

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Coos County
 Month/Year: Nov. 2022
 TP - For Davis Creek

Cartridge or Bag Filtration

System Name: BOB BELLONI RANCH ID#:41-05592

WTP ID: A

Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day ¹ [NTU]
1						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20						
21						
22						
23						
24						
25						
26						
27						
28						
29						
30						
31						

Water treatment system is currently offline, purchasing water from Coos Bay North bond waterboard.

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No

Notes: PSI = pounds per square inch
 PSID = pounds per square inch difference (before filter - after filter)
 PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.

PRINTED NAME: JIM PINSON
 SIGNATURE: *[Signature]* DATE: 12/6/22
 PHONE #: (541) 269 0321 CERT #: D - 08796

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not correspond to continuous readings' maximum.

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WTP - A

System Name: BOB BELLONI RANCH		ID#: 41 05592		Month/Year: Nov. 2022		Disinfection Virus Log Inactv: 4		
Date / Time	Minimum Cl ₂ Residual at 1st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
date - hh:mm	[ppm or mg/L]	[minutes]	C X T	[° C]	Table #1 Values	Table #1 Values ³	Yes / No	[GPM]
1	0.2	148	29.6	12	8.3	12.0	Yes	
2	0.2	148	29.6	13	8.7	12.0	Yes	
3	0.2	148	29.6	11	8.6	12.0	Yes	
4	0.2	148	29.6	11	7.7	12.0	Yes	
5	0.2	148	29.6	12	7.7	12.0	Yes	
6	0.2	148	29.6	12	7.6	12.0	Yes	
7	0.2	148	29.6	12	7.8	12.0	Yes	
8	0.2	148	29.6	12	8.1	12.0	Yes	
9	0.2	148	29.6	12	8.1	12.0	Yes	
10	0.2	148	29.6	12	8.1	12.0	Yes	
11	0.2	148	29.6	15	8.3	12.0	Yes	
12	0.2	148	29.6	12	8.2	12.0	Yes	
13	0.2	148	29.6	11	8.1	12.0	Yes	
14	0.2	148	29.6	9	8.1	12.0	Yes	
15	0.2	148	29.6	8	8.1	12.0	Yes	
16	0.2	148	29.6	8	8.1	12.0	Yes	
17	0.2	148	29.6	8	8.0	12.0	Yes	
18	0.2	148	29.6	9	8.0	12.0	Yes	
19	0.2	148	29.6	8	8.0	12.0	Yes	
20	6.9	148	1021.2	7	8.1	12.0	Yes	
21	6.9	148	1021.2	7	8.0	12.0	Yes	
22	6.7	148	991.6	7	8.1	12.0	Yes	
23	5.7	148	843.6	9	8.0	12.0	Yes	
24	5.7	148	843.6	9	8.0	12.0	Yes	
25	5.9	148	873.2	9	8.0	12.0	Yes	
26	5.9	148	873.2	8	8.1	12.0	Yes	
27	6.0	148	888	8	8.1	12.0	Yes	
28	6.0	148	888	8	8.2	12.0	Yes	
29	6.3	148	932.4	7	8.0	12.0	Yes	
30	6.4	148	947.2	7	8.1	12.0	Yes	
31		148				12.0		

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

³ Given the actual contact time of 148 min and minimum Chlorine concentration (0.2 mg/l), system is using a required virus CT of 12 minutes in every row.

Temp (C°)	0.0 - 4.9	5.0 - 9.9	10.0 - 14.9	15.0 - 19.9	20 - 24.9	≥ 25.0 C°
Required CT	12.0	8.0	6.0	4.0	3.0	2.0

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