

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Lincoln

Cartridge or Bag Filtration

Month/Year: Sep-24

System Name: Alsea River RV Park & Marina ID#: 41 92043 WTP ID: TP-

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					0.00	
2					0.00	
3					0.00	
4					0.00	
5					0.00	
6					0.00	
7					0.00	
8					0.00	
9					0.00	
10					0.00	
11					0.00	
12					0.00	
13					0.00	
14					0.00	
15					0.00	
16					0.00	
17					0.00	
18					0.00	
19					0.00	
20					0.00	
21					0.00	
22					0.00	
23					0.00	
24					0.00	
25					0.00	
26					0.00	
27					0.00	
28					0.00	
29					0.00	
30					0.00	
31					0.00	

Cartridge & Bag Filtration

Monthly Summary (Answer Yes or No)

95% of daily turbidity readings ≤ 1 NTU? **Yes**
 All daily turbidity readings ≤ 5 NTU? **Yes**

CT's met everyday? (see back) **Yes** All Cl2 residual at entry point ≥ 0.2 mg/l? **Yes**

Notes: PSI = pounds per square inch

PSID = pounds per square inch difference (before filter - after filter)

PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.

PRINTED NAME: Nancy Johnston
 SIGNATURE: *Nancy Johnston* DATE: 10/10/2024
 PHONE #: (541)563-3401 CERT #:

¹Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not

correspond to continuous readings' maximum.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP: a

System Name: Alesa River RV Park & Marina	ID#: 41	92043	Month/Year: Sep-24	Disinfection Giardia Log Inactiv:	1
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Date / Time	Minimum Cl ₂ Residual at 1st 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]		formula	Yes / No	[GPM]
1	1.1	104	114.4	15.1	6.10	19.5	YES	
2	1.1	104	114.4	15.0	6.10	19.7	YES	
3	0.99	104	103.0	15.1	6.20	20.0	YES	
4	0.98	104	101.9	15.1	6.30	20.8	YES	
5	0.99	104	103.0	15.1	6.20	20.0	YES	
6	0.99	104	103.0	15.2	6.20	19.9	YES	
7	0.97	104	100.9	15.2	6.20	19.9	YES	
8	0.96	104	99.8	15.1	6.20	20.0	YES	
9	0.96	104	99.8	15.1	6.10	19.2	YES	
10	0.94	104	97.8	15.2	6.10	19.1	YES	
11	0.94	104	97.8	15.3	6.30	20.4	YES	
12	0.94	104	97.8	15.2	6.30	20.5	YES	
13	0.93	104	96.7	15.1	6.20	19.9	YES	
14	0.91	104	94.6	15.1	6.20	19.9	YES	
15	0.92	104	95.7	15.1	6.20	19.9	YES	
16	0.91	104	94.6	15.2	6.20	19.7	YES	
17	0.92	104	95.7	15.1	6.20	19.9	YES	
18	0.92	104	95.7	15.1	6.20	19.9	YES	
19	0.9	104	93.6	15.2	6.10	19.0	YES	
20	0.9	104	93.6	15.2	6.20	19.7	YES	
21	0.89	104	92.6	15.2	6.20	19.7	YES	
22	0.87	104	90.5	15.2	6.20	19.6	YES	
23	0.87	104	90.5	15.2	6.10	18.9	YES	
24	0.84	104	87.4	15.2	6.10	18.8	YES	
25	0.82	104	85.3	15.2	6.20	19.5	YES	
26	0.81	104	84.2	15.3	6.20	19.4	YES	
27	0.8	104	83.2	15.3	6.10	18.6	YES	
28	0.81	104	84.2	15.3	6.10	18.6	YES	
29	0.8	104	83.2	15.3	6.10	18.6	YES	
30	0.8	104	83.2	15.3	6.20	19.3	YES	
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² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350