

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

County: **Columbia**
 Month/Year: **Oct-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	0.02	0.02	0.02	0.02	0.05
12	0.04	0.07	0.06	0.07	0.09	0.09	0.13
13	0.04	0.04	0.03	0.04	0.02	0.02	0.07
14	0.02	0.02	0.02	0.02	0.02	0.02	0.04
15	0.02	0.02	0.05	0.02	0.02	0.02	0.06
16	0.02	0.02	0.03	0.02	0.02	0.02	0.06
17	0.02	0.02	0.02	0.02	0.02	0.02	0.06
18	0.02	0.02	0.02	0.02	0.02	0.02	0.06
19	0.02	0.02	0.02	0.02	0.02	0.02	0.06
20	0.02	0.02	0.02	0.02	0.02	0.02	0.05
21	0.02	0.02	0.02	0.02	0.02	0.02	0.23
22	0.23	0.15	0.08	0.12	0.06	0.06	0.24
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	0.05
25	0.02	0.02	0.02	0.02	0.03	0.03	0.05
26	0.02	0.02	0.02	0.03	0.03	0.03	0.04
27	0.03	0.03	0.04	0.02	0.02	0.02	0.07
28	0.02	0.02	0.02	0.02	0.02	0.02	0.04
29	0.02	0.02	0.02	0.02	0.02	0.02	0.04
30	0.02	0.02	0.02	0.02	0.02	0.02	0.04
31	0.02	0.02	0.02	0.02	0.02	0.02	0.05

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: 11/4/24
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: 10/24

System Name: Becondt Creek Water Co

ID# 41 05737

WTP Average

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/	0.87	126	110	15.7	7.0	25	yes	190
2/	0.82	126	103	15.4	7.3	30	yes	170
3/	0.72	126	91	14.9	7.0	37	yes	167
4/	0.75	126	95	14.6	6.9	37	yes	160
5/	0.97	126	122	14.3	7.2	45	yes	171
6/	1.00	126	126	13.7	7.2	45	yes	244
7/	1.01	126	127	13.7	7.4	46	yes	180
8/	1.14	126	144	15.2	7.1	31	yes	170
9/	1.23	126	155	15.4	7.1	31	yes	172
10/	1.38	126	174	15.2	7.1	31	yes	236
11/	1.36	126	171	14.3	6.8	39	yes	309
12/	1.3	126	164	13.1	6.9	39	yes	173
13/	1.15	126	145	13.1	6.8	39	yes	190
14/	1.15	126	145	12.9	6.8	39	yes	304
15/	1.12	126	141	12.9	7.1	46	yes	191
16/	1.15	126	145	13.4	7.1	46	yes	178
17/	1.15	126	141	13.1	7.1	46	yes	206
18/	1.15	126	141	13.3	7.1	46	yes	160
19/	1.15	126	147	13.0	7.1	46	yes	188
20/	1.06	126	132	12.9	7.1	46	yes	212
21/	1.08	126	139	12.9	7.0	37	yes	203
22/	1.08	126	139	12.7	7.0	37	yes	201
23/	1.09	126	140	12.6	7.0	37	yes	220
24/	1.10	126	141	12.6	7.0	37	yes	156
25/	1.11	126	141	12.6	7.0	37	yes	174
26/	1.11	126	142	12.7	7.0	37	yes	288
27/	1.11	126	141	12.3	7.1	46	yes	204
28/	1.15	126	145	11.9	7.1	46	yes	223
29/	1.2	126	151	11.8	7.1	46	yes	184
30/	1.0	126	126	11.6	7.0	37	yes	183
31/	1.0	126	126	11.6	7.0	37	yes	172

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