

# Oregon Health Authority Drinking Water Section

## Turbidity Monitoring Report Form

System Name: Yamhill, City of

ID#: OR4100968

Feb-25

Day	12AM (NTU)	4AM (NTU)	8AM (NTU)	NOON (NTU)	4PM (NTU)	8PM (NTU)	Highest (NTU)	Peak Hourly Flow (GPM)
1	0.020	OFF	0.022	0.023	OFF	OFF	0.023	400
2	0.017	OFF	OFF	0.019	0.021	0.017	0.021	396
3	OFF	OFF	0.025	0.021	0.020	OFF	0.025	403
4	OFF	0.022	OFF	0.026	0.027	OFF	0.027	382
5	OFF	OFF	0.024	0.022	0.021	0.020	0.024	389
6	OFF	OFF	0.028	0.025	0.022	OFF	0.028	404
7	OFF	OFF	0.033	0.037	0.048	OFF	0.048	397
8	OFF	OFF	0.022	0.020	OFF	OFF	0.022	404
9	OFF	OFF	0.028	0.026	0.024	0.016	0.028	396
10	OFF	OFF	OFF	0.022	0.020	0.021	0.022	394
11	OFF	OFF	0.029	0.033	0.030	OFF	0.033	398
12	OFF	OFF	0.028	0.040	0.036	OFF	0.040	410
13	OFF	OFF	0.032	0.030	0.027	OFF	0.032	397
14	OFF	OFF	0.028	0.030	OFF	0.023	0.030	396
15	OFF	OFF	OFF	0.024	0.020	OFF	0.024	394
16	OFF	OFF	OFF	0.031	0.035	OFF	0.035	400
17	OFF	OFF	OFF	0.038	0.044	0.033	0.044	396
18	OFF	OFF	0.030	0.028	0.028	OFF	0.030	401
19	OFF	OFF	0.027	0.025	OFF	OFF	0.027	406
20	OFF	0.029	OFF	0.031	0.030	OFF	0.031	399
21	OFF	OFF	0.039	0.033	0.037	OFF	0.039	395
22	OFF	OFF	0.026	0.030	0.034	OFF	0.034	398
23	OFF	OFF	0.033	0.028	0.027	0.017	0.033	400
24	OFF	OFF	0.022	0.026	0.025	OFF	0.026	399
25	OFF	OFF	0.032	0.035	0.027	OFF	0.035	412
26	OFF	OFF	0.025	0.023	0.022	OFF	0.025	394
27	OFF	OFF	0.027	0.027	0.024	OFF	0.027	397
28	OFF	OFF	0.022	0.026	0.022	OFF	0.026	390

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

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

Signature: Darrel Lockard

Date: 3/10/2025

## OHA - Drinking Water Program - Surface Water Quality Data Form

WTP: WTP-A

System Name: Yamhill, City of

ID#: OR4100968

Month/Year: Feb-25

Disinfection Giardia  
Log Inactiv:

0.500

Date / Time	Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1/4:00	0.7	80.00	57.0	8.8	8.0	28.7	YES	400
2/18:00	0.6	80.00	51.3	8.6	8.0	28.8	YES	396
3/12:00	0.6	80.00	49.8	8.3	8.0	29.6	YES	403
4/8:00	0.6	80.00	51.9	6.0	8.0	34.7	YES	382
5/14:00	0.6	80.00	48.0	6.4	8.1	34.2	YES	389
6/9:00	0.6	80.00	51.1	6.1	8.1	35.6	YES	404
7/6:00	0.6	80.00	46.6	7.2	8.1	32.4	YES	397
8/15:00	0.6	80.00	51.3	8.0	8.1	30.8	YES	404
9/18:00	0.6	80.00	50.6	7.4	8.0	31.4	YES	396
10/8:00	0.7	80.00	53.1	7.0	8.1	33.2	YES	394
11/10:00	0.7	80.00	57.0	6.0	8.0	34.6	YES	398
12/8:00	0.8	80.00	62.5	5.9	8.0	35.3	YES	410
13/9:00	0.8	80.00	60.9	6.0	8.0	35.4	YES	397
14/16:00	0.7	80.00	59.3	6.5	8.1	34.7	YES	396
15/18:00	0.8	80.00	61.0	7.8	8.0	31.0	YES	394
16/9:00	0.7	80.00	59.5	8.3	8.0	30.1	YES	400
17/15:00	0.7	80.00	56.2	9.2	8.0	27.7	YES	396
18/6:00	0.7	80.00	55.7	9.3	8.0	27.4	YES	401
19/11:00	0.7	80.00	54.6	9.5	8.0	27.4	YES	406
20/16:00	0.6	80.00	51.4	9.2	8.0	28.1	YES	399
21/15:00	0.6	80.00	47.9	9.6	8.0	27.0	YES	395
22/8:00	0.7	80.00	53.7	10.3	8.0	25.6	YES	399
23/15:00	0.6	80.00	50.6	10.4	7.9	25.0	YES	400
24/11:00	0.6	80.00	51.6	10.3	8.0	25.6	YES	399
25/9:00	0.6	80.00	50.6	10.5	8.0	25.6	YES	412
26/8:00	0.6	80.00	51.0	10.4	8.0	25.9	YES	394
27/15:00	0.6	80.00	50.6	10.1	8.0	26.5	YES	397
28/11:00	0.6	80.00	51.4	9.8	8.0	26.8	YES	390

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