

OHA - Drinking Water Services – Turbidity Monitoring Report Form

County: Jackson

Month/Year: 10/22

Cartridge or Bag Filtration

| System Name: <u>Cascad Gorge Prop</u> | | ID# 41 <u>91556</u> | WTP ID: | | | | | |
|---------------------------------------|-------------------|---------------------|-----------------|----------------------------|-------------------------------|---|-------|--|
| 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 | 45 | 45 | 30 0 | 30 | 0.034 | | | |
| 2 | 45 | 45 | } | } | 0.032 | | | |
| 3 | 45 | 45 | | | 0.034 | | | |
| 4 | | | | | | | | |
| 5 | 45 | 45 | | | 0.032 | | | |
| 6 | 49 | 49 | | | 0.032 | | | |
| 7 | 49 | 49 | | | 0.034 | | | |
| 8 | 49 | 49 | | | 0.032 | | | |
| 9 | 49 | 49 | | | 0.030 | | | |
| 10 | 49 | 49 | | | | | 14.7 | |
| 11 | 49 | 49 | | | | | 0.050 | |
| 12 | 49 | 49 | | | 2.91 | | | |
| 13 | 50 | 50 | | | 2.21 | | | |
| 14 | 50 | 50 | | | 0.30 | | | |
| 15 | 50 | 50 | | | 0.30 | | | |
| 16 | 50 | 50 | | | 0.29 | | | |
| 17 | 50 | 50 | | | 0.017 | | | |
| 18 | 49 | 49 | | | 0.017 | | | |
| 19 | 49 | 49 | | | 0.071 | | | |
| 20 | 49 | 49 | | | 0.015 | | | |
| 21 | 50 | 50 | | | 0.017 | | | |
| 22 | 50 | 50 | | | 0.017 | | | |
| 23 | 50 | 50 | | | 0.018 | | | |
| 24 | 50 | 50 | | | 0.018 | | | |
| 25 | 50 | 50 | | | 0.017 | | | |
| 26 | 48 | 48 | | | 0.015 | | | |
| 27 | 48 | 48 | | | 0.015 | | | |
| 28 | 48 | 48 | | | 0.015 | | | |
| 29 | 48 | 48 | | | 0.013 | | | |
| 30 | 50 | 50 | | | 0.014 | | | |
| 31 | 50 | 50 | | | 0.014 | | | |

| | | | |
|--|----------|---|---|
| Cartridge Filtration Monthly Summary | | Monthly Summary (Answer Yes or No) | |
| 95% of daily turbidity readings ≤ 1 NTU? | Yes / No | CT's met everyday? (see back) | All Cl ₂ residual at entry point ≥ 0.2 mg/l? |
| All daily turbidity readings ≤ 5 NTU? | Yes / No | Yes / No | Yes / No |
| <p>Notes: PSI = pounds per square inch PSID = pounds per square inch difference (before filter – after filter) PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change the filter, at what PSID.</p> | | PRINTED NAME: <u>Samantha Schaafsma</u> | DATE: <u>11/1/22</u> |
| | | SIGNATURE: <u>[Signature]</u> | CERT #: <u>4328</u> |
| | | PHONE #: <u>541 1560 3248</u> | |

¹ Including continuous turbidity 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

Month/Year: 10/22

| System Name: <u>Cascade Gorge Prop</u> | | ID# 41 <u>91556</u> | | WTP | | | | |
|--|---|---------------------|---------------------------------|-------|-----|------------------|----------------------|-------------------------|
| Date / Time | Minimum Cl ₂ Residual at 1 st 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 ² ¹ | [° C] | | Use tables | Yes / No | [GPM] |
| 1/ | 1.0 | | 4181.4 | 20.2 | 8.2 | 16 | Yes | |
| 2/ | 1.0 | | 4098.6 | 19.8 | 8.2 | 22 | yes | |
| 3/ | 1.0 | | 4119.3 | 19.9 | 8.1 | 22 | yes | |
| 4/ | | | | | | | | |
| 5/ | 0.9 | | 3415.5 | 16.5 | 7.8 | 18 | yes | |
| 6/ | 0.9 | | 3808.8 | 18.4 | 7.9 | 18 | yes | |
| 7/ | 0.8 | | 3063.6 | 14.8 | 8.3 | 33 | yes | |
| 8/ | 1.0 | | 4119.3 | 19.9 | 8.1 | 22 | yes | |
| 9/ | 1.0 | | 3374 | 16.3 | 7.6 | 18 | yes | |
| 10/ | 1.0 | | 3187.8 | 15.4 | 7.4 | 15 | yes | |
| 11/ | 2.5 | | 4015.8 | 19.4 | 8.3 | 26 | yes | |
| 12/ | 2.9 | | 4057.2 | 19.6 | 8.4 | 26 | yes | |
| 13/ | 2.2 | | 4036.5 | 19.5 | 8.0 | 26 | yes | |
| 14/ | 2.5 | | 3477.6 | 16.8 | 8.3 | 26 | yes | |
| 15/ | 2.5 | | 3581.1 | 17.3 | 7.6 | 22 18 | yes | |
| 16/ | 2.5 | | 3808.8 | 18.4 | 8.0 | 22 18 | yes | |
| 17/ | 3.0 | | 3498.3 | 16.9 | 7.9 | 29 18 | yes | |
| 18/ | 3.0 | | 3995.1 | 19.3 | 8.1 | 22 | yes | |
| 19/ | 3.0 | | 3808.8 | 18.4 | 7.5 | 19 | yes | |
| 20/ | 3.0 | | 3374.1 | 16.3 | 7.2 | 19 | yes | |
| 21/ | 3.0 | | 3063.6 | 14.8 | 7.4 | 28 | yes | |
| 22/ | 3.0 | | 3084.3 | 14.9 | 8.3 | 41 | yes | |
| 23/ | 3.0 | | 3146.4 | 15.2 | 8.3 | 41 27 | yes | |
| 24/ | 3.0 | | 2856.6 | 13.8 | 8.3 | 41 | yes | |
| 25/ | 3.0 | | 2794.5 | 13.5 | 8.2 | 23 | yes | |
| 26/ | 2.5 | | 2794.5 | 13.5 | 8.0 | 7.8 32 | no | |
| 27/ | 1.5 | | 2815.2 | 13.6 | 7.8 | 28 | yes | |
| 28/ | 1.0 | | 2649.6 | 12.8 | 6.3 | 19 | yes | |
| 29/ | 1.0 | | 2732.4 | 13.2 | 7.8 | 27 | yes | |
| 30/ | 1.8 | | 2960.1 | 14.3 | 7.4 | 22 | yes | |
| 31/ | 1.8 | | 2504.7 | 12.1 | 8.3 | 63 | yes | |

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours. Revised August 2016
 Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf

Return by 10th of following month by email, fax or mail to:
dwp.dmce@state.or.us; Fax 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350