

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Dec-24



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	40	40	0	20	0.108	0.108
2	40	40	0	20	0.174	0.174
3	40	40	0	20	0.212	0.212
4	40	40	0	20	0.109	0.109
5	40	40	0	20	0.131	0.131
6	40	40	0	20	0.106	0.106
7	40	40	0	20	0.181	0.181
8	40	40	0	20	0.100	0.100
9	40	40	0	20	0.176	0.176
10	40	40	0	20	0.228	0.228
11	40	40	0	20	0.162	0.162
12	40	40	0	20	0.172	0.172
13	40	40	0	20	0.212	0.212
14	40	40	0	20	0.241	0.241
15	40	40	0	20	0.392	0.392
16	45	40	5	20	0.167	0.167
17	45	40	5	20	0.161	0.161
18	45	40	5	20	0.199	0.199
19	45	40	5	20	0.200	0.200
20	45	40	5	20	0.213	0.213
21	45	40	5	20	0.212	0.212
22	45	40	5	20	0.038	0.038
23	45	40	5	20	0.027	0.027
24	45	40	5	20	0.013	0.013
25	45	40	5	20	0.175	0.175
26	45	40	5	20	0.105	0.105
27	45	40	5	20	0.231	0.231
28	45	40	5	20	0.181	0.181
29	50	40	10	20	0.132	0.132
30	50	40	10	20	0.150	0.150
31	.	.	.	.	.	.

Cartridge & Bag Filtration			
95% of daily turbidity readings $\leq$ 1 NTU?	Yes	CT's met everyday? (see back)	All Cl2 residual at entry point $\geq$ 0.2 mg/l?
All daily turbidity readings $\leq$ 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:	Apr-25	Disinfection <i>Giardia</i> Log Inactiv:	1
--------------	----------------------	---------	-------------	--------	---	---

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	2.9	40	116.0	9.0	7.1	53.0	YES	0.706597
2	2.9	40	116.0	9.0	7.1	53.0	YES	0.706597
3	2.9	40	116.0	9.0	7.2	54.9	YES	0.706597
4	2.9	40	116.0	8.8	7.2	55.6	YES	0.706597
5	2.8	40	112.0	9.0	7.5	60.5	YES	0.236111
6	2.8	40	112.0	9.0	7.5	60.5	YES	0.25
7	2.6	40	104.0	10.0	7.4	53.3	YES	0.284722
8	2.5	40	100.0	10.0	7.2	49.0	YES	0.097222
9	2.4	40	96.0	10.0	7.2	48.5	YES	0.201389
10	2.4	40	96.0	11.0	7.2	45.4	YES	0.243056
11	2.3	40	92.0	10.0	7.2	47.9	YES	0.375
12	2.4	40	96.0	10.0	7.2	48.5	YES	0.493056
13	2.5	40	100.0	11.0	7.1	44.3	YES	0.409722
14	2.7	40	108.0	11.0	7.2	46.9	YES	0.743056
15	3.1	40	124.0	12.0	7.3	47.6	YES	0.430556
16	3.1	40	124.0	13.0	7.2	42.5	YES	0.326389
17	2.9	40	116.0	12.0	7.1	43.4	YES	0.381944
18	2.9	40	116.0	13.0	7.2	41.6	YES	0.458333
19	2.9	40	116.0	12.0	7.3	46.5	YES	0.722222
20	2.9	40	116.0	12.0	7.2	44.9	YES	0.597222
21	2.9	40	116.0	12.0	7.2	44.9	YES	1.354167
22	2.8	40	112.0	13.0	7.1	39.6	YES	0.798611
23	2.7	40	108.0	12.0	7.2	43.9	YES	0.423611
24	2.7	40	108.0	12.0	7.2	43.9	YES	0.784722
25	2.6	40	104.0	11.0	7.3	48.1	YES	1.118056
26	2.6	40	104.0	11.0	7.2	46.4	YES	0.798611
27	2.6	40	104.0	11.0	7.2	46.4	YES	0.368056
28	2.4	40	96.0	11.0	7.2	45.4	YES	0.611111
29	2.4	40	96.0	11.0	7.2	45.4	YES	0.611111
30	2.4	40	96.0	11.0	7.3	47.0	YES	0.09375
31	.	.	.	.	.	.	.	.

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

Revised November 2022

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