

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: May-23

System Name: Lake Selmac - Osprey ID#: 41 WTP ID: 90186 TP-

Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day ¹ [NTU]
1	45	40	5	60	0.181	0.181
2	45	40	5	60	0.089	0.089
3	45	40	5	60	0.126	0.126
4	45	40	5	60	0.062	0.062
5	45	40	5	60	0.016	0.016
6	50	40	10	60	0.339	0.339
7	50	40	10	60	0.301	0.301
8	50	40	10	60	0.293	0.293
9	50	40	10	60	0.212	0.212
10	50	40	10	60	0.197	0.197
11	50	40	10	60	0.236	0.236
12	50	40	10	60	0.182	0.182
13	55	40	15	60	0.261	0.261
14	55	40	15	60	0.131	0.131
15	55	40	15	60	0.191	0.191
16	55	40	15	60	0.092	0.092
17	55	40	15	60	0.443	0.443
18	55	40	15	60	0.091	0.091
19	55	40	15	60	0.121	0.121
20	55	40	15	60	0.650	0.650
21	55	40	15	60	0.092	0.092
22	55	40	15	60	0.113	0.113
23	55	40	15	60	0.189	0.189
24	60	40	20	60	0.082	0.082
25	40	40	0	60	0.039	0.039
26	40	40	0	60	0.059	0.059
27	40	40	0	60	0.129	0.129
28	40	40	0	60	0.096	0.096
29	40	40	0	60	0.123	0.123
30	40	40	0	60	0.062	0.062
31	40	40	0	60	0.191	0.191

Cartridge & Bag Filtration			
95% of daily turbidity readings ≤ 1 NTU?	Yes	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	Yes	YES	YES

Notes: PSI = pounds per square inch
PSID = pounds per square inch difference (before filter - after filter)
PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.

PRINTED NAME:	
SIGNATURE:	DATE:
PHONE #: ()	CERT #: 2379

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not correspond to continuous readings' maximum.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP-: 90186

System Name:	Lake Selmac - Osprey	ID#: 41	Month/Year:	May-23	Disinfection <i>Giardia</i> Log Inactiv:	1
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Date / Time	Minimum Cl ₂ Residual at 1st 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]		formula	Yes / No	[GPM]
1	1.7	40	68.0	13.9	7.1	33.0	YES	0.310764
2	1.7	40	68.0	14.4	7.1	31.8	YES	0.298611
3	1.8	40	72.0	14.4	7.1	32.1	YES	0.298611
4	1.7	40	68.0	13.9	7.1	33.0	YES	0.565972
5	1.4	40	56.0	13.3	7.1	33.1	YES	0.565972
6	1.8	40	72.0	13.3	7.1	34.6	YES	0.648148
7	1.8	40	72.0	12.8	7.1	35.9	YES	0.648148
8	1.8	40	72.0	11.7	7.1	39.2	YES	0.648148
9	1.4	40	56.0	12.2	7.1	36.2	YES	1.121528
10	1.5	40	60.0	12.8	7.1	34.7	YES	1.121528
11	1.5	40	60.0	12.8	7.1	34.7	YES	0.710069
12	1.4	40	56.0	13.3	7.1	33.1	YES	0.710069
13	1.4	40	56.0	13.9	7.1	31.9	YES	0.710069
14	1.4	40	56.0	15.6	7.1	28.5	YES	0.710069
15	1.4	40	56.0	16.7	7.0	25.5	YES	0.550926
16	1.3	40	52.0	16.7	7.1	26.2	YES	0.550926
17	1.3	40	52.0	16.1	7.1	27.2	YES	0.550926
18	1.4	40	56.0	18.3	7.2	24.6	YES	0.664352
19	1.5	40	60.0	18.3	7.2	24.8	YES	0.664352
20	1.5	40	60.0	18.3	7.2	24.8	YES	0.664352
21	1.7	40	67.6	18.3	7.1	24.5	YES	1.659722
22	1.6	40	64.0	18.3	7.1	24.2	YES	1.659722
23	1.5	40	60.0	18.3	7.1	23.9	YES	1.097222
24	1.5	40	60.0	18.3	7.1	23.9	YES	1.097222
25	1.4	40	56.0	18.3	7.0	22.8	YES	1.097222
26	1.3	40	52.0	18.3	7.0	22.5	YES	1.097222
27	1.5	40	60.0	17.8	7.0	23.9	YES	1.997685
28	1.5	40	60.0	18.9	7.0	22.2	YES	1.997685
29	1.5	40	60.0	18.9	7.0	22.2	YES	1.997685
30	1.5	40	60.0	18.9	7.0	22.2	YES	1.670139
31	1.6	40	64.0	18.9	7.0	22.5	YES	1.670139

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350