

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Mar-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		20		
2		40		20		
3		40		20		
4		40		20		
5		40		20		
6		40		20		
7		40		20		
8	40	40	0	20	0.074	0.074
9	40	40	0	20	0.069	0.069
10		40		20		
11		40		20		
12		40		20		
13		40		20		
14		40		20		
15		40		20		
16	40	40	0	20	0.058	0.058
17	40	40	0	20	0.058	0.058
18	40	40	0	20	0.088	0.088
19	40	40	0	20	0.078	0.078
20		40		20		
21		40		20		
22		40		20		
23		40		20		
24	40	40	0	20	0.057	0.057
25	40	40	0	20	0.038	0.038
26	40	40	0	20	0.052	0.052
27	40	40	0	20	0.061	0.061
28	40	40	0	20	0.050	0.050
29	40	40	0	20	0.055	0.055
30	40	40	0	20	0.054	0.054
31	40	40	0	20	0.054	0.054

**Cartridge & Bag Filtration**

95% of daily turbidity readings ≤ 1 NTU? **Yes**  
 All daily turbidity readings ≤ 5 NTU? **Yes**

CT's met everyday? (see back) **YES**  
 All Cl2 residual at entry point ≥ 0.2 mg/l? **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**

<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.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP-: 90186

<b>System Name:</b>	<b>Lake Selmac 1</b>	<b>ID#: 41</b>	<b>90186</b>	<b>Month/Year:</b>	<b>Mar-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]	C X T	[° C]		formula	Yes / No	[GPM]
1		40						-1122.469
2		40						
3		40						
4		40						
5		40						
6		40						
7		40						
8	1.3	40	52.0	9.0	7.2	45.7	YES	0.194444
9	1.3	40	52.0	9.0	7.1	44.1	YES	0.19444
10		40						
11		40						
12		40						
13		40						
14		40						
15		40						
16	1.3	40	52.0	12.0	7.2	37.6	YES	0.354167
17	1.4	40	56.0	12.0	7.1	36.7	YES	0.35417
18	1.3	40	52.0	12.0	7.2	37.6	YES	0.35417
19	1.4	40	56.0	13.0	7.1	33.8	YES	0.35417
20		40						
21		40						
22		40						
23		40						
24	1.3	40	52.0	14.0	7.2	32.5	YES	0.90873
25	1.3	40	52.0	14.0	7.1	31.3	YES	0.90873
26	1.3	40	52.0	15.0	7.2	30.4	YES	0.90873
27	1.4	40	56.0	13.0	7.3	36.4	YES	0.90873
28	1.4	40	56.0	13.0	7.3	36.4	YES	0.90873
29	1.4	40	56.0	13.0	7.3	36.4	YES	0.90873
30	1.4	40	56.0	13.0	7.2	35.1	YES	0.90873
31	1.4	40	56.0	14.0	7.3	34.1	YES	0.90873

<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