

Oregon DHS - Drinking Water Program – Turbidity Monitoring Report Form

System Name: Tilikum Retreat Center ID #: 41 91967 Month/Year: November / 2023

DAY	12 AM (NTU)	4 AM (NTU)	8 AM (NTU)	NOON (NTU)	4 PM (NTU)	8 PM (NTU)	Highest Reading (NTU)	Peak Hourly Flow (GPM)
1							.46	5.5
2	offline							
3							.31	
4	offline							
5	offline							
6							.23	
7	offline							
8							.29	
9	offline							
10							.46	
11	offline							
12	offline							
13							.54	
14	offline							
15							.59	
16	offline							
17							.43	
18	offline							
19							.47	
20	offline							
21							.62	
22							.63	
23	offline							
24							.55	
25	offline							
26							.67	
27							.58	
28							.69	
29	offline							
30							.71	
31								

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)		
95% of turbidity readings ≤ 0.3 NTU? <input type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	Cl ₂ residual measured in 95% of distribution samples? <input type="checkbox"/> Yes / <input type="checkbox"/> No
All turbidity readings < 1 NTU? <input type="checkbox"/> Yes / <input type="checkbox"/> No			
All turbidity readings < IFE triggers? <input type="checkbox"/> Yes / <input type="checkbox"/> No ¹			
- OR -	PRINTED NAME: <u>Justin Adsit</u>		
Slow Sand/Cartridge/Membrane/DE Filtration	SIGNATURE: <u>Justin Adsit</u>		DATE: <u>12-10-23</u>
95% of turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	PHONE #: (<u>541</u>) <u>224 2822</u>		CERT #:
All turbidity readings < 5 NTU? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No			

¹ IFE = Individual Filter Effluent

Oregon DHS - Drinking Water Program – Surface Water Quality Data Form

System Name: Tilikum Retreat Center

ID #: 41 91967

Month/Year: November / 2023

Date / Time	Minimum Cl ₂ Residual at 1 st User (C)	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met?
	ppm or mg/L	minutes	C X T	° C		Use tables	Yes / No
1 /	1.4	210	294	10.9	7.4	47	
2 /							
3 /	1.6		336	12.8	7.8	58	
4 /							
5 /							
6 /	3.4		714	11.4	7.8	67	
7 /							
8 /	2.8		588	9.5	7.8	88	
9 /							
10 /	1.6		336	12.2	7.8	58	
11 /							
12 /							
13 /	2.2		462	9.1	7.9	83	
14 /							
15 /	3.0		630	9.4	7.8	89	
16 /							
17 /	2.8		588	9.0	7.9	88	
18 /							
19 /	3.0		630	8.4	8.0	89	
20 /							
21 /	2.8		588	9.3	8.2	106	
22 /	3.4		714	8.4	7.8	89	
23 /							
24 /	2.0		420	6.4	7.8	81	
25 /							
26 /	1.8		378	5.9	7.7	79	
27 /	1.4		294	5.4	7.7	76	
28 /	1.2		252	5.3	7.5	61	
29 /							
30 /	1.2		252	6.6	7.4	61	
31 /							