

**OHA - Drinking Water Program - Turbidity Monitoring Report Form**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

County: **Douglas**  
 Month/Year: **Feb-23**

System Name: **USFS Wolf Creek Job Corps** ID#: **41 01095** 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	0.00	0.00	0.00	0.00	0.00	0.00	0.00
2	0.00	0.00	0.00	0.00	0.00	0.00	0.00
3	0.02	0.01	0.02	0.02	0.02	0.02	0.02
4	0.00	0.00	0.00	0.00	0.00	0.00	0.00
5	0.00	0.00	0.00	0.00	0.00	0.00	0.00
6	0.00	0.00	0.00	0.02	0.02	0.02	0.02
7	0.02	0.02	0.00	0.00	0.00	0.00	0.02
8	0.00	0.00	0.00	0.00	0.00	0.00	0.00
9	0.00	0.00	0.00	0.00	0.00	0.00	0.00
10	0.02	0.02	0.02	0.02	0.02	0.00	0.02
11	0.02	0.02	0.00	0.00	0.00	0.00	0.02
12	0.00	0.00	0.00	0.00	0.00	0.00	0.00
13	0.02	0.01	0.01	0.00	0.00	0.00	0.02
14	0.00	0.00	0.00	0.00	0.00	0.00	0.00
15	0.02	0.02	0.02	0.02	0.02	0.02	0.02
16	0.00	0.00	0.00	0.00	0.00	0.02	0.02
17	0.00	0.00	0.00	0.00	0.00	0.00	0.00
18	0.00	0.00	0.00	0.00	0.00	0.00	0.00
19	0.02	0.02	0.02	0.02	0.02	0.02	0.02
20	0.02	0.00	0.00	0.00	0.00	0.02	0.02
21	0.00	0.00	0.00	0.00	0.00	0.00	0.00
22	0.00	0.00	0.00	0.00	0.00	0.00	0.00
23	0.02	0.02	0.00	0.00	0.00	0.00	0.02
24	0.02	0.02	0.02	0.02	0.02	0.02	0.02
25	0.02	0.02	0.00	0.00	0.00	0.00	0.02
26	0.00	0.00	0.00	0.00	0.00	0.00	0.00
27	0.00	0.02	0.02	0.00	0.00	0.00	0.00
28	0.00	0.00	0.00	0.00	0.00	0.00	0.00
29							
30							
31							

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1.0 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 daily turbidity readings ≤ 5 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

**Notes:** 0.00 = Plant off line

**PRINTED NAME:** Jonathan Woody  
**SIGNATURE:** *Jonathan Woody*  
**PHONE #:** ( 541 ) 643-6137  
**DATE:** 3-3-23  
**CERT #:** 7232

<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 Eff. (333-061-0040(1)(e)(B&C))

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

System Name: USFS Wolf Creek Job Corps ID#: 41 01095 Month/Year: Feb-23						WTP - : A	
						Disinfection Giardia Log Inactiv:	0.5

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]	C X T	[° C]		formula	Yes / No	[GPM]
1-		93						44
2-		93						44
3-0900	1	93	93.0	8.0	7.60	27.2	Yes	44
4-		93						44
5-		93						44
6-0750	0.9	93	83.7	10.0	7.30	21.2	Yes	44
7-0750	1.2	93	111.6	8.0	7.40	25.9	Yes	44
8-		93						44
9-		93						44
10-0845	1.2	93	111.6	10.0	7.70	25.2	Yes	44
11-0800	1.1	93	102.3	9.0	7.40	24.0	Yes	44
12-		93						44
13-0800	0.9	93	83.7	10.0	7.40	21.9	Yes	44
14-		93						44
15-0800	0.9	93	83.7	8.0	7.60	26.9	Yes	44
16-0910	1.2	93	111.6	6.0	7.60	31.9	Yes	44
17-		93						44
18-		93						44
19-0800	0.8	93	74.4	8.0	7.50	25.7	Yes	44
20-0800	1.2	93	111.6	6.0	7.50	30.8	Yes	44
21-		93						44
22-		93						44
23-0800	0.8	93	74.4	8.0	7.40	24.8	Yes	44
24-0855	1.1	93	102.3	8.0	7.60	27.5	Yes	44
25-0750	1.2	93	111.6	7.0	7.50	28.7	Yes	44
26-		93						44
27-0800	0.9	93	83.7	9.0	7.40	23.4	Yes	44
28-		93						44
29-		93						44
30-		93						44
31-		93						44

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.

Revised February 2014 JW