

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Coos County

Cartridge or Bag Filtration

Month/Year: March, 2023

System Name: BOB BELLONI RANCH ID#:41-05592 WTP ID: A TP - For Davis Creek

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						

Treatment system is still down, using Coos Bay North Bend water for all of March.

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	Yes / <input checked="" 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?	Yes / <input checked="" type="radio"/> No	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> Yes / 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: *Jim Pinson* DATE: 4/3/23
 PHONE #: (541) 269-0321 CERT #: J-08794
 D-08794

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.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP - A
Disinfection Virus Log Inactv: 4

System Name: BOB BELLONI RANCH		ID#: 41 05592		Month/Year:			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	7.2	148	1,065.6	6	8.2	12.0	Yes	
2	7.1	148	1,050.8	6	8.2	12.0	Yes	
3	7.1	148	1,050.8	6	8.2	12.0	Yes	
4	7.1	148	1,050.8	6	8.2	12.0	Yes	
5	7.0	148	1,036	6	8.1	12.0	Yes	
6	7.0	148	1,036	6	8.0	12.0	Yes	
7	7.0	148	1,036	6	7.7	12.0	Yes	
8	7.0	148	1,036	6	8.0	12.0	Yes	
9	7.0	148	1,036	6	8.0	12.0	Yes	
10	7.0	148	1,036	6	8.0	12.0	Yes	
11	7.0	148	1,036	6	8.0	12.0	Yes	
12	7.1	148	1,050.8	7	8.0	12.0	Yes	
13	7.1	148	1,050.8	7	8.0	12.0	Yes	
14	7.1	148	1,050.8	7	8.0	12.0	Yes	
15	7.1	148	1,050.8	8	8.1	12.0	Yes	
16	7.0	148	1,036	7	8.0	12.0	Yes	
17	7.0	148	1,036	7	8.0	12.0	Yes	
18	7.0	148	1,036	7	8.0	12.0	Yes	
19	6.8	148	1,006.4	7	8.0	12.0	Yes	
20	6.8	148	1,006.4	6	8.0	12.0	Yes	
21	6.8	148	1,006.4	8	8.0	12.0	Yes	
22	6.7	148	991.6	8	8.0	12.0	Yes	
23	6.7	148	991.6	8	8.0	12.0	Yes	
24	6.7	148	991.6	8	8.0	12.0	Yes	
25	6.7	148	991.6	8	8.0	12.0	Yes	
26	6.8	148	1,006.4	8	8.0	12.0	Yes	
27	6.8	148	1,006.4	8	8.0	12.0	Yes	
28	6.8	148	1,006.4	8	8.2	12.0	Yes	
29	6.8	148	1,006.4	8	8.2	12.0	Yes	
30	6.8	148	1,006.4	8	8.3	12.0	Yes	
31	6.8	148	1,006.4	8	8.3	12.0	Yes	

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