

OHA - Drinking Water Services - Turbidity Monitoring Report Form

County: L2ne

Cartridge or Bag Filtration

Month/Year: March 2023

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	34	38	(4)	25		.37
2	23	26	(3)			.23
3	33	36	(3)			.18
4	35	38	(3)			.25
5	32	35	(3)			.81
6	33	36	(3)			.38
7	32	36	(4)			.39
8	24	28	(4)			.29
9	33	36	(3)			.84
10	22	26	(4)			.42
11	20	24	(4)			.72
12	22	26	(4)			.65
13	29	33	(4)			.41
14	35	39	(4)			.44
15	32	36	(4)			.23
16	30	33	(3)			.50
17	32	36	(4)			.97
18	27	30	(3)			.25
19	26	30	(4)			.38
20	35	35	(2)			.29
21	30	34	(4)			.46
22	32	35	(3)			.16
23	27	30	(3)			.51
24	31	34	(3)			.31
25	30	33	(3)			.47
26	30	33	(3)			.29
27	33	36	(3)			.46
28	26	30	(4)			.31
29	23	27	(4)			.23
30	33	36	(3)			.41
31	26	29	(3)			.71

1230P
335P
905A
410P
1215P
1110A
350P
250P
1P
1105A
10A
1215P
1005A
640P
920A
945A
105A
1240P
320P
110P
930A
1145A
935A
440P
1135A
940A
205P
215P
410P
135P
910A

Cartridge Filtration Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> 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> SIGNATURE: <u>[Signature]</u> DATE: <u>3-31-23</u> PHONE #: <u>(541) 997-3526</u> CERT #: <u> </u>	

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: **March 2023**

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]	CXT	[°C]		Use tables	Yes / No	[GPM]
1/1	1.87	45	39.15	12.9	5.1	26	y	1201
2/1	1.76		34.2	12.0	6.1	31	y	
3/1	1.97		58.65	11.4	5.8	29	y	
4/1	2.18		98.10	10.5	5.5	30	y	
5/1	2.16		97.2	10.5	5.5	30	y	
6/1	2.34		105.3	10.0	5.7	30	y	
7/1	1.17		52.65	10.9	5.8	27	y	
8/1	2.45		110.25	11.1	6.3	37	y	
9/1	2.50		112.5	9.6	5.6	41	y	
10/1	1.63		73.35	9.6	5.5	35	y	
11/1	1.69		31.05	14.1	5.9	26	y	
12/1	2.47		111.15	11.2	6.0	31	y	
13/1	2.45		110.25	12.4	5.3	31	y	
14/1	2.50		112.50	11.5	5.6	31	y	
15/1	1.83		82.35	11.7	5.2	29	y	
16/1	2.47		111.15	15.9	5.6	20	y	
17/1	1.72		32.4	13.3	6.0	20	y	
18/1	2.50		112.50	15.7	6.3	24	y	
19/1	2.50		112.50	15.2	5.8	20	y	
20/1	2.34		105.3	14.5	6.0	30	y	
21/1	2.00		90.0	15.3	5.4	19	y	
22/1	1.93		86.85	14.9	6.0	29	y	
23/1	1.72		77.4	14.7	5.6	29	y	
24/1	2.02		90.9	15.7	6.1	23	y	
25/1	1.14		51.3	14.3	6.0	27	y	
26/1	2.50		112.50	12.6	6.3	37	y	
27/1	2.50		112.50	11.8	6.1	37	y	
28/1	2.43		109.35	11.6	5.2	31	y	
29/1	2.50		112.50	12.3	5.8	31	y	
30/1	2.50		112.50	11.1	5.7	31	y	
31/1	2.50		112.50	11.7	5.9	31	y	

1230p
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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