

OHA - Drinking Water Services -Turbidity Monitoring Report Form
Conventional or Direct Filtration

County: **Columbia**
 Month/Year: **Apr-23**

System Name: **Berndt Creek Water Corp** **#OR4105737** **WTP : TP -**

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	0.06	0.03	0.03	0.03	0.03	0.03	0.06
2	0.03	0.03	0.03	0.03	0.03	0.03	0.04
3	0.03	0.03	0.03	0.03	0.03	0.03	0.04
4	0.03	0.03	0.03	0.26	0.18	0.16	0.26
5	0.11	0.08	0.05	0.06	0.04	0.04	0.11
6	0.04	0.04	0.04	0.05	0.04	0.04	0.06
7	0.04	0.03	0.03	0.03	0.03	0.03	0.04
8	0.03	0.12	0.11	0.09	0.11	0.13	0.13
9	0.11	0.08	0.07	0.09	0.11	0.09	0.11
10	0.18	0.24	0.28	0.03	0.04	0.04	0.30
11	0.03	0.03	0.03	0.03	0.03	0.03	0.29
12	0.03	0.03	0.03	0.03	0.03	0.03	0.04
13	0.03	0.03	0.03	0.03	0.03	0.03	0.04
14	0.03	0.03	0.03	0.03	0.03	0.03	0.04
15	0.03	0.03	0.03	0.03	0.03	0.03	0.04
16	0.03	0.03	0.04	0.03	0.03	0.03	0.04
17	0.03	0.03	0.03	0.03	0.03	0.03	0.03
18	0.03	0.03	0.03	0.03	0.03	0.03	0.04
19	0.03	0.03	0.03	0.04	0.04	0.04	0.08
20	0.05	0.05	0.04	0.03	0.03	0.03	0.08
21	0.03	0.03	0.03	0.03	0.06	0.06	0.06
22	0.03	0.03	0.03	0.03	0.03	0.03	0.05
23	0.03	0.03	0.03	0.03	0.03	0.03	0.07
24	0.03	0.03	0.03	0.03	0.03	0.03	0.05
25	0.03	0.03	0.03	0.03	0.03	0.03	0.07
26	0.03	0.03	0.03	0.03	0.03	0.03	0.07
27	0.03	0.03	0.03	0.03	0.03	0.03	0.05
28	0.03	0.03	0.03	0.03	0.03	0.03	0.05
29	0.03	0.03	0.03	0.03	0.03	0.03	0.06
30	0.03	0.03	0.03	0.03	0.06	0.06	0.06
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU?	Yes	CT's met everyday? (see back) All Cl ₂ residual at entry point ≥ 0.2 mg/l? Yes
All 4-hour turbidity readings ≤ 1 NTU?	Yes	
All turbidity readings < IFE ² triggers	Yes	

Notes: Fax 971-673-0694 DWP.DMCE@state.or.us

PRINTED NAME: Joshua Allman	DATE: 5/2/23
SIGNATURE: <i>Joshua Allman</i>	CERT #:
PHONE #: 503-367-7397	

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: April 2023 Disinfection Giardia Log Inactivat³ Req'd: 1

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]
1	1.03	126	130	7.9	7.0	51	yes	56
2	1.06		134	8.1	6.9	51	yes	92
3	1.06		134	7.9	6.9	51	yes	65
4	1.05		133	8.1	6.9	51	yes	86
5	1.05		133	8.1	6.9	51	yes	62
6	1.04		131	8.1	6.9	51	yes	52
7	1.01		127	8.2	6.9	51	yes	92
8	0.90		113	8.3	7.0	51	yes	78
9	0.90		113	8.3	7.0	53	yes	87
10	0.80		101	8.3	7.0	53	yes	107
11	0.80		101	8.3	7.0	53	yes	111
12	0.80		101	8.3	6.9	51	yes	82
13	1.01		127	8.3	6.9	51	yes	71
14	1.01		127	8.3	6.9	51	yes	157
15	1.01		127	8.3	6.9	51	yes	77
16	1.01		127	8.3	6.9	51	yes	105
17	1.0		126	8.5	6.9	50	yes	110
18	1.0		126	8.8	6.9	50	yes	93
19	1.1		139	8.8	6.9	51	yes	91
20	1.1		139	8.9	6.9	51	yes	73
21	1.1		139	8.9	6.9	51	yes	113
22	1.1		139	8.8	6.9	51	yes	125
23	1.1		139	9.0	6.9	51	yes	113
24	1.1		139	9.1	6.9	51	yes	83
25	1.1		139	9.2	6.9	51	yes	60
26	1.1		139	9.3	7.0	51	yes	98
27	1.1		139	9.4	6.9	51	yes	96
28	1.1		139	9.7	6.9	51	yes	82
29	1.1		139	10.0	7.0	38	yes	95
30	1.2		139	10.2	7.0	38	yes	78
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