200
4/	0.5	385	192	17	6.74	23	Yes	200
5/	0.5	385	192	17	6.76	23	Yes	200
6/	0.5	385	192	17	6.74	23	Yes	200
7/	0.6	385	231	17	6.81	24	Yes	200
8/	0.6	385	231	17	6.82	24	Yes	200
9/	0.6	385	231	17	6.78	24	Yes	200
10/	0.6	385	231	17	6.81	24	Yes	200
11/	0.6	385	231	18	6.79	24	Yes	200
12/	0.5	385	192	18	6.83	23	Yes	200
13/	0.6	385	231	18	6.84	24	Yes	200
14/	0.6	385	231	18	6.79	24	Yes	200
15/	0.6	385	231	18	6.82	24	Yes	200
16/	0.6	385	231	18	6.86	24	Yes	200
17/	0.6	385	231	18	6.84	24	Yes	200
18/	0.6	385	231	18	6.87	24	Yes	200
19/	0.5	385	192	18	6.90	23	Yes	200
20/	0.5	385	192	18	6.91	23	Yes	200
21/	0.5	385	192	18	6.89	23	Yes	200
22/	0.5	385	192	18	6.92	23	Yes	200
23/	0.5	385	192	18	6.87	23	Yes	200
24/	0.5	385	192	18	7.00	23	Yes	200
25/	0.5	385	192	19	6.95	23	Yes	200
26/	0.5	385	192	19	6.98	23	Yes	200
27/	0.5	385	192	19	6.96	23	Yes	200
28/	0.5	385	192	19	6.95	23	Yes	200
29/	0.5	385	192	19	7.02	28	Yes	200
30/	0.5	385	192	19	7.03	28	Yes	200
31/		385						200

³If 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-alt-unfiltered.pdf

TURBIDITY

DATE	MASTER METER	RAW	FILT 1	FILT 2	FAC CLEAR WELL	NOTES
1	65554800	.436	.174	offline	.122	
2	65624300	.524	.218		.154	
3	65624300	.807	.274		.156	
4	65624300	.601	.268		.152	
5	65704100	.643	.238		.146	
6	65709100	.678	.233		.142	
7	65768500	.656	.221		.137	
8	65787400	.641	.220		.132	
9	65787400	.432	.170		.126	
10	65967000	.430	.167		.122	
11	65905000	.421	.162		.124	
12	65951500	.414	.157		.118	
13	65951500	.409	.152		.117	
14	66023100	.406	.149		.121	
15	66023100	.454	.163		.146	
16	66099900	.463	.172		.153	
17	66105700	.466	.167		.155	
18	66165900	.458	.167		.139	
19	66192000	.446	.161		.131	
20	66245200	.432	.146		.127	
21	66245200	.419	.138		.121	
22	66325200	.406	.130		.111	
23	66325200	.396	.128		.109	
24	66398300	.390	.128		.108	
25	66429300	.385	.124		.108	
26	66483100	.382	.121		.106	
27	66500000	.384	.124		.111	
28	66500000	.382	.124		.109	
29	66591000	.379	.121		.109	
30	66640200	.362	.120	✓	.106	
31						

Turbidity Totals: Raw Filt 1 Filt 2
 14.35 6.03 off
Averages: .474 .166 off

Turbidity High: .807 .274 off
Ranges Low: .362 .120 off

Production
Meter Reading End of This Month: 66640200
Meter Reading End of Last Month: 65554800
Monthly Production: 10885400 gallons
Average Daily Production: 36180 gallons/day