

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

System Name: Mad Dog Country Tavern ID #: 084192052 WTP: WTP-A Month/Year: March 2022

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

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
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>TJ WISKY</u>	DATE: <u>4-1-2022</u>
Data Mgmt & Compliance Drinking Water Program APR 04 2022		SIGNATURE: <u>TJ Wisky</u>	CERT #:
		PHONE #: <u>(541) 265-8761</u>	

¹ 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: Mad Dog Country Tavern

ID #: OR4192052

WTP: WTP-A Month/Year: MARCH

2022

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/	1.38	71	138	15.7	72	28	yes	5
2/	1.11	71	111	16.0	72	25	yes	5
3/	1.00	71	100	15.5	72	27	yes	5
4/	.72	71	72	15.2	72	26	yes	5
5/	.74	71	74	14.0	72	29	yes	5
6/	.87	71	87	15.3	72	27	yes	5
7/	1.21	71	121	14.5	72	31	yes	5
8/	1.59	71	159	14.4	72	31	yes	5
9/	1.69	71	169	16.1	72	28	yes	5
10/	1.82	71	182	13.4	72	36	yes	5
11/	2.20	71	220	13.1	72	36	yes	5
12/	2.20	71	220	14.0	72	33	yes	5
13/	2.20	71	220	14.4	72	33	yes	5
14/	2.20	71	220	14.8	72	33	yes	5
15/	2.20	71	220	15.8	72	30	yes	5
16/	2.20	71	220	15.2	72	30	yes	5
17/	2.05	71	205	14.4	72	33	yes	5
18/	1.44	71	144	16.2	72	27	yes	5
19/	.97	71	97	15.0	72	27	yes	5
20/	.67	71	67	14.5	72	29	yes	5
21/	.54	71	54	15.2	72	26	yes	5
22/	.43	71	43	17.0	72	23	yes	5
23/	.46	71	46	17.4	72	23	yes	5
24/	.55	71	55	16.1	72	25	yes	5
25/	.73	71	73	15.8	72	26	yes	5
26/	1.10	71	100	16.1	72	26	yes	5
27/	1.36	71	136	17.7	72	25	yes	5
28/	1.90	71	190	14.5	72	33	yes	5
29/	1.76	71	176	16.6	72	28	yes	5
30/	1.78	71	178	16.8	72	28	yes	5
31/	1.84	71	184	15.5	72	30	yes	5

If Cl₂ at entry point < 0.2 mg/L, OR CT not met, notify DWP by end of next business day.

Revised February 2012

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf