

OHA - Drinking Water Services – Turbidity Monitoring Report
Conventional or Direct Filtration

County: *Columbia*

Name: *Midland Water*

ID #41: *01139*

WTP-:

Month/Year: *MAY 2023*

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	.03	.03	.04	.04	.03	.03	.04
2	.03	.03	.04	.04	.03	.03	.04
3	.03	.03	.04	.04	.03	.03	.04
4	.03	.03	.04	.04	.03	.03	.04
5	.03	.03	.04	.04	.03	.03	.04
6	.03	.03	.04	.04	.04	.03	.04
7	.03	.04	.04	.04	.04	.02	.04
8	.03	.04	.04	.04	.04	.04	.04
9	.04	.04	.05	.05	.05	.04	.05
10	.03	.03	.03	.03	.05	.04	.05
11	.04	.04	.03	.03	.05	.04	.05
12	.04	.04	.03	.03	.05	.05	.05
13	.03	.03	.03	.03	.03	.03	.03
14	.03	.04	.05	.05	.05	.05	.05
15	.03	.04	.04	.05	.03	.03	.05
16	.03	.05	.05	.05	.04	.03	.05
17	.03	.04	.04	.05	.04	.03	.05
18	.03	.04	.04	.04	.04	.03	.04
19	.03	.04	.03	.03	.04	.03	.04
20	.03	.04	.04	.03	.04	.03	.04
21	.03	.04	.04	.03	.03	.03	.04
22	.03	.03	.03	.03	.03	.03	.03
23	.03	.04	.04	.04	.04	.04	.04
24	.03	.04	.04	.04	.03	.04	.04
25	.03	.05	.05	.05	.04	.03	.05
26	.03	.04	.04	.05	.04	.03	.05
27	.03	.04	.04	.04	.04	.03	.04
28	.03	.04	.03	.03	.04	.03	.04
29	.03	.04	.04	.03	.04	.03	.04
30	.03	.04	.04	.03	.03	.03	.04
31	.03	.04	.04	.04	.04	.04	.04

Conventional or Direct Filtration		Monthly Summary (Answer Yes or No)	
Monthly Summary 95% of the 4-hour turbidity readings ≤ 0.3 NTU? <u>Yes</u> / No All the 4-hour turbidity readings ≤ 1 NTU? <u>Yes</u> / No All turbidity readings < IFE ² triggers? <u>Yes</u> / No ²		CT's met everyday? (see back) <u>Yes</u> / No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? <u>Yes</u> / No
Notes:		PRINTED NAME: <i>David Burch</i> SIGNATURE: <i>[Signature]</i> DATE: <i>6-9-2023</i> PHONE #: <i>(505) 858-0259</i> CERT #:	

¹ Including continuous turbidity 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. (OAR 333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program – Surface Water Quality Data Form - *Giardia* Inactivation

Name: Midland Water

ID #41:01139 WTP-: Month/Year:

May 2023

Log Requirement
(Circle One): 0.5 1.0

Date / Time	Minimum Cl ₂ Residual at 1 st 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]		Use tables	Yes / No	[GPM]
1/7 P	.79	81	64	15	7.9	29	Y	66
2/7 P	.78	88	69	15	7.9	29	Y	61
3/8 P	.78	88	69	15	7.9	29	Y	61
4/8 P	.79	88	70	15	7.9	29	Y	61
5/8 P	.80	88	71	15	7.9	29	Y	61
6/8 P	.80	88	71	15	7.9	29	Y	61
7/7 P	.79	88	70	15	7.9	29	Y	61
8/7 P	.79	88	70	15	7.9	29	Y	61
9/7 P	.79	88	70	15	7.9	29	Y	61
10/4 P	.78	88	69	15	8.0	29	Y	61
11/4 P	.80	88	71	15	8.0	29	Y	61
12/4 P	.80	89	71	15	7.9	29	Y	61
13/4 P	.81	88	72	15	7.8	30	Y	61
14/5 P	.81	88	72	15	7.8	30	Y	61
15/1 P	.80	95	76	15	7.9	29	Y	57
16/8:30 P	.80	91	73	15	7.9	29	Y	59
17/5 P	.80	78	63	15	7.9	29	Y	68
18/5 P	.81	77	62	15	7.9	30	Y	70
19/5 P	.79	71	56	15	7.9	29	Y	75
20/8:30 P	.79	70	56	15	7.8	29	Y	76
21/9 P	.79	78	62	15	7.9	29	Y	68
22/9 P	.80	77	62	15	7.9	29	Y	70
23/9 P	.81	77	63	15	7.9	30	Y	69
24/8 P	.80	77	62	15	7.9	29	Y	70
25/8 P	.80	75	60	15	7.8	29	Y	72
26/8 P	.79	75	59	15	7.8	29	Y	72
27/11:30 A	.81	73	59	15	7.9	30	Y	73
28/7 P	.80	76	61	15	7.9	29	Y	70
29/7 P	.80	75	60	15	7.9	29	Y	71
30/7 P	.80	75	60	15	7.9	29	Y	71
31/2 P	.79	75	59	15	7.9	29	Y	71

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

Revised September 2016

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf

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