

**OHA - Drinking Water Services - Surface Water Quality Data Form**  
**Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems**

County: **Jackson**  
 Month/Year: **Nov-25**

System Name: <b>Hiland WC - Shady Cove</b>		ID#: <b>41 01520</b>		WTP : TP - <b>A1(Westech)</b>			
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day [NTU]
11/1/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/2/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/3/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/4/2025	OFF	<b>SEASONALLY OFFLINE</b>				OFF	OFF
11/5/2025	OFF					OFF	OFF
11/6/2025	OFF					OFF	OFF
11/7/2025	OFF					OFF	OFF
11/8/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/9/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/10/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/11/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/12/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/13/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/14/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/15/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/16/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/17/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/18/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/19/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/20/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/21/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/22/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/23/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/24/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/25/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/26/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/27/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/28/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/29/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF
11/30/2025	OFF	OFF	OFF	OFF	OFF	OFF	OFF

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings $\leq$ 0.3 NTU?	CT's met everyday? (see back)	All Cl2 residual at entry point $\geq$ 0.2 mg/l?
All daily turbidity readings $\leq$ 5 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
All turbidity readings < IFE <sup>2</sup> triggers	<input checked="" type="radio"/> Yes / <input type="radio"/> No	

Notes:	PRINTED NAME: <b>Curtis Olson</b>	
	Signature: <i>Curtis Olson</i>	DATE: <b>12/05/2025</b>
	PHONE #: <b>(503)-554-8333</b>	CERT #: <b>T-216644</b>

<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))

<b>OHA - Drinking Water Services - Surface Water Quality Data Form</b>				<b>WTP - : A1</b>	
<b>System Name: Hiland WC - Shady Cove</b>				<b>ID#: 41 01520</b>	
<b>Month/Year: Dec-24</b>				<b>Disinfection Giardia Log</b>	
				<b>Inactive: 1.0</b>	

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
11/1/2025	OFF							
11/2/2025	OFF							
11/3/2025	OFF							
11/4/2025	OFF		<b>SEASONALLY OFFLINE</b>					
11/5/2025	OFF							
11/6/2025	OFF							
11/7/2025	OFF							
11/8/2025	OFF							
11/9/2025	OFF							
11/10/2025	OFF							
11/11/2025	OFF							
11/12/2025	OFF							
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11/22/2025	OFF							
11/23/2025	OFF							
11/24/2025	OFF							
11/25/2025	OFF							
11/26/2025	OFF							
11/27/2025	OFF							
11/28/2025	OFF							
11/29/2025	OFF							
11/30/2025	OFF							

<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:**

dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350