

Oregon Health Authority Drinking Water Section

Turbidity Monitoring Report Form

System Name: Yamhill, City of

ID#: OR4100968

October 2022

Day	12AM (NTU)	4AM (NTU)	8AM (NTU)	NOON (NTU)	4PM (NTU)	8PM (NTU)	Highest (NTU)	Peak Hourly Flow (GPM)
1	OFF	0.031	0.028	OFF	0.026	OFF	0.032	416
2	0.027	OFF	OFF	0.026	0.025	0.023	0.029	423
3	OFF	OFF	0.024	0.025	OFF	OFF	0.027	434
4	0.025	OFF	OFF	0.025	0.025	OFF	0.028	428
5	OFF	OFF	0.026	0.025	0.023	OFF	0.028	418
6	OFF	OFF	OFF	0.024	OFF	0.023	0.026	410
7	OFF	OFF	OFF	0.024	0.023	OFF	0.027	414
8	OFF	OFF	0.024	0.024	OFF	OFF	0.026	416
9	0.027	0.025	OFF	0.025	0.026	OFF	0.034	412
10	0.025	OFF	OFF	OFF	0.029	0.039	0.039	430
11	0.025	OFF	OFF	0.027	0.031	0.036	0.036	426
12	OFF	OFF	OFF	0.032	0.036	OFF	0.053	426
13	OFF	OFF	0.044	0.029	OFF	OFF	0.047	419
14	OFF	OFF	OFF	0.037	OFF	0.061	0.066	433
15	0.032	0.030	OFF	OFF	OFF	OFF	0.033	421
16	0.034	OFF	0.026	0.026	OFF	OFF	0.035	443
17	OFF	OFF	0.025	0.032	OFF	OFF	0.035	433
18	OFF	0.028	OFF	0.027	OFF	OFF	0.031	417
19	OFF	0.024	0.035	0.034	0.031	OFF	0.035	416
20	OFF	OFF	0.032	OFF	OFF	0.029	0.035	415
21	OFF	OFF	OFF	OFF	0.028	OFF	0.029	421
22	OFF	OFF	OFF	0.028	0.027	OFF	0.037	428
23	OFF	OFF	OFF	OFF	0.036	0.029	0.045	413
24	0.026	OFF	OFF	0.027	OFF	OFF	0.030	420
25	OFF	OFF	OFF	OFF	0.043	OFF	0.051	429
26	OFF	OFF	OFF	OFF	0.025	0.036	0.036	406
27	OFF	OFF	OFF	0.038	OFF	OFF	0.049	411
28	OFF	OFF	0.036	OFF	0.035	0.028	0.044	397
29	OFF	OFF	OFF	OFF	0.028	0.028	0.034	416
30	OFF	OFF	OFF	0.028	0.027	OFF	0.032	412
31	OFF	OFF	OFF	0.029	0.044	OFF	0.049	415

<input checked="" type="checkbox"/> You are using a Slow Sand or Cartridge Filter <input type="checkbox"/> Monthly Summary		
95% of Turbidity readings < MCL Yes/No <input checked="" type="checkbox"/> Y/N All Turbidity readings < 5 NTU Yes/No <input checked="" type="checkbox"/> Y/N	CT's met every day: Yes/No <input checked="" type="checkbox"/> Yes/No (see back of sheet)	CI residual at every point always ≥ .2 mg/l Yes/No <input checked="" type="checkbox"/> Yes/No CI Residual measured in 95% of distribution samples Yes/No <input checked="" type="checkbox"/> Yes/No

MCL is 0.5 for conventional and direct filtration
and 1.0 for slow sand and diatomaceous earth filters

Signature: Darrel Lockard

Date: 11/9/2022

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP: WTP-A

System Name: Yamhill, City of	ID#: OR4100968	Month/Year: Oct-22	Disinfection Giardia Log Inactiv:	0.500
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Date / Time	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]
1/9:00	1.1	80	88.4	12.1	8.1	25	YES	413
2/21:00	0.9	80	71.2	13.3	8.0	22	YES	423
3/13:00	0.9	80	71.8	13.3	8.0	22	YES	434
4/1:00	0.9	80	72.5	13.2	8.1	22	YES	428
5/13:00	1.0	80	76.7	12.6	8.1	24	YES	415
6/21:00	1.0	80	82.2	12.6	8.1	24	YES	410
7/15:00	1.0	80	79.3	12.7	8.0	23	YES	414
8/12:00	1.0	80	81.4	12.7	8.0	23	YES	414
9/22:00	0.9	80	69.5	13.2	8.0	22	YES	412
10/14:00	0.8	80	66.3	13.3	8.0	22	YES	397
11/2:00	0.9	80	68.4	13.3	8.0	22	YES	425
12/18:00	0.8	80	61.5	12.1	8.0	24	YES	422
13/16:00	0.7	80	55.9	12.0	8.0	23	YES	413
14/14:00	0.7	80	58.4	12.2	8.1	23	YES	433
15/22:00	0.5	80	42.5	12.0	8.0	23	YES	421
16/10:00	0.5	80	40.1	12.1	8.0	23	YES	434
17/11:00	0.6	80	49.9	12.6	8.0	22	YES	432
18/7:00	0.8	80	60.9	12.1	8.1	24	YES	411
19/17:00	0.8	80	61.7	11.5	8.0	24	YES	416
20/11:00	0.8	80	65.6	11.2	8.0	25	YES	413
21/17:00	0.8	80	67.3	10.9	8.1	26	YES	417
22/14:00	0.7	80	56.5	10.3	8.1	27	YES	427
23/23:00	0.9	80	75.6	9.3	8.1	29	YES	417
24/1:00	0.9	80	73.6	9.2	8.1	29	YES	420
25/18:00	0.8	80	67.7	8.7	8.1	30	YES	429
26/12:00	0.7	80	52.7	8.9	8.1	29	YES	406
27/12:00	1.0	80	81.0	8.5	8.0	31	YES	411
28/23:00	0.9	80	75.4	8.6	8.0	30	YES	399
29/19:00	1.0	80	79.7	9.2	8.1	30	YES	413
30/16:00	1.1	80	88.2	9.5	8.0	29	YES	410
31/18:00	1.1	80	84.3	9.7	8.1	29	YES	412

³ If Cl2 at entry point < 0.2 mg/l or CT not met, DWS to be notified by end of next business day.

Revised October 2013