Day 12 AM (NTU) 4 AM (NTU) 8 AM (NTU) NOON 4 PM (NTU) 8 PM (NTU) Highest Reading of the day (NTU) 2/1/2025 OFF	Slow Sand, N				r Unfiltered Systems		Month/Year:	Feb-25	
Usy [NTU] [System Name:	Shady		stech	ID#: 41 01520				A1(Westech
2/1/2025 0FF 0	Dav						8 PM		
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2/26/2025 OFF	2/24/2025	OFF	OFF	OFF	OFF	OFF	OFF		
2/27/2025 OFF	2/25/2025	OFF	OFF	OFF	OFF	OFF	OFF		
2/28/2025 OFF	2/26/2025	OFF	OFF	OFF	OFF	OFF	OFF		
Slow Sand/Membrane/DE Filtration/Unfiltered Monthly Summary (Answer Yes or No) 95% of daily turbidity readings ≤ 0.3 NTU? Yes No All daily turbidity readings ≤ 5 NTU? Yes No All turbidity readings < 1FE² triggers	2/27/2025	OFF	OFF	OFF	OFF	OFF	OFF		
95% of daily turbidity readings ≤ 0.3 NTU? All daily turbidity readings ≤ 5 NTU? All turbidity readings < 1FE ² triggers No Ves/No PRINTED NAME: JJ Olson	2/28/2025	OFF	OFF	OFF	OFF	OFF	OFF	0	FF
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95% of daily turbidity readings ≤ 0.3 NTO? res/No back) ≥ 0.2 mg/l? All daily turbidity readings ≤ 5 NTU? Yes/No Yes/No Yes/No All turbidity readings < IFE² triggers	Slow Sand/Membrane/DE Filtration/Unfiltered								
All turbidity readings < IFE ² triggers Yes No Yes / No otes: PRINTED NAME: JJ Olson	, , ,				トノ				
)/ No			
Signature: Jeffrey Olson DATE: 3/07/20	otes:					PRINTED NA	<u></u>		
						Signature:	Jeffrey C	lson	DATE: 3/07/20

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)) PAGE 1 of 2

OHA - D	WTP-:	A1						
					-		Disinfection	
System Name: Shady Cove - Westech			ID#: 41 01520		Month/Year: Feb 25		Giardia Log	4.0
System Name: Shady	Inactive:	1.0						
	Minimum Cl ₂				<u> </u>			
	Residual at	Contact	Actual CT	Temp	рН	Required CT	CT Met? ³	Peak Hourly
Date / Time	1st User	Time						Demand Flow
	(C) ³	(T)						
	[ppm or mg/L	[minutes]	СХТ	[° C]		formula	Yes / No	[GPM]
2/1/2025	OFF							
2/2/2025	OFF							
2/3/2025	OFF							
2/4/2025	OFF							
2/5/2025	OFF		SEAS	ONALL	Y OFFL	INE 🗌		
2/6/2025	OFF							
2/7/2025	OFF							
2/8/2025	OFF							
2/9/2025	OFF							
2/10/2025	OFF							
2/11/2025	OFF							
2/12/2025	OFF							
2/13/2025	OFF							
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2/22/2025	OFF							
2/23/2025	OFF							
2/24/2025	OFF							
2/25/2025	OFF							
2/26/2025	OFF							
2/27/2025	OFF							
2/28/2025	OFF							

³ 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: <u>dwp.dmce@state.or.us;</u> 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

PAGE 2 of 2