

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lincoln

Conventional or Direct Filtration

Month/Year: Oct-24

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-Oct	OFF	OFF	OFF	OFF	0.04	OFF	0.04
2-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
4-Oct	0.03	OFF	OFF	OFF	0.04	0.01	0.04
5-Oct	OFF	OFF	OFF	OFF	0.04	0.03	0.04
6-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
7-Oct	OFF	OFF	OFF	OFF	OFF	0.01	0.01
8-Oct	OFF	OFF	OFF	OFF	0.01	0.01	0.01
9-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
10-Oct	OFF	OFF	OFF	OFF	OFF	0.01	0.01
11-Oct	0.01	OFF	OFF	OFF	0.10	OFF	0.10
12-Oct	OFF	OFF	OFF	0.01	0.01	0.01	0.01
13-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
14-Oct	OFF	0.04	OFF	OFF	0.01	0.01	0.04
15-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
16-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
17-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
18-Oct	OFF	OFF	OFF	0.04	0.04	0.14	0.14
19-Oct	0.01	OFF	OFF	0.01	OFF	0.01	0.01
20-Oct	0.05	OFF	0.01	0.01	0.24	0.01	0.24
21-Oct	OFF	OFF	OFF	OFF	0.08	0.01	0.08
22-Oct	OFF	OFF	OFF	0.09	0.01	OFF	0.09
23-Oct	0.03	0.04	OFF	OFF	0.04	OFF	0.04
24-Oct	0.03	OFF	OFF	0.03	0.07	OFF	0.07
25-Oct	OFF	OFF	OFF	0.03	0.01	OFF	0.03
26-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
27-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
28-Oct	OFF	OFF	OFF	OFF	0.03	0.20	0.20
29-Oct	0.03	OFF	OFF	OFF	0.01	OFF	0.03
30-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF
31-Oct	OFF	OFF	OFF	OFF	OFF	OFF	OFF

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

Notes:

PRINTED NAME: Jeffrey Olson

SIGNATURE: *JJ Olson* 11/9/2024

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:	Oct-24	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-Oct	0.50	128	64.0	15.0	7.4	29.8	Yes	80
2-Oct	Off							
3-Oct	Off							
4-Oct	0.40	128	51.0	14.0	7.3	30.4	Yes	80
5-Oct	0.40	128	51.2	15.0	7.4	29.5	Yes	80
6-Oct	OFF							
7-Oct	0.40	128	51.2	14.0	7.4	31.5	Yes	80
8-Oct	0.50	128	64.0	14.0	7.4	31.9	Yes	80
9-Oct	0.50	128	64.0	14.0	7.5	33.1	Yes	80
10-Oct	0.50	128	64.0	14.0	7.5	33.1	Yes	80
11-Oct	0.50	128	64.0	14.0	7.4	31.9	Yes	80
12-Oct	0.50	128	64.0	15.0	7.5	31.0	Yes	80
13-Oct	OFF							
14-Oct	0.40	128	51.2	14.0	7.4	31.5	Yes	80
15-Oct	OFF							
16-Oct	OFF							
17-Oct	OFF							
18-Oct	0.30	128	38.4	13.0	7.3	32.1	Yes	80
19-Oct	0.30	128	38.4	13.0	7.3	32.1	Yes	80
20-Oct	0.30	128	38.4	14.0	7.5	32.4	Yes	80
21-Oct	0.30	128	38.4	14.0	7.5	32.4	Yes	80
22-Oct	0.40	128	51.2	14.0	7.6	34.0	Yes	80
23-Oct	0.40	128	51.2	14.0	7.5	32.7	Yes	80
24-Oct	0.60	128	64.0	12.0	7.5	38.5	Yes	80
25-Oct	0.60	128	64.0	12.0	7.5	38.5	Yes	80
26-Oct	OFF							
27-Oct	OFF							
28-Oct	0.40	128	51.2	13.0	7.7	37.7	Yes	80
29-Oct	0.40	128	51.2	12.0	7.6	39.0	Yes	80
30-Oct	OFF							
31-Oct	OFF							

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

Revised July 2018