

OHA - Drinking Water Services - Surface Water Quality Data Form

County: **Columbia**  
 Month/Year: **Oct-24**

Cartridge or Bag Filtration

System Name: **Marshland** ID#: **41 01449** WTP ID: **TP- A**

Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day <u>u</u> [NTU]
1	80.00	69.00	11.00	25.0	0.18	0.18
2	81.00	68.00	13.00	25.0	0.18	0.18
3	82.00	68.00	14.00	25.0	0.19	0.19
4	83.00	67.00	16.00	25.0	0.19	0.20
5	84.00	67.00	17.00	25.0	0.19	0.19
6	85.00	66.00	19.00	25.0	0.18	0.19
7	86.00	66.00	20.00	25.0	0.19	0.19
8	87.00	65.00	22.00	25.0	0.19	0.19
9	88.00	65.00	23.00	25.0	0.19	0.20
10	88.00	65.00	23.00	25.0	0.19	0.20
11	89.00	65.00	24.00	25.0	0.19	0.19
12	90.00	65.00	25.00	25.0	0.19	0.19
13	77.00	71.00	6.00	25.0	0.20	0.21
14	77.00	71.00	6.00	25.0	0.19	0.19
15	78.00	71.00	7.00	25.0	0.19	0.20
16	78.00	70.00	8.00	25.0	0.20	0.21
17	78.00	70.00	8.00	25.0	0.19	0.20
18	78.00	70.00	8.00	25.0	0.19	0.19
19	78.00	69.00	9.00	25.0	0.20	0.21
20	78.00	69.00	9.00	25.0	0.19	0.20
21	78.00	69.00	9.00	25.0	0.20	0.20
22	79.00	69.00	10.00	25.0	0.19	0.19
23	79.00	69.00	10.00	25.0	0.19	0.20
24	79.00	69.00	11.00	25.0	0.19	0.20
25	DNR	DNR	DNR	25.0	DNR	DNR
26	DNR	DNR	DNR	25.0	DNR	DNR
27	DNR	DNR	DNR	25.0	DNR	DNR
28	80.00	68.00	12.00	25.0	0.22	0.22
29	81.00	68.00	13.00	25.0	0.21	0.22
30	81.00	68.00	13.00	25.0	0.20	0.21
31	82.00	68.00	14.00	25.0	0.22	0.23

<b>Cartridge &amp; Bag Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / No	CT's met everyday? (see back)	<input checked="" type="radio"/> Yes / No
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/L?	<input checked="" type="radio"/> Yes / No
Notes: PSI = pounds per square inch PSID = pounds per square inch difference (before filter - after filter) PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.		PRINTED NAME: Micah Olson	DATE: 11-10-24
		SIGNATURE: <i>M Olson</i>	CERT #: 3784
		PHONE #: ( 971 )563-3128	

*u Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not*

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- : **A**

System Name: **Marshland** ID#: 41 **01449** Month/Year: **Oct-24** *Giardia Log Inactivation Req'd:* **1.0**

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <i>a</i>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <i>a</i>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.51	144	73.4	13.1	6.80	27.2	YES	5
2	0.32	144	46.1	13.0	6.80	26.7	YES	5
3	0.38	144	54.7	12.9	6.80	27.1	YES	6
4	0.4	144	57.6	12.8	6.80	27.4	YES	4
5	0.43	144	61.9	12.9	6.80	27.3	YES	5
6	0.43	144	61.9	12.7	6.80	27.6	YES	6
7	0.45	144	64.8	12.9	6.80	27.3	YES	4
8	0.48	144	69.1	13.0	6.80	27.2	YES	3
9	0.51	144	73.4	13.1	6.80	27.2	YES	4
10	0.48	144	69.1	12.9	6.80	27.4	YES	4
11	0.45	144	64.8	12.7	6.80	27.7	YES	4
12	0.43	144	61.9	12.7	6.80	27.6	YES	4
13	0.42	144	60.5	12.8	6.80	27.4	YES	5
14	0.4	144	57.6	12.6	6.90	28.8	YES	3
15	0.37	144	53.3	12.5	6.80	27.8	YES	4
16	0.36	144	51.8	12.3	6.80	29.0	YES	6
17	0.33	144	47.5	12.1	6.90	30.3	YES	4
18	0.32	144	46.1	12.0	6.90	30.5	YES	3
19	0.35	144	50.4	12.0	6.90	30.6	YES	5
20	0.38	144	54.7	12.1	6.90	30.5	YES	4
21	0.39	144	56.2	12.0	6.90	30.7	YES	7
22	0.42	144	60.5	11.9	6.90	31.0	YES	5
23	0.44	144	63.4	11.9	6.90	31.1	YES	6
24	0.46	144	66.2	11.8	6.90	31.3	YES	6
25	0.4	144	57.6	11.6	6.90	31.5	YES	4
26	0.36	144	51.8	11.5	6.90	31.6	YES	5
27	0.33	144	47.5	11.5	6.90	31.5	YES	5
28	0.54	144	77.8	11.0	6.90	33.2	YES	4
29	0.52	144	74.9	11.1	6.90	33.0	YES	6
30	0.52	144	74.9	11.4	6.90	32.3	YES	6
31	0.48	144	69.1	11.0	6.90	33.0	YES	4

*a* If Cl<sub>2</sub> at entry point < 0.2 mg/L or CT not met, notify DWS within 24 hours.

Revised July 2018

Return by 10th of following month by email, fax, or mail to:  
 dwp.dnce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350