

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Columbia

Conventional or Direct Filtration

Month/Year: Feb-22

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1	0.03	0.02	0.03	0.03	0.02	0.02	0.05
2	0.03	0.02	0.03	0.04	0.02	0.02	0.15
3	0.02	0.02	0.03	0.02	0.02	0.02	0.03
4	0.02	0.02	0.02	0.02	0.02	0.02	0.03
5	0.02	0.02	0.03	0.04	0.04	0.04	0.15
6	0.03	0.04	0.03	0.04	0.03	0.03	0.08
7	0.04	0.03	0.04	0.03	0.03	0.03	0.20
8	Plant Off	Plant Off	Plant Off	0.19	0.04	0.04	0.26
9	0.03	0.03	0.05	0.03	0.03	0.03	0.05
10	0.02	0.02	0.02	0.02	0.02	0.02	0.03
11	0.02	0.02	0.02	0.02	0.02	0.02	0.03
12	0.02	0.02	0.02	0.02	0.02	0.02	0.03
13	0.02	0.02	0.02	0.02	0.02	0.02	0.30
14	0.18	0.03	0.02	0.02	0.02	0.02	0.18
15	0.02	0.02	0.02	0.02	0.02	0.02	0.02
16	0.02	0.02	0.02	0.02	0.02	0.02	0.03
17	0.02	0.02	0.02	0.02	0.02	0.02	0.03
18	0.02	0.02	0.02	0.02	0.02	0.02	0.03
19	0.02	0.02	0.02	0.02	0.02	0.02	0.03
20	0.02	0.02	0.02	0.02	0.02	0.02	0.03
21	0.02	0.02	0.02	0.02	0.03	0.03	0.03
22	0.02	0.02	0.02	0.02	0.02	0.02	0.03
23	0.02	0.02	0.03	0.02	0.02	0.02	0.03
24	0.02	0.02	0.02	0.02	0.02	0.02	0.02
25	0.02	0.02	0.02	0.02	0.02	0.02	0.03
26	0.02	0.02	0.02	0.02	0.02	0.02	0.03
27	0.02	0.02	0.02	0.02	0.02	0.02	0.03
28	0.02	0.02	0.02	0.02	0.03	0.03	0.03
29							
30							
31							

Conventional or Direct Filtration			Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	Yes		Yes	Yes
All turbidity readings < IFE ² triggers	Yes			
Notes: Fax 971-673-0694 DWP.DMCE@state.or.us			PRINTED NAME: Joshua Allman	
			SIGNATURE: <i>Joshua Allman</i>	DATE: 3/2/22
			PHONE #: 503-367-7397	CERT #:

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² IFE = Individ. Filter Effl. (333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :

System Name: Berndt Creek Water Corp

ID#: 41

05737

Month/Year: Feb/2022

Disinfection Giardia
Log Inactivatⁿ Req'd:

1

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Demand Flow [GPM]
1	1.0	126	126	5.8	7.4	60	yes	173
2	0.9	126	113	5.7	7.3	60	yes	174
3	0.8	126	101	5.8	7.2	58	yes	188
4	1.1	126	138	5.7	7.4	61	yes	189
5	1.3	126	163	5.8	7.7	62	yes	230
6	1.4	126	176	5.7	7.2	62	yes	215
7	1.3	126	138	5.7	7.2	58	yes	200
8	0.9	126	113	5.8	7.4	60	yes	272
9	0.9	126	113	5.9	7.2	58	yes	526
10	0.8	126	101	6.0	7.0	49	yes	145
11	0.9	126	113	6.1	6.9	50	yes	190
12	1.0	126	126	6.1	6.9	50	yes	215
13	1.0	126	126	6.1	6.9	50	yes	313
14	0.9	126	113	6.1	6.9	50	yes	293
15	0.9	126	113	6.2	6.9	50	yes	324
16	0.9	126	113	6.2	6.9	50	yes	239
17	1.2	126	163	6.3	6.8	51	yes	66
18	1.2	126	163	6.3	6.8	51	yes	89
19	1.1	126	138	6.4	7.0	51	yes	108
20	1.1	126	138	6.4	6.9	51	yes	98
21	0.9	126	113	6.3	6.9	50	yes	112
22	0.8	126	101	6.1	6.9	49	yes	76
23	0.8	126	101	5.9	6.9	49	yes	97
24	1.0	126	126	5.9	6.9	50	yes	100
25	1.0	126	126	5.7	6.9	50	yes	92
26	1.0	126	126	5.5	7.0	50	yes	57
27	0.9	126	113	5.5	7.0	50	yes	92
28	0.9	126	113	5.5	7.0	50	yes	60
29								
30								
31								

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