OHA - Drinking Water Services - Surface Water Quality Data Form							County:	COOS
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems							Month/Year:	5/25
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			0.18				0.18	
2			0.20				0.20	
3			0.19				0.19	
4			0.23				0.23	
5			0.19				0.19	
6			0.24				0.24	
7			0.23				0.23	
8			0.23				0.23	
9			0.23				0.23	
10			0.19				0.19	
11			0.62				0.62	
12			0.38				0.38	
13			0.15				0.15	
14			0.14				0.14	
15			0.11				0.11	
16			0.16				0.16	
17			0.17				0.17	
18			OFF				OFF	
19			OFF				OFF	
20			0.12				0.12	
21			0.12				0.12	
22			0.12				0.12	
23			0.13				0.13	
24			0.21				0.21	
25			0.24				0.24	
26			0.14				0.14	
27			0.21				0.21	
28			0.18				0.18	
29			OFF				OFF	
30			0.14				0.14	
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 Cl2 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 **7/7/2005**

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.

OHA - Drinking Water Services - Surface Water Quality Data Form						WTP- :	SSF/Chlorination
System Name:	**Camp Myrtlewood**	**ID#: 41**	**90861**	**Month/Year:**	**6/1/2025**	**Disinfection *Giardia* 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	1.24	43	53.3	17.4	8.57	42.6	YES	0.047
2	1.24	43	53.3	18.2	8.39	37.8	YES	0.083
3	1.15	43	49.5	17.9	8.40	38.3	YES	0.118
4	1.07	43	46.0	19.1	8.44	45.1	YES	0.118
5	1.13	43	48.6	19.6	8.33	33.3	YES	0.201
6	1.18	43	50.7	20.6	8.41	32.3	YES	0.118
7	1	43	43.0	19.8	8.52	34.7	YES	0.153
8	1	43	43.0	22.5	8.39	27.6	YES	0.167
9	1.02	43	43.9	22.9	8.42	27.3	YES	0.153
10	0.92	43	39.6	20.7	8.47	31.8	YES	0.167
11	1.07	43	46.0	20.3	8.50	33.1	YES	0.201
12	0.99	43	42.6	20.5	8.50	31.1	YES	0.139
13	1.04	43	44.7	17.0	8.46	40.3	YES	0.139
14	1.17	43	50.3	18.8	8.35	37.4	YES	0.097
15	1.06	43	45.6	18.2	8.41	37.3	YES	0.097
16	1.15	43	49.5	18.5	8.49	38.1	YES	0.125
17	1.13	43	48.6	19.7	8.34	33.2	YES	0.146
OFF								
OFF								
20	1.03	43	44.3	17.7	8.46	39.2	YES	0.118
21	1.1	43	47.3	17.7	8.40	38.6	YES	0.250
22	1.12	43	48.2	17.8	8.44	39.0	YES	0.125
23	1.07	43	46.0	19.1	8.45	35.7	YES	0.063
24	1.46	43	62.8	19.8	8.43	35.4	YES	0.375
25	1.62	43	69.7	20.5	8.50	35.3	YES	0.299
26	1.36	43	58.5	19.9	8.47	35.3	YES	0.236
27	1.08	43	46.4	20.8	8.36	30.9	YES	0.159
28	1.29	43	55.5	23.3	8.37	26.9	YES	0.208
OFF								
30	0.95	43	40.9	21.2	8.40	30.1	YES	0.184
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

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