

OHA - Drinking Water Services - Surface Water Quality Data Form

County: **Columbia**

Cartridge or Bag Filtration

Month/Year: **Feb-26**

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 ♦ [NTU]
1	89.00	65.00	24.00	25.0	0.06	0.22
2	89.00	64.00	25.00	25.0	0.09	0.18
3	81.00	69.00	12.00	25.0	0.15	0.16
4	82.00	68.00	14.00	25.0	0.11	0.13
5	83.00	68.00	15.00	25.0	0.09	0.11
6	83.00	67.00	16.00	25.0	0.08	0.09
7	85.00	66.00	19.00	25.0	0.07	0.13
8	87.00	66.00	21.00	25.0	0.08	0.09
9	DNR	DNR	DNR	25.0	DNR	DNR
10	88.00	66.00	22.00	25.0	0.09	0.01
11	88.00	65.00	23.00	25.0	0.09	0.01
12	89.00	65.00	24.00	25.0	0.08	0.09
13	79.00	73.00	6.00	25.0	0.06	0.06
14	79.00	72.00	7.00	25.0	0.05	0.05
15	79.00	71.00	8.00	25.0	0.04	0.05
16	79.00	71.00	8.00	25.0	0.06	0.07
17	79.00	71.00	8.00	25.0	0.06	0.06
18	80.00	71.00	9.00	25.0	0.06	0.06
19	80.00	71.00	9.00	25.0	0.05	0.06
20	80.00	70.00	10.00	25.0	0.05	0.06
21	80.00	70.00	10.00	25.0	0.05	0.06
22	80.00	70.00	10.00	25.0	0.05	.05
23	80.00	69.00	11.00	25.0	0.04	0.05
24	81.00	69.00	12.00	25.0	0.08	0.09
25	81.00	68.00	13.00	25.0	0.09	0.10
26	83.00	68.00	15.00	25.0	0.08	0.08
27	84.00	67.00	17.00	25.0	0.07	0.08
28	85.00	67.00	18.00	25.0	0.07	0.07
29				25.0		
30				25.0		
31				25.0		

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/L?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> 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 SIGNATURE: <i>Micah Olson</i> DATE: 3/9/2026 PHONE #: (971) 563-3128 CERT #: 3794	

♦ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not correspond to continuous readings' maximum.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP: **A**

System Name: Marshland	ID#: 41 01449	Month/Year:	Giardia Log Inactivation Req'd:	1.0
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Date / Time	Minimum Cl ₂ Residual at 1 st User (C) [Ⓢ]	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? [Ⓢ]	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.31	144	44.6	8.2	7.12	41.9	YES	11
2	0.33	144	47.5	8.2	7.13	42.1	YES	10
3	0.35	144	50.4	8.1	7.18	43.3	YES	10
4	0.41	144	59.0	8.0	7.16	43.5	YES	11
5	0.42	144	60.5	8.0	7.19	44.0	YES	10
6	0.38	144	54.7	7.9	7.21	44.5	YES	10
7	0.37	144	53.3	8.0	7.24	44.6	YES	F
8	0.35	144	50.4	7.9	7.26	45.1	YES	F
9	0.32	144	46.1	7.8	7.29	45.7	YES	F
10	0.5	144	72.0	7.7	7.30	47.1	YES	12
11	0.62	144	89.3	7.7	7.32	48.1	YES	10
12	0.71	144	102.2	7.6	7.34	49.3	YES	F
13	0.65	144	93.6	7.5	7.35	49.5	YES	10
14	0.59	144	85.0	0.7	7.35	77.8	YES	F
15	0.47	144	67.7	7.2	7.36	49.6	YES	F
16	0.39	144	56.2	7.0	7.37	50.0	YES	F
17	0.38	144	54.7	6.9	7.38	50.5	YES	F
18	0.37	144	53.3	6.8	7.38	50.7	YES	F
19	0.38	144	54.7	6.9	7.38	50.5	YES	F
20	0.41	144	59.0	7.0	7.39	50.5	YES	11
21	0.43	144	61.9	7.1	7.40	50.4	YES	15
22	0.46	144	66.2	7.2	7.40	50.3	YES	10
23	0.48	144	69.1	7.3	7.41	50.2	YES	10
24	0.34	144	49.0	7.4	7.38	48.6	YES	F
25	0.35	144	50.4	7.4	7.37	48.5	YES	F
26	0.36	144	51.8	7.5	7.37	48.2	YES	F
27	0.35	144	50.4	7.4	7.35	48.1	YES	F
28	0.34	144	49.0	7.3	7.34	48.2	YES	10
29		144						
30		144						
31		144						

[Ⓢ] If Cl₂ 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.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350