

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **CURRY**
 Month/Year: **Aug-23**

Conventional or Direct Filtration

System Name:	Rainbow Rock Service Association			ID#: 41	01361	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	POL	POL	POL	POL	POL	POL	
2	POL	POL	POL	0.13	0.09	0.07	0.13
3	0.07	0.07	0.07	0.06	0.06	0.06	0.07
4	POL	POL	POL	POL	POL	POL	
5	POL	POL	POL	POL	POL	POL	
6	POL	POL	POL	POL	POL	POL	
7	POL	POL	POL	POL	0.08	0.07	0.08
8	0.07	0.06	0.06	0.07	POL	POL	0.07
9	POL	POL	POL	POL	POL	POL	
10	POL	POL	POL	POL	POL	POL	
11	POL	POL	POL	POL	POL	POL	
12	POL	POL	POL	POL	POL	POL	
13	POL	POL	POL	POL	POL	POL	
14	POL	POL	POL	POL	POL	POL	
15	POL	POL	POL	POL	POL	0.08	0.08
16	0.07	0.06	0.06	0.06	POL	POL	0.07
17	POL	POL	POL	POL	0.09	0.09	0.09
18	0.08	0.07	POL	POL	POL	POL	0.07
19	POL	POL	POL	POL	POL	POL	
20	POL	POL	POL	POL	POL	POL	
21	POL	POL	POL	POL	POL	POL	
22	POL	POL	POL	POL	POL	POL	
23	POL	POL	POL	POL	POL	0.12	0.12
24	0.10	0.09	0.09	0.10	0.08	POL	0.10
25	POL	POL	POL	POL	POL	POL	
26	POL	POL	POL	POL	POL	POL	
27	POL	POL	POL	POL	POL	POL	
28	POL	POL	POL	POL	POL	POL	
29	POL	POL	POL	POL	POL	POL	
30	POL	POL	POL	POL	0.12	0.10	0.12
31	0.09	0.07	0.10	0.10	POL	POL	0.10

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: Jonathan Woody	
	SIGNATURE: <i>Jonathan Woody</i>	DATE: AUG/2023
	PHONE #: (541) 643-6137	CERT #: 7232

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)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - : A

System Name: Rainbow Rock Service Association	ID#: 41	01361	Month/Year: Aug-23	Disinfection <i>Giardia</i> Log Inactiv: 1
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	POL	71	POL	POL	POL	POL	POL	20
2	1.36	71	96.6	16.9	7.30	27.9	YES	20
3	2.01	71	142.7	16.1	7.20	30.6	YES	20
4	POL	71	POL	POL	POL	POL	POL	20
5	POL	71	POL	POL	POL	POL	POL	20
6	POL	71	POL	POL	POL	POL	POL	20
7	1.15	71	81.7	19.3	7.40	24.1	YES	20
8	2.29	71	162.6	18.4	7.40	29.2	YES	20
9	POL	71	POL	POL	POL	POL	POL	20
10	POL	71	POL	POL	POL	POL	POL	20
11	POL	71	POL	POL	POL	POL	POL	20
12	POL	71	POL	POL	POL	POL	POL	20
13	POL	71	POL	POL	POL	POL	POL	20
14	POL	71	POL	POL	POL	POL	POL	20
15	1.78	71	126.4	19.0	7.40	26.4	YES	20
16	0.92	71	65.3	19.1	7.20	22.1	YES	20
17	0.88	71	62.5	18.7	7.30	23.4	YES	20
18	1.09	71	77.4	18.1	7.20	24.1	YES	20
19	POL	71	POL	POL	POL	POL	POL	20
20	POL	71	POL	POL	POL	POL	POL	20
21	POL	71	POL	POL	POL	POL	POL	20
22	POL	71	POL	POL	POL	POL	POL	20
23	1.98	71	140.6	18.5	7.40	28.0	YES	20
24	0.87	71	61.8	18.3	7.30	24.0	YES	20
25	POL	71	POL	POL	POL	POL	POL	20
26	POL	71	POL	POL	POL	POL	POL	20
27	POL	71	POL	POL	POL	POL	POL	20
28	POL	71	POL	POL	POL	POL	POL	20
29	POL	71	POL	POL	POL	POL	POL	20
30	1.88	71	133.5	18.4	7.20	25.8	YES	20
31	1.06	71	75.3	16.6	7.10	25.6	YES	20

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


Revised October 2013

Oregon DHS - Drinking Water Services – Surface Water Quality Data

System Name: Rainbow Rock Service Association ID# 41 01361 Month/Year: Aug / 2023
 Minimum UVT [%] during month: 88 Duty sensor variation from reference sensor %: 0%
 Minimum Validated UVT : 75%

Date	Peak Hourly Demand Flow	Minimum Intensity	All Lamps On?	Daily Water Produced {A}	Water outside Validated Conditions {B}	Cumulative % Off-Spec Water Produced
	[gpm/unit]	[^{mW} /cm ²]	[Y or N]	[gal]	[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100 [%]
1	POL	POL	POL	POL	0	
2	26	40	Y	17,664	0	
3	26	39.8	Y	24,288	0	
4	POL	POL	POL	POL	0	
5	POL	POL	POL	POL	0	
6	POL	POL	POL	POL	0	
7	26	42.5	Y	14,062	0	
8	26	40.3	Y	15,750	0	
9	POL	POL	POL	POL	0	
10	POL	POL	POL	POL	0	
11	POL	POL	POL	POL	0	
12	POL	POL	POL	POL	0	
13	POL	POL	POL	POL	0	
14	POL	POL	POL	POL	0	
15	26	43.2	Y	9,568	0	
16	26	44.4	Y	17,940	0	
17	26	43.9	Y	11,020	0	
18	26	43.9	Y	7,714	0	
19	POL	POL	POL	POL	0	
20	POL	POL	POL	POL	0	
21	POL	POL	POL	POL	0	
22	POL	POL	POL	POL	0	
23	26	43.8	Y	10,602	0	
24	26	44	Y	18,848	0	
25	POL	POL	POL	POL	0	
26	POL	POL	POL	POL	0	
27	POL	POL	POL	POL	0	
28	POL	POL	POL	POL	0	
29	POL	POL	POL	POL	0	
30	26	42.8	Y	14,816	0	
31	26	44.1	Y	13,668	0	
Monthly Cumulative % Off-Spec Water Produced						0

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Signature: 

Op Cert #: 7232

Date: 9-5-23