

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Columbia

Conventional or Direct Filtration

Month/Year: Sep-24

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	0.08	0.08	0.08	0.07	0.08	0.08	0.08	
2	0.07	0.07	0.08	0.08	0.08	0.08	0.08	
3	0.06	0.07	0.07	0.07	0.07	0.07	0.07	
4	0.08	0.08	0.08	0.08	0.08	0.08	0.08	
5	0.08	0.08	0.07	0.07	0.07	0.07	0.08	
6	0.07	0.06	0.06	0.06	0.06	0.06	0.07	
7	0.07	0.07	0.07	0.07	0.07	0.07	0.07	
8	0.07	0.08	0.08	0.08	0.08	0.08	0.08	
9	0.07	0.07	0.07	0.07	0.07	0.07	0.07	
10	0.08	0.08	0.08	0.10	0.10	0.12	0.12	
11	0.14	0.16	0.04	0.04	0.04	0.04	0.04	
12	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
13	0.04	0.04	0.04	0.04	0.04	0.04	0.04	
14	0.04	0.04	0.04	0.04	0.04	0.04	0.05	
15	0.04	0.05	0.05	0.05	0.05	0.05	0.05	
16	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
17	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
18	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
19	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
20	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
21	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
22	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
23	0.05	0.05	0.05	0.05	0.05	0.05	0.05	
24	0.05	0.05	0.06	0.06	0.05	0.05	0.06	
25	0.05	0.05	0.06	0.06	0.06	0.06	0.06	
26	0.06	0.06	0.06	0.06	0.06	0.06	0.06	
27	0.06	0.06	0.06	0.06	0.06	0.06	0.06	
28	0.06	0.06	0.06	0.06	0.06	0.06	0.06	
29	0.06	0.06	0.06	0.06	0.06	0.06	0.06	
30	0.06	0.06	0.06	0.06	0.06	0.06	0.06	

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) Yes	All Cl2 residual at entry point ≥ 0.2 mg/l?	
All 4-hour turbidity readings ≤ 1 NTU?	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: 10/7/24
			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: 09/24

System Name: <u>Becraft Creek Water Corp</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/	1.0	126	126	19.0	7.1	30	Yes	130
2/	1.0	126	126	19.4	7.1	30	Yes	166
3/	1.2	126	151	19.4	7.1	31	Yes	157
4/	1.0	126	126	19.3	7.0	30	Yes	159
5/	1.7	126	214	19.4	7.1	33	Yes	137
6/	1.5	126	189	19.7	7.1	32	Yes	150
7/	2.1	126	265	20.0	6.9	25	Yes	152
8/	2.0	126	252	20.5	6.9	21	Yes	181
9/	1.8	126	227	20.5	7.3	25	Yes	157
10/	1.3	126	164	20.2	7.1	23	Yes	121
11/	1.5	126	189	19.8	7.3	32	Yes	123
12/	1.4	126	177	19.3	6.9	26	Yes	128
13/	1.1	126	139	18.7	6.9	25	Yes	124
14/	1.2	126	151	18.4	7.0	25	Yes	137
15/	1.1	126	139	18.4	7.3	31	Yes	147
16/	1.0	126	126	18.2	7.2	30	Yes	167
17/	0.8	126	108	17.9	7.1	29	Yes	185
18/	1.0	126	126	17.8	6.9	25	Yes	145
19/	1.2	126	151	17.7	7.4	31	Yes	148
20/	1.3	126	163	17.9	7.2	31	Yes	151
21/	1.1	126	138	17.9	7.2	45	Yes	160
22/	1.0	126	126	17.5	6.8	25	Yes	205
23/	1.1	126	139	17.4	7.1	30	Yes	156
24/	1.0	126	126	17.7	7.4	30	Yes	151
25/	0.9	126	113	18.1	7.3	30	Yes	158
26/	0.9	126	113	18.5	7.2	30	Yes	150
27/	0.9	126	113	18.1	7.4	30	Yes	176
28/	0.9	126	113	18.1	7.1	30	Yes	165
29/	1.1	126	139	17.7	7.3	30	Yes	158
30/	0.76	126	96	16.0	7.0	24	Yes	180
31/		126						

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