

OHA - Drinking Water Services - Turbidity Monitoring Report Form
 Cartridge or Bag Filtration

County: Ware
 Month/Year: July 2021

System Name: Camp Baker BSA ID# 41 91786 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	44	35	9	25		.42
2	43	33	10	25		.48
3	40	31	9	25		.13
4	57	45	12	25		.21
5	49	37	12	25		.11
6	48	36	12	25		.20
7	52	37	15	25		.50
8	46	33	13	25		.41
9	37	25	12	25		.39
10	57	34	23	25		.30
11	47	30	17	25		.35
12	57	33	24	25		.26
13	39	23	16	25		.64
14	45	26	19	25		.26
15	39	22	17	25		.25
16	49	23	26	25		.32
17	51	55	(4)	25		.17
18	41	44	(3)	25		.21
19	46	49	(3)	25		.28
20	38	40	(2)	25		.22
21	30	33	(3)	25		.28
22	20	23	(3)	25		.14
23	24	26	(2)	25		.83
24	45	47	(2)	25		.58
25	43	(44)	(1)	25		.32
26	41	41	0	25		.56
27	50	47	3	25		.05
28	46	39	7	25		.27
29	38	27	11	25		.34
30	48	33	15	25		.41
31	49	30	19	25		.53

11A
 650P
 1030A
 130P
 1215P
 855A
 850A
 940A
 855A
 1120A
 910A
 9A
 820P
 1205P
 1030A
 935A
 815A
 1130A
 935A
 935A
 255P
 1110A
 930A
 810P
 250P
 755A
 110P
 1040A
 730P
 930A
 1005A

changed
 1 micron
 filter

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?	Yes / <u>No</u>	<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>Stan Anderson</u>	DATE: <u>7-31-2021</u>
		SIGNATURE: <u>[Signature]</u>	CERT #: <u>N/A</u>
		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 BSA** ID #41: **91786** WTP-: Month/Year: **July 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]
11	1.19	45	53.55	17.1	6.1	21	y	12.1
21	2.50	45	112.50	17.3	6.7	29	y	12.1
31	.79	45	35.55	17.6	6.0	17	y	12.1
41	2.50	45	112.50	17.2	6.7	29	y	12.1
51	.92	45	41.4	17.3	6.0	18	y	12.1
61	2.50	45	112.50	16.7	6.5	24	y	12.1
71	2.50	45	112.50	17.0	6.7	29	y	12.1
81	2.50	45	112.50	16.8	6.6	29	y	12.1
91	2.50	45	112.50	16.6	6.7	29	y	12.1
101	1.21	45	54.45	16.7	6.2	22	y	12.1
111	2.35	45	105.75	16.7	6.7	29	y	12.1
121	.78	45	35.10	16.6	6.2	20	y	12.1
131	2.50	45	112.50	17.3	6.6	29	y	12.1
141	2.50	45	112.50	17.1	6.8	29	y	12.1
151	1.65	45	74.25	16.7	6.4	23	y	12.1
161	2.50	45	112.50	16.6	6.4	24	y	12.1
171	1.19	45	53.55	16.4	6.1	21	y	12.1
181	2.50	45	112.50	17.0	7.0	29	y	12.1
191	2.50	45	112.50	17.3	6.9	29	y	12.1
201	2.50	45	112.50	17.9	7.0	29	y	12.1
211	2.50	45	112.50	17.5	7.1	36	y	12.1
221	1.00	45	45.00	17.4	6.1	21	y	12.1
231	2.50	45	112.50	17.2	7.1	36	y	12.1
241	2.50	45	112.50	18.1	7.4	36	y	12.1
251	.97	45	43.65	17.6	6.1	21	y	12.1
261	2.50	45	112.50	17.5	7.0	29	y	12.1
271	2.50	45	112.50	17.4	7.2	36	y	12.1
281	1.20	45	54.00	17.5	6.8	25	y	12.1
291	.95	45	42.75	18.1	6.2	21	y	12.1
301	.92	45	41.40	18.7	6.1	21	y	12.1
311	.79	45	35.55	17.2	6.1	20	y	12.1

11A
650
1030
130
1215
855
850
940
855
1120
910
9A
820
1205
1030
435
855
1130
935
935
255
110
930
810
250
155
110
1040
730
930
1005
K

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