

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Lincoln

Conventional or Direct Filtration

Month/Year: Feb-26

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 <sup>1</sup> [NTU]	
1-Jan	OFF	OFF	OFF	OFF	0.03	0.18	0.18	
2-Jan	0.01	0.03	0.10	OFF	OFF	OFF	0.10	
3-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
4-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
5-Jan	OFF	OFF	OFF	OFF	0.03	0.01	0.03	
6-Jan	0.01	0.01	0.01	0.15	OFF	OFF	0.15	
7-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
8-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
9-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
10-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
11-Jan	OFF	OFF	OFF	OFF	OFF	0.12	0.12	
12-Jan	0.01	0.01	0.01	OFF	OFF	OFF	0.01	
13-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
14-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
15-Jan	OFF	OFF	OFF	OFF	0.01	0.03	0.03	
16-Jan	OFF	OFF	OFF	OFF	OFF	0.01	0.01	
17-Jan	0.05	OFF	OFF	OFF	0.01	OFF	0.05	
18-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
19-Jan	OFF	OFF	OFF	0.10	0.05	OFF	0.10	
20-Jan	0.01	OFF	OFF	OFF	OFF	OFF	0.01	
21-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
22-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
23-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
24-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
25-Jan	OFF	OFF	OFF	OFF	OFF	0.01	0.01	
26-Jan	0.01	0.01	0.08	OFF	OFF	OFF	0.08	
27-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
28-Jan	OFF	OFF	OFF	OFF	OFF	OFF	OFF	
29-Jan								
30-Jan								
31-Jan								

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)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
All turbidity readings < IFE <sup>2</sup> triggers	<input checked="" type="radio"/> Yes / <input type="radio"/> No		

Notes:	PRINTED NAME: Curtis Olson
	SIGNATURE: <i>Curtis Olson</i> 3/7/2026
	PHONE #: (503)-554-8333 CERT #: T216644

<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 = Indiv. 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:	Feb-26	Disinfection <i>Giardia</i> Log Inactive:	1	

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-Jan	0.70	300	210.0	11.0	7.6	43.1	Yes	80
2-Jan	0.90	300	270.0	10.0	7.7	48.8	Yes	80
3-Jan	OFF							
4-Jan	OFF							
5-Jan	0.80	300	240.0	12.0	7.4	38.1	Yes	80
6-Jan	0.90	300	270.0	12.0	7.6	41.3	Yes	80
7-Jan	OFF							
8-Jan	OFF							
9-Jan	OFF							
10-Jan	OFF							
11-Jan	0.50	300	150.0	11.0	7.4	39.3	Yes	80
12-Jan	0.70	300	210.0	10.0	7.4	42.9	Yes	80
13-Jan	OFF							
14-Jan	OFF							
15-Jan	0.60	300	210.0	11.0	7.3	38.4	Yes	80
16-Jan	0.70	300	210.0	10.0	7.3	41.4	Yes	80
17-Jan	0.70	300	210.0	10.0	7.3	41.4	Yes	80
18-Jan	OFF							
19-Jan	0.70	300	210.0	10.0	7.3	41.4	Yes	80
20-Jan	0.70	300	150.0	10.0	7.5	44.4	Yes	80
21-Jan	OFF							
22-Jan	OFF							
23-Jan	OFF							
24-Jan	OFF							
25-Jan	0.40	300	120.0	10.0	7.3	40.1	Yes	80
26-Jan	0.70	300	210.0	10.0	7.5	44.4	Yes	80
27-Jan	OFF							
28-Jan	OFF							
29-Jan								
30-Jan								
31-Jan								

<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 July 2018

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