

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

System Name: SAWYERS LANDING RV PARK ID #: OR4192061 WTP: WTP-A Month/Year: Dec 2024

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [NTU]
1	31	29	7	25		
2	33	26	7	25		.12
3	34	26	8	25		.10
4	35	26	9	25		.13
5	35	26	9	25		.12
6	39	27	12	25		.109
7	35	27	8	25		.17
8	37	28	9	25		.14
9	37	29	9	25		.13
10	37	29	8	25		.11
11	39	29	10	25		.16
12	39	29	10	25		.14
13	39	30	9	25		.14
14	40	30	10	25		.13
15	40	30	10	25		.17
16	41	30	11	25		.14
17	41	30	11	25		.16
18	42	31	11	25		.13
19	42	32	10	25		.11
20	42	32	10	25		.12
21	42	32	10	25		.14
22	43	32	11	25		.16
23	43	32	11	25		.109
24	44	33	11	25		.109
25	44	33	11	25		.10
26	45	35	10	25		.12
27	45	35	10	25		.16
28	47	36	11	25		.14
29	47	37	10	25		.11
30	47	37	10	25		.13
31	49	37	12	25		.14
						.109

Cartridge Filtration

95% of daily turbidity readings ≤ 1 NTU? Yes / No
 All daily turbidity readings ≤ 5 NTU? Yes / 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.

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back) Yes / No
 All Cl₂ residual at entry point ≥ 0.2 mg/l? Yes / No

PRINTED NAME: John Ruge
 SIGNATURE: [Signature]
 DATE: 1-1-25
 PHONE #: (541) 265-3907
 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.

OHA - Drinking Water Program - Surface Water Quality Data Form

SAWYERS LANDING RV PARK ID #: OR4192061 WTP: WTP-A Month/Year: Dec 2024

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/	1.6	80	128	8.0	6.9	58	Y	370
2/	1.8	80	144	7.6	6.9	60	Y	460
3/	1.9	80	152	6.7	6.9	61	Y	500
4/	2.0	80	160	7.2	6.9	60	Y	390
5/	1.9	80	144	7.4	6.9	61	Y	550
6/	2.2	80	176	8.4	6.8	62	X	290
7/	2.2	80	176	8.6	6.8	62	Y	160
8/	2.0	80	160	8.3	6.9	62	Y	950
9/	2.3	80	184	8.0	6.8	62	Y	610
10/	2.4	80	192	8.1	6.8	63	Y	480
11/	2.0	80	160	8.3	6.8	60	Y	390
12/	1.9	80	152	9.7	6.8	61	Y	470
13/	1.8	80	144	9.6	6.8	61	Y	230
14/	1.9	80	152	9.9	6.8	61	Y	340
15/	1.7	80	136	9.3	6.8	60	Y	360
16/	1.8	80	144	8.6	6.8	60	Y	590
17/	1.6	80	128	9.2	6.8	58	Y	610
18/	1.5	80	120	9.8	6.8	58	Y	420
19/	1.6	80	128	9.3	6.8	58	Y	650
20/	1.5	80	120	9.9	6.8	58	Y	570
21/	1.4	80	112	9.3	6.8	57	Y	360
22/	1.5	80	120	9.4	6.8	58	Y	510
23/	1.7	80	136	9.7	6.8	60	Y	350
24/	1.6	80	128	9.2	6.8	58	Y	400
25/	1.7	80	136	9.5	6.8	60	Y	570
26/	2.0	80	160	9.6	6.8	60	Y	390
27/	1.9	80	152	9.9	6.8	61	Y	590
28/	2.0	80	160	9.3	6.8	61	Y	740
29/	2.2	80	176	9.5	6.8	62	Y	860
30/	2.1	80	168	9.2	6.8	62	Y	530
31/	1.9	80	152	9.3	6.8	61	Y	760

² If Cl₂ 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/Health/Environments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf