

OHA - Drinking Water Services - Turbidity Monitoring Report Form

Cartridge or Bag Filtration

County: Lane

Month/Year: Nov. 2024

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	25	15	10	25		.74
2	26	15	11			.44
3	20	11	9			.29
4	23	13	10			.35
5	27	16	11			.26
6	27	16	11			.75
7	22	13	9			.49
8	22	13	9			.39
9	27	16	11			.41
10	22	12	10			.40
11	25	14	11			.35
12	20	11	9			.96
13	23	14	9			.81
14	22	13	9			.75
15	26	15	11			.62
16	21	12	9			.59
17	27	15	12			.34
18	24	14	10			.40
19	27	15	12			.36
20	26	15	11			.37
21	25	15	10			.41
22	20	12	8			.35
23	27	16	11			.45
24	27	16	11			.49
25	20	11	9			.32
26	27	16	11			.53
27	23	13	10			.26
28	27	16	11			.83
29	27	16	11			.47
30	20	12	8			.91
31						

815P
 945A
 3P
 1145A
 415P
 945A
 1235P
 1255P
 9A
 915A
 850A
 1215P
 550P
 1240P
 140P
 605A
 8A
 1125A
 4P
 1045A
 940A
 1215P
 915A
 1155A
 11A
 1205P
 1010A
 125P
 1140A
 1020A

Cartridge Filtration Monthly Summary 95% of daily turbidity readings ≤ 1 NTU? <u>Yes / No</u> All daily turbidity readings ≤ 5 NTU? <u>Yes / No</u>		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <u>Yes / No</u> All Cl ₂ residual at entry point ≥ 0.2 mg/l? <u>Yes / No</u>	
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>11-30-24</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: NOV. 2024**

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/	2.50	45	112.50	16.1	5.8	20	y	12.1
2/	2.50		112.50	15.1	6.4	24	y	
3/	2.50		112.50	15.7	6.5	24	y	
4/	2.50		112.50	15.0	6.3	24	y	
5/	2.50		112.50	15.9	6.4	24	y	
6/	2.50		112.50	14.6	6.2	37	y	
7/	2.50		112.50	15.1	5.9	20	y	
8/	2.50		112.50	14.8	6.1	37	y	
9/	2.50		112.50	14.5	6.4	37	y	
10/	2.50		112.50	15.2	6.5	24	y	
11/	2.50		112.50	16.8	6.0	20	y	
12/	2.50		112.50	14.7	6.3	37	y	
13/	2.50		112.50	14.8	6.2	37	y	
14/	2.25		101.25	13.1	6.2	36	y	
15/	1.83		82.35	14.9	6.1	35	y	
16/	1.63		73.35	14.8	6.2	34	y	
17/	1.27		59.15	14.9	6.1	33	y	
18/	1.02		45.90	14.2	5.9	27	y	
19/	.96		43.20	13.2	6.2	31	y	
20/	.65		29.25	12.6	5.9	26	y	
21/	.52		23.40	15.0	5.8	17	y	
22/	1.45		65.25	12.9	5.7	28	y	
23/	2.50		112.50	15.2	6.1	24	y	
24/	2.50		112.50	13.9	6.4	37	y	
25/	.93		41.85	14.5	6.3	31	y	
26/	.84		37.80	13.0	6.3	31	y	
27/	.87		39.15	12.6	6.3	31	y	
28/	1.35		60.75	14.0	6.6	39	y	
29/	2.37		106.65	13.0	6.1	30	y	
30/	2.50		112.50	13.5	6.3	37	y	
31/								

changed chlorine pump major flow rate

re-set metered pump again

515A
945A
3P
1145A
415P
945A
1235A
1255A
9A
915A
850A
1215P
550P
1249P
144P
605A
8A
1125A
4P
1045A
940A
1215P
915A
1155A
11A
1205P
1010A
125P
1140A
1020A

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