

OHA - Drinking Water Services -Turbidity Monitoring Report Form

Conventional or Direct Filtration

County:

Douglas

Month/Year:

May-22

System Name:		City of Yoncalla ID#: 4100958					WTP : TP -	A
Day		24:00 [NTU]	04:00 [NTU]	08:00 [NTU]	12:00 [NTU]	16:00 [NTU]	20:00 [NTU]	Highest Reading of the Day ¹ [NTU]
1		off	off	0.03	0.03	0.04	off	0.04
2		off	off	0.06	0.99	0.04	off	0.99
3		off	off	0.04	0.04	NC	off	0.04
4		off	off	0.05	0.03	0.06	off	0.06
5		off	off	0.26	0.24	NC	off	0.26
6		off	off	0.11	0.13	0.14	off	0.14
7		off	off	0.14	0.06	0.05	off	0.14
8		off	off	0.04	0.05	0.05	off	0.05
9		off	off	0.05	0.04	0.04	off	0.05
10		off	off	0.04	0.04	0.05	off	0.05
11		off	off	0.04	0.04	0.04	off	0.04
12		off	off	0.04	0.04	0.04	off	0.04
13		off	off	0.04	0.04	0.04	off	0.04
14		off	off	0.10	0.20	0.28	off	0.28
15		off	off	0.06	0.05	0.05	off	0.06
16		off	off	0.06	0.04	0.04	off	0.06
17		off	off	0.04	0.10	0.07	off	0.10
18		off	off	0.04	0.04	0.04	off	0.04
19		off	off	0.04	0.04	0.04	off	0.04
20		off	off	0.04	0.04	0.04	off	0.04
21		off	off	0.07	0.07	0.07	off	0.07
22		off	off	0.04	0.04	0.05	off	0.05
23		off	off	0.04	0.04	0.04	off	0.04
24		off	off	0.04	0.04	0.04	off	0.04
25		off	off	0.05	0.04	0.04	off	0.05
26		off	off	0.04	0.05	0.05	off	0.05
27		off	off	0.05	0.05	0.05	off	0.05
28		off	off	0.04	0.04	0.04	off	0.04
29		off	off	0.04	0.04	0.05	off	0.05
30		off	off	0.04	0.05	0.17	off	0.17
31		off	off	0.05	0.05	0.05	off	0.05
						Monthly Summary (Answer Yes or No)		
95% of 4-hour turbidity readings ≤ 0.3 NTU? All 4-hour turbidity readings ≤ 1 NTU? All turbidity readings < IFE ² triggers						<input type="checkbox"/> yes <input checked="" type="checkbox"/> Yes <input type="checkbox"/> Yes	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
						<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> Yes	
						Printed Darrel Lockard		
						SIGNATURE: <i>Darrel Lockard</i>		06/09/22
						Phone# 541- 222-9997		CERT# 2853

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 IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : A

System Name:		City of Yoncalla		ID#:	Month/Year:	22-May	Disinfection Giardia Log Inactiv:	0.5
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]		formula	Yes / No	[GPM]
1/0800	1.01	66	66.7	15.2	8.60	24.3	YES	190
2/0800	0.7	66	46.2	15.1	8.60	23.6	YES	190
3/0800	1.2	66	79.2	15.5	8.60	24.3	YES	190
4/0800	0.86	66	56.8	15.7	8.60	23.1	YES	190
5/0800	0.9	66	59.4	15.7	8.70	24.1	YES	190
6/0800	0.89	66	58.7	16.0	8.80	24.5	YES	190
7/0800	0.87	66	57.4	16.1	8.80	24.2	YES	190
8/088	0.65	66	42.9	15.9	8.70	23.1	YES	190
9/0800	0.77	66	50.8	15.7	8.70	23.7	YES	190
10/0800	0.74	66	48.8	15.7	8.70	23.6	YES	190
11/0800	0.74	66	48.8	15.8	8.80	24.4	YES	190
12/0800	0.84	66	55.4	16.2	8.80	24.0	YES	190
13/0800	0.68	66	44.9	15.9	8.70	23.2	YES	190
14/0800	0.76	66	50.2	15.9	8.70	23.4	YES	190
15/0800	0.7	66	46.2	14.7	8.80	26.1	YES	190
16/0800	0.86	66	56.8	16.4	8.40	20.5	YES	190
17/0800	0.97	66	64.0	16.4	8.50	21.5	YES	190
18/0800	1.04	66	68.6	16.8	8.70	22.7	YES	190
19/0800	0.71	66	46.9	17.1	8.50	20.0	YES	190
20/0800	1.06	66	70.0	17.0	8.50	20.9	YES	190
21/0800	0.86	66	56.8	17.1	8.60	21.1	YES	190
22/0800	0.77	66	50.8	17.2	8.60	20.7	YES	190
23/0800	0.71	66	46.9	17.5	8.70	20.9	YES	190
24/0800	0.98	66	64.7	18.0	8.70	20.9	YES	190
25/0800	0.74	66	48.8	18.2	8.70	20.0	YES	190
26/0800	0.89	66	58.7	18.7	8.80	20.5	YES	190
27/0800	1.01	66	66.7	18.9	8.80	20.5	YES	190
28/0800	1	66	66.0	18.9	8.70	19.7	YES	190
29/0800	0.73	66	48.2	18.6	8.40	17.4	YES	190
30/0800	0.71	66	46.9	18.4	8.60	19.0	YES	190
31/0800	0.87	66	57.4	18.4	8.60	19.3	YES	190

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