

# OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Josephine Cartridge or Bag Filtration

System Name: **NPS OREGON CAVES NATL MON ID #: OR4191998** WTP: **WTP-A** Month/Year: **APRIL 2021**

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day <sup>1</sup> [NTU]
1	40	30	10	25	.196	.210
2	40	28	12	25	.196	.208
3	41	27	13	25	.198	.205
4	40	26	14	25	.200	.204
5	40	34	6	25	.201	.208
6	40	33	7	25	.204	.206
7	40	32	8	25	.205	.211
8	40	30	10	25	.204	.210
9	40	30	10	25	.203	.215
10	40	29	11	25	.205	.213
11	40	27	13	25	.205	.219
12	40	33	7	25	.205	.220
13	40	30	10	25	.205	.215
14	41	29	12	25	.205	.211
15	40	27	13	25	.205	.214
16	40	33	7	25	.205	.218
17	40	31	9	25	.205	.221
18	40	30	10	25	.206	.230
19	40	35	5	25	.207	.235
20	41	32	9	25	.208	.240
21	41	29	12	25	.209	.242
22	41	27	14	25	.209	.246
23	41	32	9	25	.209	.238
24	42	30	12	25	.209	.234
25	42	29	13	25	.210	.220
26	42	28	14	25	.210	.231
27	41	29	12	25	.211	.230
28	43	33	10	25	.211	.241
29	41	30	11	25	.211	.235
30	41	30	11	25	.211	.239
31						

<p><b>Cartridge Filtration</b></p> <p>95% of daily turbidity readings ≤ 1 NTU? <span style="color: blue;">Yes / No</span>          All daily turbidity readings ≤ 5 NTU? <span style="color: blue;">Yes / No</span></p>	<p style="text-align: center;"><b>Monthly Summary (Answer Yes or No)</b></p> <table style="width: 100%;"> <tr> <td style="width: 50%;">CT's met everyday? (see back) <span style="color: blue;">Yes / No</span></td> <td style="width: 50%;">All Cl<sub>2</sub> residual at entry point ≥ 0.2 mg/l? <span style="color: blue;">Yes / No</span></td> </tr> </table>	CT's met everyday? (see back) <span style="color: blue;">Yes / No</span>	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <span style="color: blue;">Yes / No</span>
CT's met everyday? (see back) <span style="color: blue;">Yes / No</span>	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <span style="color: blue;">Yes / No</span>		
<p><b>Notes:</b> 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. <span style="color: red;">MAY 20 2021</span></p> <p style="color: blue; text-align: center;">Data Mgmt &amp; Compliance Drinking Water Program</p>	<p><b>PRINTED NAME:</b> <span style="color: blue;">GREG MONTAGLE</span></p> <p><b>SIGNATURE:</b> </p> <p><b>DATE:</b> <span style="color: blue;">4.30.21</span></p> <p><b>PHONE #:</b> ( <span style="color: blue;">541</span> ) <span style="color: blue;">692-2100</span> <span style="color: blue;">EXT. 2255</span></p> <p><b>CERT #:</b> <span style="color: blue;">D-09444</span></p>		

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

NPS OREGON CAVES NATL MON ID #: OR4191998 WTP-: WTP-A Month/Year: APRIL 2024

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> User (C) <sup>2</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1 / 6800	1.00	300	300	17	7.7	30	YES	25
2 / 6930	1.0	300	300	17	7.7	30	YES	25
3 / 6845	1.0	300	300	17	7.7	30	YES	25
4 / 6900	1.0	300	300	17	7.7	30	YES	25
5 / 6920	1.0	300	300	17	7.7	30	YES	25
6 / 7200	1.0	300	300	17	7.7	30	YES	25
7 / 6900	1.0	300	300	17	7.7	30	YES	25
8 / 6930	1.0	300	300	17	7.7	30	YES	25
9 / 7200	1.0	300	300	17	7.7	30	YES	25
10 / 600	.80	300	240	17	7.7	30	YES	25
11 / 6920	.75	300	225	17	7.7	30	YES	25
12 / 7100	.75	300	225	17	7.7	30	YES	25
13 / 6830	.75	300	225	17	7.7	30	YES	25
14 / 6000	.75	300	225	17	7.7	30	YES	25
15 / 6020	.75	300	225	17	7.7	30	YES	25
16 / 6000	.75	300	225	17	7.7	30	YES	25
17 / 600	1.00	300	300	17	7.7	30	YES	25
18 / 630	1.10	300	330	17	7.7	30	YES	25
19 / 6100	1.15	300	345	17	7.7	30	YES	25
20 / 6100	1.00	300	300	17	7.7	30	YES	25
21 / 6220	.75	300	225	17	7.7	30	YES	25
22 / 6930	.85	300	255	17	7.7	30	YES	25
23 / 6930	.85	300	255	17	7.7	30	YES	25
24 / 6930	.85	300	255	17	7.7	30	YES	25
25 / 6000	.85	300	255	17	7.7	30	YES	25
26 / 6845	.85	300	255	17	7.7	30	YES	25
27 / 6100	.85	300	255	17	7.7	30	YES	25
28 / 6100	.70	300	210	17	7.7	30	YES	25
29 / 6930	.70	300	210	17	7.7	30	YES	25
30 / 6810	.70	300	210	17	7.7	30	YES	25
31 /								

<sup>2</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.  
 Download form at: [www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf](http://www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf)

