

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Lane

Cartridge or Bag Filtration

Month/Year: November 2023

System Name: ID#: 41 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	No Campers		#VALUE!	25.00		
2	No Campers		#VALUE!	25.00		
3	30.00	28.00	2.00	25.00	0.27	
4	30.00	28.00	2.00		0.25	
5	No Campers		#VALUE!			
6	No Campers		#VALUE!			
7	No Campers		#VALUE!			
8	No Campers		#VALUE!			
9	30.00	28.00	2.00		0.35	
10	30.00	28.00	2.00		0.26	
11	No Campers		#VALUE!			
12	No Campers		#VALUE!			
13	No Campers		#VALUE!			
14	No Campers		#VALUE!			
15	No Campers		#VALUE!			
16	No Campers		#VALUE!			
17	No Campers		#VALUE!			
18	No Campers		#VALUE!			
19	No Campers		#VALUE!			
20	No Campers		#VALUE!			
21	30.00	26.00	4.00		0.36	
22	30.00	26.00	4.00		0.37	
23	30.00	26.00	4.00		0.36	
24	No Campers		#VALUE!			
25	No Campers		#VALUE!			
26	No Campers		#VALUE!			
27	No Campers		#VALUE!			
28	No Campers		#VALUE!			
29	No Campers		#VALUE!			
30	No Campers		#VALUE!			
31	N/A		#VALUE!			

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	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: 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: Faye Strudler	
	SIGNATURE: Faye Strudler	DATE: 12/5/23
	PHONE #: (541) 822-3511	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:

ID#: 41

Month/Year:

Disinfection
Giardia Log Inactiv:

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Date / Time	Minimum Cl ₂ 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	No Campers	26	#VALUE!	17.8		#VALUE!	#VALUE!	
2	No Campers	26	#VALUE!	17.6		#VALUE!	#VALUE!	
3	2.2	26	57.2	9.5	7.30	50.8	YES	
4	2.3	26	59.8	9.3	7.30	52.0	YES	
5	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
6	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
7	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
8	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
9	2.2	26	57.2	8.3	7.40	57.0	YES	
10	2.3	26	59.8	8.0	7.40	58.9	YES	
11	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
12	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
13	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
14	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
15	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
16	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
17	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
18	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
19	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
20	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
21	2.2	26	57.2	6.8	6.80	50.9	YES	
22	2.4	26	62.4	6.8	7.30	62.3	YES	
23	2.4	26	62.4	6.8	7.30	62.3	YES	
24	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
25	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
26	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
27	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
28	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
29	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
30	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
31	N/A		#VALUE!			#VALUE!	#VALUE!	

² 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@odhsoha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350