

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Lane

Cartridge or Bag Filtration

Month/Year: December 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 <sup>1</sup> [NTU]
1	No Campers		#VALUE!	25.00		
2	0.30	0.28	0.02	25.00	0.50	0.52
3	0.30	0.28	0.02	25.00	0.49	0.52
4	No Campers		#VALUE!			
5	No Campers		#VALUE!			
6	No Campers		#VALUE!			
7	0.30	0.28	0.02		0.48	0.48
8	No Campers		#VALUE!			
9	No Campers		#VALUE!			
10	No Campers		#VALUE!			
11	0.30	0.28	0.02		0.54	0.59
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	0.30	0.26	0.04		0.49	0.51
22	No Campers		#VALUE!			
23	No Campers		#VALUE!			
24	No Campers		#VALUE!			
25	No Campers		#VALUE!			
26	0.30	0.26	0.04		0.52	0.54
27	0.30	0.26	0.04		0.53	0.54
28	0.30	0.26	0.04		0.54	0.54
29	0.30	0.26	0.04		0.52	0.52
30	0.30	0.26	0.04		0.31	0.35
31	0.30	0.26	0.04		0.46	0.48

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

<b>Notes: PSI = pounds per square inch</b> <b>PSID = pounds per square inch difference (before filter - after filter)</b> <b>PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.</b>	<b>PRINTED NAME: Faye Strudler</b>	
	<b>SIGNATURE: Faye Strudler</b>	<b>DATE: 1/5/24</b>
	<b>PHONE #: (541)-822-3511</b>	<b>CERT #:</b>

<sup>1</sup> 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:

1

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>2</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	<b>C X T</b>	[° C]		formula	Yes / No	[GPM]
1	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
2	2.8	26	72.8	5.0	7.20	71.2	YES	
3	2.8	26	72.8	4.6	7.00	68.0	YES	
4	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
5	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
6	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
7	2.6	26	67.6	5.0	7.00	64.7	YES	
8	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
9	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
10	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
11	2.7	26	70.2	4.2	7.00	69.1	YES	
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	2.7	26	70.2	4.3	7.00	68.7	YES	
22	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
23	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
24	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
25	No Campers	26	#VALUE!			#VALUE!	#VALUE!	
26	2.8	26	72.8	4.3	7.00	69.5	YES	
27	2.8	26	72.8	4.3	7.00	69.5	YES	
28	2.8	26	72.8	4.5	7.00	68.5	YES	
29	2.8	26	72.8	4.9	7.00	66.7	YES	
30	2.8	26	72.8	5.3	7.10	67.3	YES	
31	2.7	26	70.2	5.3	7.00	64.1	YES	

<sup>2</sup> If Cl<sub>2</sub> 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@odshsoha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350