

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

County: **Jackson**
 Month/Year: **Mar-26**

System Name: **Hiland WC - Shady Cove** ID#: **41 01520** WTP : TP - **A1(Westech)**

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day [NTU]
3/1/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/2/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/3/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/4/2026	OFF	SEASONALLY OFFLINE				OFF	OFF
3/5/2026	OFF					OFF	OFF
3/6/2026	OFF					OFF	OFF
3/7/2026	OFF					OFF	OFF
3/8/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/9/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/10/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/11/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/12/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/13/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/14/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/15/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/16/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/17/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/18/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/19/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/20/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/21/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/22/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/23/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/24/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/25/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/26/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/27/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/28/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/29/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/30/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF
3/31/2026	OFF	OFF	OFF	OFF	OFF	OFF	OFF

<p align="center">Slow Sand/Membrane/DE Filtration/Unfiltered</p> <p>95% of daily turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>All turbidity readings < IFE² triggers <input checked="" type="radio"/> Yes <input type="radio"/> No</p>	<p align="center">Monthly Summary (Answer Yes or No)</p> <p>CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No</p> <p>All Cl₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No</p>
---	--

<p>Notes:</p>	<p>PRINTED NAME: Curtis Olson</p>	
	<p>Signature: <i>Curtis Olson</i></p>	<p>DATE: 04/06/2026</p>
	<p>PHONE #: (503)-554-8333</p>	<p>CERT #: T-216644</p>

¹ 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. ² IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

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

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
3/1/2026	OFF							
3/2/2026	OFF							
3/3/2026	OFF							
3/4/2026	OFF							
3/5/2026	OFF		SEASONALLY OFFLINE					
3/6/2026	OFF							
3/7/2026	OFF							
3/8/2026	OFF							
3/9/2026	OFF							
3/10/2026	OFF							
3/11/2026	OFF							
3/12/2026	OFF							
3/13/2026	OFF							
3/14/2026	OFF							
3/15/2026	OFF							
3/16/2026	OFF							
3/17/2026	OFF							
3/18/2026	OFF							
3/19/2026	OFF							
3/20/2026	OFF							
3/21/2026	OFF							
3/22/2026	OFF							
3/23/2026	OFF							
3/24/2026	OFF							
3/25/2026	OFF							
3/26/2026	OFF							
3/27/2026	OFF							
3/28/2026	OFF							
3/29/2026	OFF							
3/30/2026	OFF							
3/31/2026	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:
dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350