OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: LANE
Month/Year: Sep-25

System Name: Westfir, City of **ID#:** 41 00939 **WTP : TP -** WTP-A

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			0.11				0.11
2			0.10				0.10
3			0.11				0.11
4			0.10				0.10
5							
6							
7							
8			0.10				0.10
9			0.11				0.11
10							
11							
12							
13			0.11				0.11
14							
15			0.11				0.11
16			0.11				0.11
17							
18			0.10				0.10
19			0.10				0.10
20							
21			0.10				0.10
22							
23			0.11				0.11
24			0.10				
25							
26			0.11				0.11
27			0.11				0.11
28							
29			0.11				0.11
30							
31							

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? [2]	(Yes) / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	(Yes) / No	(Yes) / No	(Yes) / No

Notes:

PRINTED NAME: MAX BAKER
SIGNATURE: Max Baker **DATE:** 10/9/25
PHONE #: (541) 674-9019 **CERT #:** 08801FE

[1] Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. [2] Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :WTP-A

System Name: Westfir, City of **ID#:** 4100939 **Month/Year:** Sep-25 **Disinfection *Giardia* Log Inactiv:** 1.0

Date / Time	Minimum Cl_2 Residual at 1st 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]	SU	formula	Yes / No	[GPM]
1	0.5	385	192.5	18.0	7.01	21.1	YES	200
2	0.5	385	192.5	18.0	7.00	21.0	YES	200
3	0.5	385	192.5	19.0	7.03	19.9	YES	200
4	0.5	385	192.5	19.0	7.00	19.6	YES	200
5	0.5	385	192.5	18.0	7.03	21.3	YES	200
6	0.6	385	231.0	18.0	7.00	21.3	YES	200
7	0.5	385	192.5	18.0	7.01	21.1	YES	200
8	0.5	385	192.5	18.0	7.02	21.2	YES	200
9	0.5	385	192.5	18.0	7.02	21.2	YES	200
10	0.5	385	192.5	18.0	7.00	21.0	YES	200
11	0.5	385	192.5	18.0	7.02	21.2	YES	200
12	0.5	385	192.5	18.0	7.00	21.0	YES	200
13	0.5	385	192.5	18.0	7.00	21.0	YES	200
14	0.5	385	192.5	18.0	7.01	21.1	YES	200
15	0.5	385	192.5	18.0	7.03	21.3	YES	200
16	0.4	385	154.0	17.0	7.02	22.4	YES	200
17	0.4	385	154.0	17.0	7.00	22.2	YES	200
18	0.4	385	154.0	17.0	6.99	22.1	YES	200
19	0.4	385	154.0	17.0	7.00	22.2	YES	200
20	0.4	385	154.0	17.0	6.98	22.1	YES	200
21	0.5	385	192.5	18.0	6.98	20.9	YES	200
22	0.5	385	192.5	17.0	7.01	22.6	YES	200
23	0.5	385	192.5	17.0	6.98	22.3	YES	200
24	0.5	385	192.5	17.0	6.99	22.4	YES	200
25	0.5	385	192.5	17.0	6.99	22.4	YES	200
26	0.5	385	192.5	16.0	7.00	24.1	YES	200
27	0.5	385	192.5	16.0	7.00	24.1	YES	200
28	0.5	385	192.5	16.0	6.98	23.9	YES	200
29	0.5	385	192.5	16.0	6.99	24.0	YES	200
30	0.5	385	192.5	16.0	7.01	24.1	YES	200
31								

[3] If Cl2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350