

OHA - Drinking Water Services - Surface Water Quality Data Form						County:	COOS		
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems						Month/Year:	2/24		
System Name:	Camp Myrtlewood			ID#: 41	90861	WTP : TP -	SSF/Chlorination		
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			0.40				0.40		
2			0.40				0.40		
3			0.40				0.40		
4			0.30				0.30		
5			0.30				0.30		
6			0.20				0.20		
7			0.20				0.20		
8			0.20				0.20		
9			0.20				0.20		
10			0.20				0.20		
11			0.20				0.20		
12			0.20				0.20		
13			0.20				0.20		
14			0.20				0.20		
15			0.10				0.10		
16			0.20				0.20		
17			0.40				0.40		
18			0.30				0.30		
19			0.30				0.30		
20			0.30				0.30		
21			0.30				0.30		
22			0.20				0.20		
23			0.20				0.20		
24			0.20				0.20		
25			0.20				0.20		
26			0.20				0.20		
27			0.10				0.10		
28			0.10				0.10		
29			0.20				0.20		
30									
31									
Slow Sand/Membrane/DE Filtration/Unfiltered				Monthly Summary (Answer Yes or No)					
95% of daily turbidity readings ≤ 1 NTU? ²				Yes	CT's met everyday? (see back)		All Cl ₂ residual at entry point ≥ 0.2 mg/l?		
All daily turbidity readings ≤ 5 NTU?				Yes	Yes		Yes		
Notes:				PRINTED NAME: Shauna Danielson					
				SIGNATURE: Shauna Danielson			3/6/24		
				PHONE #: (541)572.5307			CERT #: N/A		
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 Filtered systems only.									
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OHA - Drinking Water Services - Surface Water Quality Data Form						WTP- :	SSF/Chlorination		
System Name:	Camp Myrtlewood	ID#: 41	90861	Month/Year:	Feb 24	Disinfection <i>Giardia</i> Log Inactiv:	1.0		

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1	43	43.0	15.9	7.89	35.7	YES	0.01
2	1	43	43.0	15.8	7.84	35.3	YES	0.006
3	1	43	43.0	15.4	7.95	37.7	YES	0.006
4	1	43	43.0	14.5	8.10	42.3	YES	0.006
5	1	43	43.0	15.4	7.90	37.0	YES	0.006
6	1	43	43.0	14.4	7.98	40.7	YES	0.01
7	1	43	43.0	15.4	7.84	36.2	YES	0.01
8	1	43	43.0	14.8	7.81	37.3	YES	0.03
9	1.2	43	51.6	8.9	7.55	51.5	YES	0.04
10	1.2	43	51.6	9.6	7.61	50.2	YES	0.01
11	1.4	43	60.2	9.8	7.98	57.9	YES	0
12	1.4	43	60.2	10.0	8.02	57.9	YES	0.01
13	1	43	43.0	11.3	7.22	38.3	YES	0.08
14	1	43	43.0	15.1	7.88	37.5	YES	0.04
15	1	43	43.0	15.7	7.80	35.0	YES	0.02
16	1	43	43.0	15.9	7.49	30.8	YES	0.05
17	1	43	43.0	16.3	7.74	32.9	YES	0.04
18	1	43	43.0	13.5	7.96	42.9	YES	0.1
19	1	43	43.0	15.9	7.66	32.8	YES	0.1
20	1	43	43.0	14.9	7.85	37.6	YES	0.02
21	1	43	43.0	16.5	7.86	33.9	YES	0.02
22	1	43	43.0	14.7	7.89	38.6	YES	0.02
23	0.9	43	43.0	15.0	7.83	36.6	YES	0.02
24	0.9	43	43.0	10.8	7.24	39.4	YES	0.01
25	0.95	43	43.0	9.9	7.12	40.3	YES	0.028
26	1	43	43.0	10.8	7.24	39.8	YES	0.02
27	1	43	43.0	12.4	7.15	34.8	YES	0.05
28	1.1	43	47.3	14.1	7.95	41.6	YES	0.02
29	1.1	43	47.3	16.2	7.83	34.6	YES	0.01
30								
31								

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

Revised July 2018

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