

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lincoln
 Month/Year: Nov-23

Conventional or Direct Filtration

System Name:	Johnson Creek Water Service		ID#: 41 01072				WTP : TP - A	
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]	
1	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
2	OFF	OFF	OFF	OFF	0.01	0.01	0.01	
3	OFF	OFF	OFF	OFF	0.06	OFF	0.06	
4	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
5	OFF	OFF	OFF	0.01	0.01	OFF	0.01	
6	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
7	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
8	OFF	OFF	OFF	OFF	0.01	0.01	0.01	
9	0.01	OFF	OFF	0.01	0.01	OFF	0.01	
10	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
11	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
12	OFF	OFF	OFF	OFF	0.01	0.01	0.01	
13	OFF	OFF	OFF	0.09	0.01	0.01	0.09	
14	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
15	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
16	OFF	OFF	OFF	OFF	0.01	0.01	0.01	
17	0.19	OFF	OFF	OFF	OFF	OFF	0.19	
18	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
19	OFF	OFF	OFF	OFF	OFF	0.01	0.01	
20	0.01	OFF	OFF	OFF	0.01	0.01	0.01	
21	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
22	OFF	OFF	OFF	OFF	0.01	0.13	0.13	
23	OFF	OFF	OFF	OFF	0.01	0.01	0.01	
24	OFF	OFF	OFF	0.02	0.01	OFF	0.02	
25	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
26	OFF	OFF	OFF	OFF	0.01	0.01	0.01	
27	0.01	OFF	OFF	OFF	OFF	OFF	0.01	
28	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
29	OFF	OFF	OFF	OFF	OFF	0.01	0.01	
30	0.01	0.01	OFF	OFF	OFF	OFF	0.01	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / No
All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / No		
All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes / No		
Notes:	PRINTED NAME: Jeffrey Olson	
	SIGNATURE: <i>Jeffrey Olson</i>	DATE: 11/09/23
	PHONE #: (503)-554-8333	CERT #: T766039

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)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form						WTP - : A	Inactivation
System Name:	Johnson Creek Water Service	ID#: 41 01072	Month/Year:	Nov-23	Disinfection <i>Giardia</i> Log Inactive:	1	

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-Nov	OFF							
2-Nov	0.60	128	76.8	13.0	7.3	33.2	Yes	80
3-Nov	0.60	128	76.8	13.0	7.3	33.2	Yes	80
4-Nov	OFF							
5-Nov	0.40	128	51.2	14.0	7.4	31.5	Yes	80
6-Nov	OFF							
7-Nov	OFF							
8-Nov	0.30	128	38.4	13.0	7.4	33.3	Yes	80
9-Nov	0.50	128	64.0	13.0	7.4	34.1	Yes	80
10-Nov	OFF							
11-Nov	OFF							
12-Nov	0.30	128	38.4	13.0	7.4	33.3	Yes	80
13-Nov	0.30	128	38.4	13.0	7.4	33.3	Yes	80
14-Nov	OFF							
15-Nov	OFF							
16-Nov	0.40	128	51.2	12.0	7.3	35.2	Yes	80
17-Nov	0.40	128	51.2	12.0	7.3	35.2	Yes	80
18-Nov	OFF							
19-Nov	0.40	128	51.2	12.0	7.3	35.2	Yes	80
20-Nov	0.50	128	64.0	12.0	7.3	35.6	Yes	80
21-Nov	OFF							
22-Nov	0.40	128	51.2	13.0	7.4	33.7	Yes	80
23-Nov	0.40	128	51.2	12.0	7.3	35.2	Yes	80
24-Nov	0.50	128	64.0	12.0	7.4	36.8	Yes	80
25-Nov	OFF							
26-Nov	0.50	128	64.0	12.0	7.4	36.8	Yes	80
27-Nov	0.60	128	76.8	12.0	7.3	36.0	Yes	80
28-Nov	OFF							
29-Nov	0.50	128	64.0	10.0	7.3	40.5	Yes	80
30-Nov	0.80	128	102.4	10.0	7.4	43.4	Yes	80

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

Revised July 2018

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