


OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: April 2024

System Name: Galice Resort ID#: 41 90808 WTP ID: 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	59.00	57.00	2.00	15.00	0.20	0.20
2	58.00	56.00	2.00	15.00	0.28	0.28
3	59.00	57.00	2.00	15.00	0.21	0.21
4	58.00	56.00	2.00	15.00	0.29	0.29
5	58.00	56.00	2.00	15.00	0.25	0.25
6	58.00	56.00	2.00	15.00	0.23	0.23
7	58.00	56.00	2.00	15.00	0.23	0.23
8	58.00	56.00	2.00	15.00	0.21	0.21
9	59.00	57.00	2.00	15.00	0.22	0.22
10	58.00	56.00	2.00	15.00	0.21	0.21
11						
12						
13						
14						
15						
16						
17						
18						
19	60.00	59.00	1.00	25.00	0.25	0.25
20	45.00	44.00	1.00	25.00	0.10	0.10
21	61.00	60.00	1.00	25.00	0.21	0.21
22	61.00	60.00	1.00	25.00	0.22	0.22
23	61.00	60.00	1.00	25.00	0.20	0.20
24	60.00	59.00	1.00	25.00	0.17	0.17
25	60.00	57.00	3.00	25.00	0.17	0.17
26	45.00	44.00	1.00	25.00	0.08	0.08
27	60.00	59.00	1.00	25.00	0.09	0.09
28	45.00	44.00	1.00	25.00	0.10	0.10
29	61.00	60.00	1.00	25.00	0.15	0.15
30	61.00	60.00	1.00	25.00	0.13	0.13
31						

Cartridge & Bag Filtration	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	Yes	CT's met everyday? (see back)
All daily turbidity readings ≤ 5 NTU?	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: Alisha Combs
 SIGNATURE: Alisha Combs DATE: 5/01/2024
 PHONE #: (541 476-3818 CERT #:

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- :

System Name:	Galice Resort	ID#: 41	90808	Month/Year:	April 2024	Disinfection <i>Giardia</i> Log Inactiv:	1
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Date / Time	Minimum Cl2 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	0.8	62	49.6	9.4	7.10	40.6	YES	25
2	1	62	62.0	10.0	7.20	41.4	YES	25
3	1.2	62	74.4	10.9	7.30	41.3	YES	25
4	1	62	62.0	9.4	7.20	43.0	YES	25
5	1	62	62.0	8.8	7.30	46.4	YES	25
6	1	62	62.0	8.9	7.30	46.1	YES	25
7	1	62	62.0	9.1	7.30	45.5	YES	25
8	1	62	62.0	9.3	6.90	39.0	YES	25
9	1	62	62.0	9.8	7.30	43.4	YES	25
10	1.2	62	74.4	10.3	7.30	43.0	YES	25
11		62						0
12								0
13								0
14								0
15								0
16								0
17								0
18								0
19	1.2	69	82.8	11.6	7.50	42.3	YES	25
20	1.2	69	82.8	13.2	7.60	39.2	YES	25
21	1	69	69.0	12.0	7.70	43.2	YES	25
22	1.2	69	82.8	11.0	7.70	47.2	YES	25
23	1.2	69	82.8	12.0	7.60	42.7	YES	25
24	1.2	69	82.8	13.0	7.80	42.8	YES	25
25	1	69	69.0	12.1	8.10	49.4	YES	25
26	1	69	69.0	12.1	8.10	49.4	YES	25
27	1	69	69.0	12.5	8.00	46.5	YES	25
28	1.2	69	82.8	12.2	8.10	50.3	YES	25
29	1	69	69.0	11.8	8.10	50.4	YES	25
30	1.2	69	82.8	10.6	8.10	56.0	YES	25
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