

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

County: **Jackson**
 Month/Year: **Dec-24**

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]
12/1/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/2/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/3/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/4/2023	OFF	SEASONALLY OFFLINE				OFF	OFF
12/5/2023	OFF					OFF	OFF
12/6/2023	OFF					OFF	OFF
12/7/2023	OFF					OFF	OFF
12/8/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/9/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/10/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/11/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/12/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/13/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/14/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/15/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/16/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/17/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/18/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/19/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/20/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/21/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/22/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/23/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/24/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/25/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/26/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/27/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/28/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/29/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/30/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF
12/31/2023	OFF	OFF	OFF	OFF	OFF	OFF	OFF

<p>Slow Sand/Membrane/DE Filtration/Unfiltered</p> <p>95% of daily turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes <input checked="" type="radio"/> No</p> <p>All turbidity readings < IFE² triggers <input checked="" type="radio"/> Yes <input checked="" type="radio"/> No</p>	<p>Monthly Summary (Answer Yes or No)</p> <p>CFs met everyday? (see back) <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> No</p> <p>All Ciz residual at entry point > 0.2 mg/l? <input checked="" type="radio"/> Yes / <input checked="" type="radio"/> No</p>
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<p>Notes:</p>	<p>PRINTED NAME: JJ Olson</p>	
	<p>Signature: <i>JJ Olson</i></p>	<p>DATE: 01/09/25</p>
	<p>PHONE #: (503) 554-8333</p>	<p>CERT #: T-766039</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 <i>Giardia</i> 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]
12/1/2023	OFF							
12/2/2023	OFF							
12/3/2023	OFF							
12/4/2023	OFF		SEASONALLY OFFLINE					
12/5/2023	OFF							
12/6/2023	OFF							
12/7/2023	OFF							
12/8/2023	OFF							
12/9/2023	OFF							
12/10/2023	OFF							
12/11/2023	OFF							
12/12/2023	OFF							
12/13/2023	OFF							
12/14/2023	OFF							
12/15/2023	OFF							
12/16/2023	OFF							
12/17/2023	OFF							
12/18/2023	OFF							
12/19/2023	OFF							
12/20/2023	OFF							
12/21/2023	OFF							
12/22/2023	OFF							
12/23/2023	OFF							
12/24/2023	OFF							
12/25/2023	OFF							
12/26/2023	OFF							
12/27/2023	OFF							
12/28/2023	OFF							
12/29/2023	OFF							
12/30/2023	OFF							
12/31/2023	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