

OHA - Drinking Water Services - Turbidity Monitoring Report
Conventional or Direct Filtration

County: JACKSON

Name: JACKSON CO PKS EMIGRANT LAKE

ID #41: 90730

WTP: WTP-A

Month/Year: April 2024

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	.064	off	off	off	.157
2	off	off	.070	off	off	.065	.249
3	off	off	off	.060	off	off	.232
4	off	off	.064	off	off	.063	.192
5	off	off	off	off	off	off	.195
6	off	off	off	.063	off	off	.239
7	off	off	off	off	off	off	.191
8	off	off	.060	off	off	off	.198
9	off	off	off	off	off	off	.184
10	off	off	off	off	off	off	.184
11	off	.057	.065	off	off	.054	.150
12	off	off	off	off	off	off	.072
13	off	off	.056	off	off	off	.147
14	.061	off	off	off	off	off	.195
15	off	off	off	.054	off	off	.173
16	off	off	off	off	off	off	.147
17	.052	off	off	off	off	.056	.118
18	off	off	off	.054	off	off	.121
19	off	.054	off	off	off	off	.131
20	off	off	.225	off	off	off	.225
21	off	off	off	.054	off	off	.104
22	off	off	off	off	off	off	.147
23	off	off	.053	off	off	off	.149
24	off	off	.057	off	off	.056	.185
25	off	off	.063	off	off	off	.146
26	off	off	off	off	off	off	.182
27	off	off	off	off	off	off	.178
28	off	off	.082	off	off	off	.186
29	off	off	.056	off	off	off	.238
30	off	off	off	off	off	.164	.164

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of the 4-hour turbidity readings ≤ 0.3 NTU? Yes / No	CT's met everyday? (see back) Yes / No	All Cl ₂ residuals at entry point ≥ 0.2 mg/l? Yes / No
All the 4-hour turbidity readings ≤ 1 NTU? Yes / No		
All turbidity readings < IFE ² triggers? Yes / No ²		
Notes:	PRINTED NAME:	
	SIGNATURE:	DATE:
	PHONE #: ()	CERT #:

¹ Including continuous turbidity 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 Eff. (OAR 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: Apr. 12024

Disinfection Giardia Log Inactiv:

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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/	1.0	192	192	11.5	7.0	37	Y	15.6
2/	1.0	192	192	12.2	7.0	37	Y	2.3
3/	1.0	192	192	12.0	7.0	37	Y	1.3
4/	1.0	192	192	11.7	7.0	37	Y	4.3
5/	1.0	192	192	11.3	7.0	37	Y	1.6
6/	0.9	192	172.8	11.5	7.0	37	Y	3.8
7/	0.9	192	172.8	11.6	7.0	37	Y	2.1
8/	0.9	192	172.8	11.7	7.0	37	Y	1.6
9/	0.9	192	172.8	11.9	7.0	37	Y	3
10/	0.9	192	172.8	12.2	7.0	37	Y	5.5
11/	0.9	192	172.8	11.9	7.0	37	Y	2.3
12/	1.0	192	192	12.5	7.0	37	Y	1.8
13/	1.0	192	192	12.6	7.0	37	Y	2.3
14/	1.0	192	192	12.8	7.0	37	Y	3.2
15/	1.0	192	192	12.5	7.0	37	Y	2.3
16/	1.0	192	192	12.5	7.0	37	Y	2.6
17/	0.9	192	172.8	12.6	7.0	37	Y	2.8
18/	0.9	192	172.8	12.7	7.0	37	Y	2.6
19/	0.7	192	172.8	12.9	7.0	37	Y	2.8
20/	1.0	192	153.6	13.5	7.0	37	Y	4.6
21/	0.8	192	153.6	13.4	7.0	37	Y	4.0
22/	0.8	192	153.6	13.6	7.0	37	Y	2.6
23/	0.8	192	153.6	14.0	7.0	37	Y	3.3
24/	0.7	192	134.4	14.2	7.0	37	Y	2.1
25/	0.7	192	134.4	13.9	7.0	37	Y	3.1
26/	0.6	192	115.2	14.0	7.0	36	Y	1.8
27/	0.7	192	134.4	14.2	7.0	37	Y	3.3
28/	0.6	192	115.2	14.2	7.0	36	Y	4.1
29/	0.6	192	115.2	14.2	7.0	36	Y	2.8
30/	0.7	192	134.4	14.0	7.0	37	Y	2.8
31/		192	-	-	-	-	-	-

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