

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

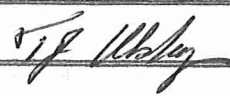
System Name:  ID #: _____ WTP-: _____ Month/Year: February 2023

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

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Certification
Drinking Water Services

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back)	All Cl ₂ residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No	<input checked="" type="radio"/> Yes / <input type="radio"/> No
<p>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.</p>		PRINTED NAME: <u>T.J. WISKY</u>	DATE: <u>3-1-2023</u>
		SIGNATURE: 	
		PHONE #: <u>(541) 265-8761</u>	CERT #:

Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.
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OHA - Drinking Water Program - Surface Water Quality Data Form

System Name: Mad Dog Country Tavern

ID #: OR4192052

WTP: WTP-A Month/Year: February 2023

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/	2.20	71	220	11.5	72	43	yes	5
2/	2.20	71	220	12.4	72	40	yes	5
3/	2.20	71	220	12.6	72	40	yes	5
4/	2.20	71	220	13.0	72	36	yes	5
5/	2.20	71	220	14.9	72	33	yes	5
6/	2.20	71	220	14.7	72	33	yes	5
7/	1.99	71	199	14.8	72	33	yes	5
8/	1.74	71	174	14.4	72	33	yes	5
9/	1.57	71	157	14.3	72	31	yes	5
10/	1.32	71	132	14.5	72	31	yes	5
11/	.70	71	70	14.5	72	29	yes	5
12/	1.24	71	124	13.1	72	34	yes	5
13/	1.11	71	111	14.5	72	30	yes	5
14/	1.20	71	120	13.3	72	34	yes	5
15/	1.13	71	113	11.8	72	39	yes	5
16/	1.07	71	107	11.8	72	39	yes	5
17/	1.00	71	100	13.8	72	32	yes	5
18/	.95	71	95	14.1	72	30	yes	5
19/	.82	71	82	12.4	72	35	yes	5
20/	.77	71	77	14.3	72	29	yes	5
21/	.78	71	78	13.6	72	32	yes	5
22/	.77	71	77	12.6	72	34	yes	5
23/	.78	71	78	12.1	72	34	yes	5
24/	.67	71	67	10.6	72	40	yes	5
25/	.68	71	68	10.7	72	40	yes	5
26/	.63	71	63	12.1	72	34	yes	5
27/	.60	71	60	12.2	72	34	yes	5
28/	.57	71	57	11.9	72	36	yes	5
29/								
30/								
31/								

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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 for Services