

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

System Name: GALICE SUBDIVISION WATER CO ID #: OR4101424 WTP-: WTP-A Month/Year: **JANUARY 2021**

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			0.41				0.41
2						0.42	0.42
3						0.41	0.41
4			0.42				0.42
5			0.53				0.53
6			0.42				0.42
7			0.46				0.46
8					0.42		0.42
9					0.40		0.40
10						0.40	0.40
11						0.40	0.40
12				0.43			0.43
13					0.62		0.62
14						0.46	0.46
15				0.42			0.42
16						0.40	0.40
17					0.41		0.41
18					0.40		0.40
19			0.39				0.39
20			0.39				0.39
21			0.39				0.39
22				0.40			0.40
23						0.40	0.40
24						0.41	0.41
25				0.38			0.38
26			0.39				0.39
27						0.40	0.40
28						0.41	0.41
29			0.40				0.40
30						0.40	0.40
31				0.42			0.42

Slow Sand/Membrane/DE Filtration/Unfiltered 95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup> <input checked="" type="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	Monthly Summary (Answer Yes or No)	
	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
Notes:	PRINTED NAME: <b>L.D. JUDO PATTERSON</b>	
	SIGNATURE: <i>L.D. Judo Patterson</i>	DATE: <b>2/8/2021</b>
	PHONE #: <b>(541) 476-6555</b>	CERT #: <b>Josephine</b>

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. <sup>2</sup> Filtered systems only.

OHA - Drinking Water Program - Surface Water Quality Data Form

GALICE SUBDIVISION WATER CO ID #: OR4101424 WTP: WTP-A Month/Year:

JANUARY 2021

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>3</sup>	Contact Time (T)	Actual CT,	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
NOON=12P	[ppm or mg/L]	[minutes]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/10A	0.51	UNKNOWN	UNKNOWN	7.0°C	7.8	204	YES	
2/10P	0.48			8.1°C	7.8	204		
3/10P	0.65			7.9°C	7.8	210		
4/11A	0.97			8.6°C	7.8	216		
5/9A	0.42			8.8°C	7.8	204		
6/9A	1.16			8.9°C	7.8	221		
7/8A	0.83			8.9°C	7.8	216		
8/5P	0.67			8.8°C	7.8	210		
9/5P	0.59			8.9°C	7.8	204		
10/9P	0.48			8.8°C	7.8	204		
11/10P	0.78			8.9°C	7.8	210		
12/2P	0.93			8.9°C	7.8	216		
13/5P	0.69			9.8°C	7.8	210		
14/10P	0.58			9.2°C	7.8	204		
15/12P	0.89			10.1°C	7.8	216		
16/9P	1.07			10.5°C	7.8	216		
17/4P	1.19			10.6°C	7.8	216		
18/4P	1.25			10.6°C	7.8	217		
19/9A	1.27			10.0°C	7.8	217		
20/9A	0.83			8.8°C	7.8	216		
21/9A	0.61			8.5°C	7.8	210		
22/3P	0.43			8.5°C	7.8	204		
23/9P	1.01			8.7°C	7.8	221		
24/9P	1.42			8.7°C	7.8	232		
25/12P	1.35			8.9°C	7.8	227		
26/10A	1.18			8.2°C	7.8	221		
27/9P	0.62			7.1°C	7.8	210		
28/11P	0.46			6.5°C	7.8	204		
29/10A	0.42			7.6°C	7.8	204		
30/10P	1.01			8.2°C	7.8	221		
31/12P	0.63			8.4°C	7.8	210		

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