

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Feb-26

System Name: Lake Selmac 1 ID#: 41 90186 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 <sup>1</sup> [NTU]
1	40	40	0	20	0.853	0.853
2	40	40	0	20	0.723	0.723
3	40	40	0	20	0.788	0.788
4	40	40	0	20	0.788	0.788
5	40	40	0	20	0.546	0.546
6	40	40	0	20	0.523	0.523
7	40	40	0	20	0.402	0.402
8	40	40	0	20	0.301	0.301
9	40	40	0	20	0.268	0.268
10	40	40	0	20	0.339	0.339
11		40		20		
12		40		20		
13		40		20		
14		40		20		
15		40		20		
16		40		20		
17		40		20		
18		40		20		
19		40		20		
20		40		20		
21		40		20		
22		40		20		
23		40		20		
24		40		20		
25		40		20		
26		40		20		
27		40		20		
28		40		20		
29		40		20		
30		40		20		
31		40		20		

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

<b>Notes: PSI = pounds per square inch</b> <b>PSID = pounds per square inch difference (before filter - after filter)</b> <b>PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.</b>	<b>PRINTED NAME:</b>	
	<b>SIGNATURE:</b>	<b>DATE:</b>
	<b>PHONE #: (     )</b>	<b>CERT #: 2379</b>

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

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WTP-: 90186

<b>System Name:</b>	<b>Lake Selmac 1</b>	<b>ID#: 41</b>	<b>90186</b>	<b>Month/Year:</b>	<b>Feb-26</b>	<b>Disinfection <i>Giardia</i> Log Inactiv:</b>	<b>1</b>
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Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>2</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	<b>C X T</b>	[° C]		formula	Yes / No	[GPM]
1	1.4	40	56.0	7.0	7.3	54.8	YES	0.404167
2	1.3	40	52.0	7.0	7.1	50.4	YES	0.40417
3	1.3	40	52.0	8.0	7.1	47.1	YES	0.40417
4	1.3	40	52.0	8.0	7.1	47.1	YES	0.40417
5	1.4	40	56.0	8.0	7.2	49.4	YES	0.40417
6	1.4	40	56.0	8.0	7.2	49.4	YES	0.40417
7	1.3	40	52.0	8.0	7.2	48.9	YES	0.40417
8	1.3	40	52.0	8.0	7.1	47.1	YES	0.40417
9	1.3	40	52.0	8.0	7.2	48.9	YES	0.40417
10	1.9	40	76.0	8.0	7.1	50.5	YES	0.40417
11		40						
12		40						
13		40						
14		40						
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28		40						
29		40						
30		40						
31		40						

<sup>2</sup> If Cl<sub>2</sub> 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