

OHA - Drinking Water Services - Turbidity Monitoring Report Form

County: Lane

Cartridge or Bag Filtration

Month/Year: April 2021

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	39	39	0	25		.34
2	40	41	(1)	25		.65
3	38	39	(1)	25		.38
4	40	41	(1)	25		.20
5	40	41	(1)	25		.34
6	44	45	(1)	25		.27
7	51	52	(1)	25		.71
8	39	40	(1)	25		.43
9	40	40	(1)	25		.66
10	37	37	0	25		.46
11	40	40	0	25		.17
12	32	32	0	25		.42
13	49	50	(1)	25		.45
14	45	46	(1)	25		.47
15	37	37	0	25		.50
16	40	41	(1)	25		.70
17	40	40	(0)	25		.45
18	34	35	(1)	25		.30
19	39	39	0	25		.30
20	44	45	(1)	25		.43
21	42	43	(1)	25		.27
22	34	34	0	25		.38
23	42	42	0	25		.31
24	38	39	(1)	25		.30
25	41	42	(1)	25		.37
26	51	51	0	25		.82
27	37	38	(1)	25		.83
28	33	33	0	25		.80
29	38	38	0	25		.10
30	33	33	0	25		.28
31						

1045A
3P
555P
1015A
1145A
505P
1140A
1P
1020A
745A
1240A
650P
350P
1240P
320P
930A
630P
115P
630P
550P
425P
245P
545P
730A
520P
310P
720P
1105A

Cartridge Filtration Monthly Summary		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<u>Yes</u> / No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<u>Yes</u> / No	<u>Yes</u> / No	<u>Yes</u> / No
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.	PRINTED NAME: <u>Stein Anderson</u>		DATE: <u>4/30/21</u>
	SIGNATURE: <i>[Signature]</i>		CERT #:
	PHONE #: <u>(541) 997-3526</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 Program - Surface Water Quality Data Form

System Name: **Camp Baker B.S.A** ID #41: **91786** WTP-- Month/Year: **April 2021**

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	[°C]		Use tables	Yes / No	[GPM]
1/	1.32	45	59.4	11.5	6.6	39	y	12.1
2/	1.01	45	45.45	13.2	6.6	38	y	12.1
3/	.91	45	40.95	11.8	6.4	31	y	12.1
4/	.86	45	38.7	11.9	6.1	31	y	12.1
5/	1.38	45	62.10	11.5	6.5	33	y	12.1
6/	2.27	45	102.15	12.0	6.7	43	y	12.1
7/	1.24	45	55.8	11.3	6.3	33	y	12.1
8/	.91	45	40.95	11.9	6.6	37	y	12.1
9/	.84	45	37.8	11.3	6.7	37	y	12.1
10/	.77	45	34.65	14.8	6.4	31	y	12.1
11/	.85	45	38.25	14.8	6.9	37	y	12.1
12/	.76	45	34.2	15.0	6.7	24	y	12.1
13/	.69	45	31.05	14.9	6.0	26	y	12.1
14/	2.50	45	112.5	15.0	6.4	24	y	12.1
15/	1.17	45	52.65	13.5	5.9	27	y	12.1
16/	1.18	45	53.1	12.6	6.3	32	y	12.1
17/	.98	45	44.1	15.1	6.3	21	y	12.1
18/	.59	45	26.55	15.0	6.6	24	y	12.1
19/	.89	45	40.05	14.4	6.2	31	y	12.1
20/	.99	45	44.55	14.5	7.0	37	y	12.1
21/	.90	45	40.50	14.6	6.9	37	y	12.1
22/	.87	45	39.15	14.4	6.3	31	y	12.1
23/	.78	45	35.10	15.2	6.5	20	y	12.1
24/	.66	45	29.70	13.7	5.8	26	y	12.1
25/	.64	45	28.8	15.1	6.3	20	y	12.1
26/	.59	45	26.55	14.7	6.0	25	y	12.1
27/	1.92	45	86.4	14.8	6.2	35	y	12.1
28/	2.01	45	90.45	13.9	6.6	42	y	12.1
29/	1.87	45	84.15	13.8	5.9	29	y	12.1
30/	1.15	45	51.75	14.2	7.0	38	y	12.1
31/								

added 1 cup chlorine per tank

added 1 cup per tank

added 1 cup chlorine tank

2045
3P
555
1015
114
505
1140
1P
1020
745
1240
650
350
124
220
930
630
115
630
550
425
245
548
730
520
310
120
720
105

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours. Revised October 2013
Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf