

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

County: **Columbia**
 Month/Year: **Dec-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	0.02	0.02	0.02	0.03	0.02	0.02	0.03
2	0.03	0.02	0.02	0.03	0.03	0.03	0.05
3	0.03	0.03	0.03	0.03	0.03	0.03	0.05
4	0.03	0.02	0.02	0.02	0.02	0.02	0.04
5	0.02	0.02	0.02	0.02	0.02	0.02	0.03
6	0.02	0.02	0.02	0.02	0.02	0.02	0.04
7	0.02	0.02	0.02	0.03	0.02	0.02	0.04
8	0.02	0.02	0.02	0.02	0.02	0.02	0.03
9	0.02	0.02	0.02	0.02	0.02	0.02	0.03
10	0.02	0.02	0.02	0.02	0.03	0.03	0.04
11	0.02	0.02	0.02	0.03	0.03	0.03	0.04
12	0.02	0.02	0.02	0.02	0.02	0.02	0.05
13	0.02	0.02	0.02	0.02	0.02	0.02	0.04
14	0.02	0.02	0.02	0.02	0.02	0.02	0.03
15	0.02	0.02	0.02	0.02	0.02	0.02	0.04
16	0.02	0.02	0.02	0.02	0.02	0.02	0.04
17	0.02	0.02	0.02	0.02	0.02	0.02	0.04
18	0.02	0.02	0.02	0.02	0.02	0.02	0.04
19	0.02	0.02	0.02	0.02	0.02	0.02	0.04
20	0.02	0.02	0.02	0.03	0.02	0.02	0.04
21	0.02	0.02	0.02	0.03	0.02	0.02	0.06
22	0.02	0.02	0.02	0.02	0.02	0.02	0.03
23	0.02	0.02	0.02	0.02	0.02	0.02	0.03
24	0.02	0.02	0.02	0.02	0.02	0.02	0.04
25	0.02	0.02	0.02	0.02	0.02	0.02	0.04
26	0.02	0.02	0.02	0.02	0.02	0.02	0.04
27	0.03	0.03	0.02	0.03	0.03	0.03	0.07
28	0.03	0.02	0.02	0.03	0.03	0.03	0.05
29	0.03	0.02	0.02	0.03	0.03	0.03	0.06
30	0.03	0.03	0.03	0.03	0.03	0.03	0.06
31	0.03	0.03	0.02	0.02	0.02	0.02	0.23

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 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: 1/3/24
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 Services – Surface Water Quality Data Form

Month/Year: 12/23

System Name: <u>Becraft Creek Water Co.</u>		ID# 41 <u>05737</u>		WTP				
Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ²	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]/hr
1/	1.3	126	164	8.8	6.9	52	Yes	114
2/	1.3	126	164	8.9	6.9	52	Yes	113
3/	1.2	126	151	9.1	6.8	51	Yes	150
4/	1.2	126	151	9.1	6.8	51	Yes	124
5/	1.1	126	138.6	9.3	6.5	42	Yes	102
6/	1.1 1.1	126	139	9.4	6.8	51	Yes	95
7/	1.1	126	139	9.3	6.6	51	Yes	99
8/	1.0	126	126	9.2	6.5	42	Yes	95
9/	1.1	126	139	9.1	6.5	42	Yes	160
10/	1.0	126	126	9.0	6.3	42	Yes	119
11/	1.00	126	126	9.1	6.9	50	Yes	105
12/	0.92	126	116	8.9	7.1	60	Yes	117
13/	1.03	126	130	9.0	7.0	50	Yes	107
14/	1.02	126	129	8.9	7.0	50	Yes	197
15/	1.01	126	127	8.9	6.4	42	Yes	140
16/	1.06	126	134	8.9	6.9	50	Yes	100
17/	1.05	126	132	8.7	6.9	50	Yes	142
18/	1.04	126	131	8.6	6.9	50	Yes	160
19/	1.06	126	134	8.7	6.9	50	Yes	103
20/	0.92	126	116	8.7	6.9	37	Yes	108
21/	1.06	126	134	8.8	7.0	50	Yes	111
22/	0.93	126	117	8.7	6.9	50	Yes	133
23/	0.95	126	120	8.6	6.9	50	Yes	101
24/	0.90	126	113	8.5	6.8	50	Yes	106
25/	0.88	126	111	8.4	7.0	49	Yes	108
26/	0.98	126	123	8.5	7.0	50	Yes	175
27/	0.94	126	118	8.5	7.1	60	Yes	115
28/	1.08	126	136	8.5	7.2	61	Yes	141
29/	1.08	126	136	8.5	7.2	61	Yes	110
30/	1.04	126	131	8.5	7.2	60	Yes	117
31/	1.02	126	129	8.5	7.1	61	Yes	143

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours. Revised November 2022
 Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf

Return by 10th of following month by email, fax or mail to:
dwp.dmce@oha.oregon.gov; Fax 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350