

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Columbia**
 Month/Year: **Jan-26**

Conventional or Direct Filtration

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	0.03	0.03	0.03	0.03	0.03	0.03	0.04
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	0.03
4	0.03	0.03	0.03	0.26	0.18	0.16	0.05
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	0.03	0.03	0.30
11	0.03	0.03	0.04	0.03	0.03	0.03	0.29
12	0.03	0.03	0.04	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	0.03	0.03	0.04	0.04	0.04
17	0.03	0.03	0.04	0.03	0.03	0.03	0.04
18	0.03	0.03	0.04	0.03	0.03	0.03	0.04
19	0.03	0.03	0.03	0.03	0.03	0.03	0.04
20	0.03	0.03	0.03	0.03	0.03	0.03	0.04
21	0.03	0.03	0.03	0.03	0.03	0.03	0.03
22	0.03	0.03	0.03	0.03	0.03	0.03	0.04
23	0.03	0.03	0.03	0.03	0.03	0.03	0.03
24	0.03	0.03	0.03	0.03	0.03	0.03	0.03
25	0.03	0.03	0.03	0.03	0.03	0.03	0.03
26	0.03	0.03	0.03	0.03	0.03	0.03	0.04
27	0.03	0.03	0.03	0.03	0.03	0.03	0.04
28	0.03	0.03	0.03	0.03	0.04	0.04	0.04
29	0.03	0.03	0.03	0.03	0.03	0.03	0.03
30	0.03	0.03	0.03	0.03	0.03	0.03	0.05
31	0.03	0.03	0.03	0.03	0.03	0.03	0.03

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: 2/7/26
		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:

ID#: 41

Month/Year: *Jan/2026*

Disinfection Giardia Log Inactiv:

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	7.6	7.0	50	yes	120
2	.9	113	113	7.4	6.9	50	yes	158
3	.9	113	113	7.6	6.9	50	yes	142
4	1.0	126	126	7.7	6.9	50	yes	158
5	1.0	126	126	7.7	6.9	50	yes	133
6	1.0	126	126	7.6	7.0	50	yes	141
7	1.0	126	126	7.4	6.8	50	yes	121
8	0.9	113	113	7.3	6.9	50	yes	154
9	0.9	113	113	7.2	6.9	50	yes	111
10	1.0	126	126	7.2	6.9	50	yes	154
11	0.9	113	113	7.2	6.8	50	yes	171
12	1.0	126	126	7.3	7.0	50	yes	124
13	1.0	126	126	7.4	7.1	60	yes	115
14	1.0	126	126	7.4	6.8	50	yes	140
15	0.9	113	113	7.5	7.0	50	yes	139
16	0.9	113	113	7.4	7.0	50	yes	134
17	0.9	113	113	7.2	7.0	50	yes	135
18	0.95	120	120	7.0	7.0	50	yes	152
19	0.95	120	120	6.8	7.0	50	yes	120
20	0.94	118	118	6.6	7.1	60	yes	139
21	0.97	122	122	6.5	7.0	50	yes	145
22	0.95	120	120	6.5	6.9	50	yes	149
23	0.8	101	101	6.5	7.0	50	yes	147
24	0.8	101	101	6.4	7.0	50	yes	141
25	0.9	113	113	6.4	6.9	50	yes	173
26	0.99	125	125	4.8	7.0	70	yes	127
27	1.00	126	126	4.3	7.3	84	yes	129
28	1.02	129	129	4.3	7.2	86	yes	118
29	1.02	129	129	4.8	7.3	86	yes	145
30	1.04	131	131	5.4	7.4	61	yes	129
31	1.04	131	131	6.0	7.3	61	yes	128

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised October 2013

971-673-0694
 Drinking Water Service
 dws.dmce@state.or.us
 P.O. 14350 Portland
 97293-0350