

**OHA - Drinking Water Services -Turbidity Monitoring Report Form**

**Conventional or Direct Filtration**

County: **Curry**  
 Month/Year: **Dec-23**

System Name:	City of Gold Beach		ID#: 4101059				WTP : TP -
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	off	off	off	0.03	0.03	off	0.04
2	off	off	off	0.03	0.03	0.03	0.03
3	off	off	off	0.03	0.03	0.03	0.04
4	off	off	off	0.03	0.03	0.03	0.04
5	off	off	off	0.03	0.03	0.03	0.04
6	off	off	off	0.03	0.05	0.20	0.20
7	off	off	off	0.03	0.30	off	0.30
8	off	off	0.03	0.05	off	off	0.10
9	off	0.03	0.03	off	0.05	0.03	0.10
10	off	off	0.03	0.03	0.10	0.06	0.20
11	off	off	0.03	0.03	0.02	off	0.05
12	off	off	off	0.05	0.06	0.05	0.20
13	off	off	off	0.03	0.03	0.03	0.03
14	off	off	off	0.03	0.03	0.03	0.05
15	off	off	off	off	0.04	0.04	0.05
16	off	off	off	off	0.02	0.05	0.20
17	0.13	off	off	off	0.06	0.03	0.50
18	0.03	0.03	off	off	off	0.03	0.03
19	off	off	off	0.03	0.03	0.03	0.03
20	off	off	off	0.03	0.03	0.03	0.03
21	0.03	off	off	0.03	0.03	off	0.03
22	off	off	0.03	0.03	0.03	off	0.03
23	off	0.03	0.03	0.04	0.03	off	0.04
24	off	off	0.03	0.03	0.03	0.03	0.03
25	off	off	off	0.03	0.03	off	0.04
26	off	off	off	0.03	0.03	off	0.03
27	off	off	off	0.03	0.06	0.04	0.06
28	off	off	0.03	off	0.03	off	0.03
29	off	off	0.03	0.05	off	0.03	0.05
30	off	off	0.03	off	off	0.03	0.03
31	off	off	0.03	0.03	off	0.03	0.05

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <b>Yes</b>	CT's met everyday? (see back) <b>Yes</b>	All Cl2 residual at entry point ≥ 0.2 mg/l? <b>Yes</b>
All 4-hour turbidity readings ≤ 1 NTU? <b>Yes</b>		
All turbidity readings < IFE <sup>2</sup> triggers <b>Yes</b>		

<b>Notes:</b>	<b>PRINTED NAME: Will Newdall</b>	
	<b>SIGNATURE:</b>	<b>1/3/2024</b>
	<b>PHONE #: (541 )247-7459</b>	<b>CERT #:FE0054</b>

<sup>1</sup> 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. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :

System Name:	City of Gold Beach	ID#: 4101059	Month/Year:	Nov-23	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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Date / Time	Minimum Cl <sub>2</sub> 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]	<b>C X T</b>	[° C]		formula	Yes / No	[GPM]
1	0.96	60	57.6	15.5	7.11	13.7	YES	700
2	0.95	60	57.0	14.5	7.16	14.9	YES	700
3	1.01	60	60.6	15.9	7.18	13.7	YES	700
4	0.89	60	53.4	12.3	7.18	17.5	YES	700
5	0.92	60	55.2	13.4	7.07	15.4	YES	700
6	0.76	60	45.6	15.9	7.03	12.6	YES	700
7	0.84	60	50.4	13.9	7.12	15.0	YES	700
8	0.88	60	52.8	12.0	7.18	17.8	YES	700
9	0.62	60	37.2	12.1	7.13	16.9	YES	700
10	0.78	60	46.8	12.5	7.11	16.3	YES	700
11	0.68	60	40.8	13.9	7.03	14.3	YES	700
12	0.77	60	46.2	12.4	7.11	16.7	YES	700
13	0.71	60	42.6	12.3	7.22	17.4	YES	700
14	0.71	60	42.6	12.3	7.22	17.4	YES	700
15	0.8	60	48.0	11.9	7.08	17.2	YES	700
16	1.02	60	61.2	12.0	7.07	17.4	YES	700
17	0.76	60	45.6	12.8	7.06	15.7	YES	700
18	0.98	60	58.8	13.2	7.09	15.8	YES	700
19	1.17	60	70.2	13.8	7.18	16.1	YES	700
20	1.1	60	66.0	14.9	7.17	14.8	YES	700
21	1.15	60	69.0	14.1	7.19	15.8	YES	700
22	0.96	60	57.6	14.7	7.21	15.0	YES	700
23	0.85	60	51.0	12.4	7.21	17.5	YES	700
24	1.09	60	65.4	11.0	7.07	18.7	YES	700
25	0.8	60	48.0	12.3	7.21	17.5	YES	700
26	1.04	60	62.4	12.8	7.09	16.4	YES	700
27	0.92	60	55.2	14.3	7.16	15.0	YES	700
28	1.02	60	61.2	15.1	7.12	14.2	YES	700
29	1	60	60.0	15.8	7.16	13.7	YES	700
30	1	60	60.0	15.6	7.19	14.0	YES	700
31	1		0.0	13.8	7.19	15.8	YES	700

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised September 2016

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

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

# Water Production Record for The City of Gold Beach

December 2023		Chlorine Residual			
Date	Gallons Pumped	Location 1	Residual	Location 2	Residual
11/30	522,000	City Hall	.72		
1	266,000	City Hall		HC or Wedd	
2	407,000	City Hall		HC or Wedd	
3	377,000	City Hall		HC or Wedd	
4	504,000	City Hall	.73	HC or Wedd	
5	330,000	City Hall	.72	HC or Wedd	
6	513,000	City Hall	.69	HC or Wedd	
7	312,000	City Hall	.73	HC or Wedd	
8	490,000	City Hall		HC or Wedd	
9	423,000	City Hall		HC or Wedd	
10	308,000	City Hall		HC or Wedd	
11	386,000	City Hall	.60	HC or Wedd	
12	348,000	City Hall	.54	HC or Wedd	
13	576,000	City Hall	.51	HC or Wedd	
14	320,000	City Hall	.51	HC or Wedd	
15	469,000	City Hall		HC or Wedd	
16	386,000	City Hall		HC or Wedd	
17	155,000	City Hall		HC or Wedd	
18	706,000	City Hall	.43	HC or Wedd	
19	379,000	City Hall	.52	HC or Wedd	
20	394,000	City Hall	.62	HC or Wedd	
21	342,000	City Hall	.81	HC or Wedd	
22	410,000	City Hall		HC or Wedd	
23	513,000	City Hall		HC or Wedd	
24	87,000	City Hall		HC or Wedd	
25	705,000	City Hall		HC or Wedd	
26	394,000	City Hall	.75	HC or Wedd	
27	130,000	City Hall	.68	HC or Wedd	
28	573,000	City Hall		HC or Wedd	
29	457,000	City Hall		HC or Wedd	
30	465,000	City Hall		HC or Wedd	
31	479,000	City Hall		HC or Wedd	