

OHA - Drinking Water Services - Turbidity Monitoring Report Form

County: Lane

Cartridge or Bag Filtration

Month/Year: July 2025

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	11	7	4	25		.44
2	10	6	4			.78
3	11	6	5			.44
4	12	6	6			.76
5	13	7	6			.78
6	12	6	6			.96
7	12	5	7			.10
8	15	5	10			.47
9	16	4	12			.44
10	17	3	14			.27
11	20	2	18			.31
12	5	7	(2)			.64
13	5	8	(3)			.49
14	5	8	(3)			.32
15	5	7	(2)			.36
16	3	6	(3)			.42
17	3	6	(3)			.19
18	3	5	(2)			.28
19	6	7	(12)			.29
20	7	8	(1)			.50
21	5	5	—			.50
22	8	5	—			.50
23	5	7	(2)			.90
24	7	7	—			.80
25	7	8	(1)			.97
26	7	8	(1)			.91
27	7	7	—			.48
28	8	8	—			.32
29	7	6	(1)			.66
30	6	7	(1)			.40
31	8	7	1			.37

Refused
5 min.
filter
5 i
micron

945 A
830 A
1020 A
1205 P
1035 A
145 P
145 P
530 P
1455 A
10 A
1025 A
210 A
940 A
1210 P
11 A
1210 P
1250 P
1240 A
1145 A
1 P
605 P
2 P
710 P
1225 P
1145 A
1220 P
225 P
845 A
1130 A
935 A
1050 A

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> 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.		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>	
PRINTED NAME: <u>Sten Anderson</u> SIGNATURE: <u>[Signature]</u> PHONE #: <u>(541) 997-3526</u>		DATE: <u>7/31/25</u> CERT #: <u>N/A</u>	

OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: **Camp Baker B.S.A** ID#41: **91786** WTP: Month/Year: **July 2025**

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/	2.50	45	112.50	17.3	5.9	20	y	12.1
2/	2.50		112.50	17.8	6.6	29	y	
3/	2.50		112.50	17.1	5.8	20	y	
4/	2.50		112.50	17.5	5.8	20	y	
5/	2.50		112.50	17.3	5.9	20	y	
6/	2.50		112.50	19.7	5.8	20	y	
7/	2.38		107.10	18.2	5.8	20	y	
8/	2.13		95.85	18.0	5.4	20	y	
9/	2.24		100.8	17.7	5.4	20	y	
10/	2.50		112.5	18.6	5.4	20	y	
11/	2.50		112.5	18.5	5.8	20	y	
12/	2.50		112.5	18.5	6.0	20	y	
13/	2.50		112.5	17.9	5.8	20	y	
14/	2.50		112.5	18.3	5.3	20	y	
15/	2.50		112.5	18.1	5.9	20	y	
16/	2.50		112.5	18.2	5.6	20	y	
17/	2.50		112.5	18.3	5.9	20	y	
18/	2.50		112.5	18.7	6.1	24	y	
19/	2.50		112.5	18.5	5.7	20	y	
20/	2.50		112.5	18.4	6.0	20	y	
21/	2.50		112.5	18.0	5.5	20	y	
22/	2.50		112.5	18.0	5.8	20	y	
23/	2.50		112.5	17.6	5.9	20	y	
24/	2.50		112.5	18.1	5.6	20	y	
25/	2.50		112.5	17.6	5.6	20	y	
26/	2.50		112.5	18.5	6.0	20	y	
27/	2.50		112.5	18.0	6.4	24	y	
28/	2.50		112.5	17.1	6.1	24	y	
29/	2.50		112.5	18.2	6.1	24	y	
30/	2.50		112.5	17.8	5.4	20	y	
31/	2.50		112.50	18.2	6.2	24	y	

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