

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

County: Lane
 Month/Year: Jan 2021

System Name:	OPRD JM Honeyman Memorial State Park		ID#: 41	91044		WTP: TP -	WTP-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	—	—	—	.09	.08	—	.09
2	—	—	—	.08	.11	—	.11
3	—	—	.10	.22	.13	—	.25
4	—	—	—	.06	.06	—	.06
5	—	—	.12	.22	.07	—	.22
6	—	—	.09	.06	.07	.07	.09
7	—	—	.07	—	—	—	.07
8	.08	—	—	.09	.09 ^{B.O.}	— ^{B.O.}	.09
9	—	.09	—	—	—	—	.09
10	—	—	—	—	.09	.09	.09
11	.09	.09	.09	—	.08	—	.09
12	—	—	—	—	.09	—	.09
13	—	.09	—	.09	—	—	.09
14	.09	—	—	.09	—	—	.09
15	.09	.09	—	.09	—	—	.09
16	.09	—	—	.09	—	—	.09
17	.09	—	—	.09	—	—	.09
18	.09	—	—	.09	—	—	.09
19	—	.08	—	—	.09	—	.09
20	—	.09	.09	—	—	.09	.09
21	—	—	.09	.09	—	.08	.09
22	—	—	—	.09	—	—	.09
23	.09	—	—	.05	.05	—	.09
24	—	.05	—	—	—	—	.05
25	—	—	.17	.21	.12	—	.21
26	—	—	.16	.17	.12	—	.17
27	—	—	—	.12	.11	.19	.19
28	.23	—	—	—	.09	.09	.23
29	—	—	.01	—	.08	—	.1
30	—	.09	—	.08	—	—	.09
31	.08	—	—	.08	—	—	.08

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)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All 4-hour turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<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:		PRINTED NAME: Randy Wopsay	
		SIGNATURE:	DATE: 2/4/21
		PHONE #: (541) 997-3851	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 Eff. (333-061-0040(1)(d)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :

System Name: OPRD JM Honeyman Memorial State Park ID#: 41 91044 Month/Year: Jan 2021 Disinfection Giardia Log Inactive: 0.5

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]
KB 1 1055	.79	480	379.2	10.0	8.21	63	yes	98
KB 2 1120	.76	[Large handwritten bracket spanning all rows]	364.8	9.4	8.45	84	yes	
MN 3 0925	.72		345.6	10.0	7.98	53	yes	
ML 4 1215	.74		355.2	10.0	8.48	63	yes	
BG 5 0950	.74		355.2	10.0	8.24	63	yes	
KB 6 1130	.80		384	10.0	8.37	63	yes	
KB 7 0940	.85		408	9.4	8.22	84	yes	
BG 8 0939	.84		403.2	10.0	7.76	54	yes	
KB 9 1214	.85		408	10.0	8.17	65	yes	
KB 10 1125	.78		374.4	10.6	8.51	75	yes	
BG 11 1112	.94		456.2	10.0	8.05	65	yes	
ML 12 0945	.87		417.6	11.1	8.16	65	yes	
KB 13 0946	.79		379.2	11.7	8.36	63	yes	
KB 14 0950	.71		340.8	10.6	8.22	63	yes	
BG 15 0947	.61		292.8	11.7	8.22	63	yes	
KP 16 0936	.54		259.2	10.6	8.26	61	yes	
KP 17 0923	.56		268.8	10.6	8.26	61	yes	
BG 18 0943	.52		249.6	10.6	8.22	61	yes	
ML 19 1005	.56		268.8	11.1	8.44	61	yes	
KB 20 1030	.62		297.6	10.0	8.34	63	yes	
KB 21 1358	.64		307.2	10.6	8.22	63	yes	
ML 22 0935	.63		302.4	10.0	8.11	63	yes	
KB 23 1115	.67		321.6	9.4	8.17	84	yes	
KB 24 1108	.68		326.4	10.6	8.15	63	yes	
KP 25 0945	.63		302.4	8.9	8.21	84	yes	
KP 26 1000	.61		292.8	8.3	8.39	84	yes	
KB 27 1015	.60		288	8.3	8.43	81	yes	
KB 28 0950	.58		276.4	9.4	8.38	81	yes	
BG 29 1030	.56		268.8	9.4	8.20	81	yes	
KP 30 0938	.55		264	9.4	8.20	81	yes	
KP 31 0925	.50		240	10.0	8.14	61	yes	

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

Heceta Head State Park Monthly Turbidity Report, Public Water Supplies

PWS ID # 4191048A
SYSTEM NAME: Heceta Head State Park
SOURCE NAME: Well

ADDRESS: 93111 Highway 101 N
Florence, OR 97439 MONTH/YEAR
PHONE: 541-547-3416

Jan 2021

DATE/TIME	INITIALS	C/2 RESIDUAL	COMMENTS	METER READING
10 1	Deb	1.	changed spigot cxt	30127
930 2	Deb	1.		30134
10am 3	JT	.5	CXT 1.8 gal. cl ₂	30145
11 4	Deb	.3	CXT 1.5 → Pump	30147
10:30am 5	JT	.5	CXT 1.7 gal. cl ₂	30168
820 6	Be	.3	CXT mix 1/4 hr 30oz cl ₂ 3g cl ₂	30171
820 7	Be	.2		30173
830 8	Be	.4		30183
820 9	Be	.1		30199
830 10	park closed			30220
11	" "			30220
12	" "			30220
13	" "			30220
14	" "			30220
820 15	Deb	.3	1st pump	30225
16				
17				
18				
19	Be	.1		30250
20				
21	Be	.1		30280
22	Be	.1		30299
23	Be	.1		30311
10am 24	JT	0.5	CXT fill unit at purchase if	30341
10 25	Deb	.5	1/2 hr to 18oz cl ₂ I have time	30351
830 26	Be	.5		30393
27				
28	Be	.2		30400
29	Be	.1	mix 30oz cl ₂ 1/4 hr Buckle 3g	30414
10 30	Deb	.2		
830 31	Deb	.5	CXT add 6oz cl ₂ pump 15	30437

T 1st of CXT.

Total: _____
Write off when not producing water.

Total -- # days=monthly average

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