

Oregon Health Authority Drinking Water Section

Turbidity Monitoring Report Form

System Name: Yamhill, City of

ID#: OR4100968

May-24

Day	12AM (NTU)	4AM (NTU)	8AM (NTU)	NOON (NTU)	4PM (NTU)	8PM (NTU)	Highest (NTU)	Peak Hourly Flow (GPM)
1	OFF	OFF	OFF	0.024	0.026	OFF	0.026	408
2	OFF	OFF	0.025	OFF	0.025	0.026	0.026	401
3	0.025	OFF	0.026	0.028	OFF	OFF	0.028	410
4	OFF	OFF	0.031	0.032	OFF	OFF	0.032	428
5	OFF	OFF	0.031	0.031	OFF	OFF	0.031	411
6	0.029	OFF	OFF	OFF	0.045	0.029	0.045	420
7	OFF	OFF	OFF	0.035	0.035	OFF	0.035	419
8	OFF	OFF	OFF	0.035	0.032	OFF	0.035	398
9	OFF	OFF	0.029	0.028	0.029	OFF	0.029	420
10	OFF	OFF	0.030	0.034	0.028	OFF	0.034	393
11	OFF	OFF	0.027	0.027	0.025	0.024	0.027	404
12	OFF	OFF	OFF	OFF	0.026	0.023	0.026	402
13	0.022	OFF	OFF	0.024	0.023	OFF	0.024	405
14	OFF	OFF	0.022	0.023	0.023	OFF	0.023	415
15	OFF	OFF	0.023	0.023	0.027	OFF	0.027	408
16	OFF	OFF	0.022	0.027	0.021	OFF	0.027	403
17	OFF	OFF	0.021	0.021	0.023	OFF	0.023	420
18	OFF	OFF	0.024	0.022	0.022	OFF	0.024	424
19	OFF	OFF	0.028	0.022	0.024	OFF	0.028	418
20	OFF	OFF	0.026	0.023	0.022	OFF	0.026	410
21	OFF	OFF	0.023	0.022	0.021	OFF	0.023	410
22	OFF	OFF	0.024	0.021	0.021	OFF	0.024	406
23	OFF	OFF	0.023	0.022	0.029	OFF	0.029	409
24	OFF	OFF	0.032	0.024	0.021	OFF	0.032	409
25	OFF	OFF	0.026	0.021	0.020	OFF	0.026	420
26	OFF	OFF	OFF	0.022	0.021	0.020	0.022	404
27	OFF	OFF	0.025	0.023	0.022	0.020	0.025	419
28	OFF	OFF	0.027	0.024	OFF	OFF	0.027	408
29	OFF	OFF	0.026	0.022	0.022	OFF	0.026	423
30	OFF	OFF	0.027	0.022	0.021	OFF	0.027	425
31	OFF	OFF	0.024	0.025	0.022	OFF	0.025	422

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

MCL is 0.5 for conventional and direct filtration

Signature: Darrel Lockard

6/10/24

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP: WTP-A

System Name: Yamhill, City of ID#: OR4100968 Month/Year: May-24 Disinfection Giardia Log Inactiv: 0.500

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]
1/11:00	0.5	80.00	41.2	8.4	8.1	30.3	YES	405
2/23:00	0.5	80.00	43.0	8.8	8.1	29.6	YES	404
3/1:00	0.5	80.00	43.1	8.8	8.1	29.7	YES	396
4/9:00	0.6	80.00	45.0	8.9	8.1	29.4	YES	425
5/15:00	0.6	80.00	47.8	8.8	8.2	30.5	YES	410
6/1:00	0.6	80.00	46.2	8.8	8.1	29.7	YES	398
7/17:00	0.6	80.00	45.4	8.7	8.2	30.4	YES	403
8/15:00	0.6	80.00	47.2	9.2	8.2	29.7	YES	397
9/13:00	0.6	80.00	49.9	9.8	8.1	28.0	YES	420
10/11:00	0.5	80.00	43.2	10.9	8.2	25.9	YES	398
11/22:00	0.6	80.00	44.9	12.5	8.1	23.2	YES	412
12/23:00	0.6	80.00	48.0	12.6	8.1	23.2	YES	410
13/16:00	0.6	80.00	47.5	12.0	8.1	24.1	YES	404
14/17:00	0.6	80.00	48.9	11.8	8.2	25.0	YES	407
15/16:00	0.6	80.00	47.3	12.0	8.2	24.4	YES	403
16/15:00	0.6	80.00	47.4	11.8	8.2	24.8	YES	401
17/9:00	0.6	80.00	46.1	11.8	8.1	24.3	YES	419
18/11:00	0.6	80.00	48.3	10.7	8.1	26.3	YES	423
19/12:00	0.6	80.00	48.9	10.4	8.2	27.0	YES	416
20/16:00	0.6	80.00	48.4	10.1	8.1	27.3	YES	407
21/16:00	0.6	80.00	47.9	9.8	8.2	28.1	YES	407
22/15:00	0.6	80.00	47.2	10.0	8.2	27.7	YES	401
23/14:00	0.6	80.00	48.1	10.1	8.2	27.8	YES	409
24/17:00	0.6	80.00	46.4	10.2	8.2	27.3	YES	404
25/14:00	0.6	80.00	45.0	10.5	8.1	26.6	YES	419
26/19:00	0.6	80.00	46.3	10.5	8.1	26.5	YES	398
27/13:00	0.5	80.00	43.8	10.7	8.2	26.5	YES	419
28/15:00	0.6	80.00	44.9	11.3	8.1	24.8	YES	405
29/12:00	0.6	80.00	45.6	11.0	8.2	25.9	YES	422
30/11:00	0.6	80.00	46.8	10.4	8.2	27.3	YES	423
31/10:00	0.6	80.00	45.0	10.4	8.2	27.2	YES	422

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