

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: JACKSON

Conventional or Direct Filtration


Month/Year: Oct 2023

System Name:	Emigrant Lake WTP			ID#: 4190730	WTP: TP - A		
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/	off	off	.068	off	off	off	.299
2/	off	.074	off	off	off	.070	.299
3/	off	off	off	off	off	off	.299
4/	.073	off	off	off	off	off	.299
5/	.069	off	off	off	off	off	.299
6/	.069	off	off	off	off	.073	.299
7/	off	off	off	off	off	off	.299
8/	off	off	off	off	.065	off	.299
9/	off	off	off	.068	off	off	.299
10/	off	off	off	off	off	off	.299
11/	off	off	off	off	off	off	.299
12/	.077	off	off	off	off	off	.299
13/	off	off	off	off	off	off	.299
14/	off	off	.072	off	off	off	.299
15/	.068	off	off	off	off	.074	.299
16/	off	off	off	off	off	off	.299
17/	off	.081	off	off	off	off	.299
18/	.096	off	off	off	off	off	.299
19/	off	off	off	.056	off	off	.299
20/	off	off	off	off	off	off	.299
21/	off	off	off	off	.048	off	.299
22/	off	off	off	.054	off	off	.299
23/	off	off	off	.055	off	off	.299
24/	off	off	off	.058	off	off	.299
25/	off	off	off	off	off	off	.299
26/	off	off	off	off	off	off	.299
27/	off	off	off	off	off	off	.299
28/	off	off	off	off	off	off	.299
29/	off	off	off	off	.060	off	.299
30/	off	off	off	off	off	off	.299
31/	.061	off	off	off	off	off	.299

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All 4-hour turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No		

Notes: All NTU > .300 to waste

PRINTED NAME: Dustin Stafford

SIGNATURE: 

PHONE #: (541) 774-8183

DATE: 11/9/23

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)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :

WTP-A

System Name: Emigrant Lake WTP

Month/Year: Oct 2023

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/	1.2	192	230.4	17.6	7.2	31	Y	6.8
2/	1.1	192	21.2	17.7	7.2	31	Y	10.3
3/	1.0	192	192	17.4	7.1	30	Y	1.6
4/	1.0	192	192	17.7	7.1	30	Y	1.5
5/	1.0	192	192	17.6	7.1	30	Y	2.1
6/	1.0	192	192	17.7	7.1	30	Y	3.3
7/	0.9	192	172.8	17.7	7.1	30	Y	2.1
8/	0.9	192	172.8	17.7	7.1	30	Y	2.5
9/	0.8	192	153.6	17.6	7.1	29	Y	2.5
10/	0.8	192	153.6	17.5	7.1	29	Y	1.8
11/	0.7	192	134.4	17.1	7.1	29	Y	1.6
12/	0.6	192	115.2	17.1	7.1	29	Y	1.6
13/	0.6	192	115.2	17.3	7.1	29	Y	2.1
14/	0.6	192	115.2	17.2	7.1	29	Y	2.1
15/	0.6	192	115.2	17.0	7.1	29	Y	2
16/	0.6	192	115.2	17.2	7.1	29	Y	2
17/	0.5	192	96	17.0	7.1	29	Y	1.1
18/	0.5	192	96	17.2	7.1	29	Y	1.3
19/	0.4	192	76.8	17.9	7.1	28	Y	1.8
20/	0.6	192	115.2	17.1	7.1	29	Y	3.2
21/	0.6	192	115.2	17.0	7.1	29	Y	1.3
22/	0.6	192	115.2	17.0	7.1	29	Y	4.6
23/	0.5	192	96	16.9	7.1	29	Y	1.5
24/	0.5	192	96	16.2	7.1	29	Y	1
25/	0.4	192	76.8	15.9	7.1	29	Y	2.1
26/	1.0	192	192	15.4	7.1	30	Y	1.6
27/	1.0	192	192	15.0	7.1	30	Y	1.5
28/	0.9	192	172.8	15.1	7.1	30	Y	1.8
29/	0.9	192	172.8	15.2	7.1	30	Y	1.3
30/	0.8	192	153.6	14.3	7.1	44	Y	2.3
31/	0.8	192	153.6	14.5	7.1	44	Y	2.5

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

Revised September 2016

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

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