Slow Sand, M					ality Data For r Unfiltered S		County: Month/Year:	Jackson Mar-23
System Name:		WC - Shad		ID#: 41 01		- Jyouanie	WTP: TP-	
	12 AM	4 AM	8 AM	NOON	4 PM	8 PM		ling of the day 1
Day	[NTU]	[NTU]	[NTU]	[NTU]	[NTU]	[NTU]		ITŬ]
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		<u> </u>						
	1/8 4	e/DE Filtrati					ry (Answer Yes	
			TLIO	Yes/No	CT's met eve	eryday? (see	All Cl2 residu	al at entry point
95% of daily	turbidity read							
95% of daily All daily tu	turbidity read urbidity readir	ngs ≤ 5 NTU	?	Yes/No	Yes	/ No)	Yes	s / No
95% of daily All daily tu All turbidi	turbidity read	ngs ≤ 5 NTU	?			/ No)		s / No
95% of daily All daily tu	turbidity read urbidity readir	ngs ≤ 5 NTU	?	Yes/No	PRINTED NA	/ No) ME: JJ Olso	n	
95% of daily All daily tu All turbidi	turbidity read urbidity readir	ngs ≤ 5 NTU	?	Yes/No			n	DATE: 4-4-23

<sup>&</sup>lt;sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may correspond to continuous readings' maximum. <sup>2</sup> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

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OHA - Drinking Water Serv	ices - Surface Water	Quality Data Form	WTP-:	<b>A</b> 1	
			Disinfection		
			Giardia Log		
System Name: Hiland WC - Shady Cove	ID#: 41 01520	Month/Year: Mar-23	Inactive:	1.0	

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( <b>C</b> ) <sup>3</sup>	Contact Time ( <b>T</b> )	Actual CT	Temp	рН	Required CT	CT Met? 3	Peak Hourly Demand Flo
	[ppm or mg/L	[minutes]	СХТ	[° C]		formula	Yes / No	[GPM]
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<sup>&</sup>lt;sup>3</sup> 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: <a href="mailto:dwp.dmce@state.or.us">dwp.dmce@state.or.us</a>; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

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