

# OHA - Drinking Water Services – Turbidity Monitoring Report Form

County:

## Cartridge or Bag Filtration

Month/Year:

System Name:

ID# 41

WTP ID:

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	2	2	4	4	6	6		.30	
2	6	6	8	6	14	12		.32	
3	12	12	12	12	24	24		.32	
4	2	4	2	2	4	6		.34	
5	6	6	6	6	12	12		.36	
6	12	14	12	10	24	24		.38	
7	2	2	2	2	4	4		.36	
8	6	8	8	6	14	14		.38	
9	12	12	12	12	24	24		.36	
10	2	4	4	2	6	6		.40	
11	6	6	6	6	12	12		.42	
12	12	12	12	12	24	24		.46	
13	2	2	2	2	4	4		.48	
14	6	8	8	6	14	14		.54	
15	12	18	12	14	24	24		.58	
16	2	4	2	2	4	6		.52	
17	6	6	6	6	12	12		.58	
18	12	12	12	12	24	24		.46	
19	2	4	2	2	4	6		.48	
20	10	12	12	10	22	22		.48	
21	2	2	2	2	4	4		.50	
22	6	6	6	6	12	12		.61	
23	12	14	12	10	24	24		.61	
24	2	4	4	2	6	6		.64	
25	6	8	8	6	14	14		.64	
26	12	12	12	12	24	24		.62	
27	2	2	2	2	4	4		.62	
28	6	6	6	6	12	12		.61	
29	12	14	12	10	24	24		.64	
30	2	2	2	2	4	4		.66	
31									

<b>Cartridge Filtration Monthly Summary</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back)	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
<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.		<b>PRINTED NAME:</b> <i>John Reid</i>	
		<b>SIGNATURE:</b> <i>[Signature]</i>	<b>DATE:</b> 6-30-23
		<b>PHONE #:</b> (541) 200-4562	<b>CERT #:</b>

<sup>1</sup> 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 Services – Surface Water Quality Data Form

Month/Year:  

System Name:  

ID# 41

WTP

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/	2.0	45	90	8.1	8.6	87	Y	7514
2/	2.0	45	90	9.0	8.7	85	Y	7395
3/	2.0	45	90	9.4	8.7	85	Y	7046
4/	2.0	45	90	9.2	8.6	87	Y	7280
5/	2.0	45	90	10.6	8.8	82	Y	7235
6/	2.0	45	90	11.2	8.8	77	Y	7183
7/	1.8	51	91.8	11.2	8.7	72	Y	6775
8/	2.0	45	90	11.1	8.7	74	Y	7427
9/	2.0	45	90	12.0	8.8	71	Y	7255
10/	2.0	45	90	12.2	8.8	71	Y	7176
11/	2.0	45	90	11.2	8.7	74	Y	7468
12/	1.8	116	208.8	12.8	8.8	75	Y	2058
13/	1.8	116	208.8	12.4	8.9	72	Y	1969
14/	1.8	116	208.8	12.1	8.9	72	Y	1750
15/	1.8	116	208.8	12.2	8.8	70	Y	2230
16/	1.8	116	208.8	12.4	8.9	72	Y	2165
17/	2.0	116	232	13.1	8.7	64	Y	2004
18/	2.0	116	232	11.2	8.9	80	Y	2466
19/	1.2	116	139.2	10.2	8.7	72	Y	2030
20/	2.0	116	232	10.1	8.9	85	Y	1856
21/	2.0	116	232	16.7	8.9	85	Y	1497
22/	1.8	116	208.8	10.2	8.8	80	Y	2282
23/	1.9	116	162.4	11.2	8.9	74	X	2450
24/	1.2	116	139.2	11.8	8.9	72	Y	2072
25/	1.2	116	139.2	12.2	8.8	65	Y	2585
26/	1.4	116	162.4	12.3	8.8	67	Y	2511
27/	2.0	116	232	12.2	8.9	74	Y	2252
28/	2.0	116	232	12.2	8.9	74	Y	2269
29/	1.8	116	208.8	12.4	8.9	72	Y	2787
30/	2.0	116	232	13.2	8.8	66	Y	2364
31/								

<sup>2</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours.

Revised November 2022

Download form at: [public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf](http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf)

**Return by 10<sup>th</sup> of following month by email, fax or mail to:**

[dwp.dmce@oha.oregon.gov](mailto:dwp.dmce@oha.oregon.gov); Fax 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350



# MT HOOD NATIONAL FOREST FILTRATION RECORDS FOR LOST LAKE RESORT AND CAMPGROUND

Month:	Turbidity	Chlorine	Temp.	PH	Daily Run 1 (backwall)	Running Total 1	Daily Run 2 (floor)	Running Total 2	Daily Pump (coffin)	Running Pump	Resort
1	.30	2.0	8.1	8.6	520007	7519	13921425	11571			13051
2	.32	2.0	9.0	8.7	5207402	7395	13955302	13877			13817
3	.32	2.0	9.4	8.7	5214448	7046	13994923	9621			15018
4	.34	2.0	9.2	8.6	5221728	7286	13954463	9540			17007
5	.36	2.0	10.6	8.8	5228963	7235	13963612	9148			18903
6	.36	2.0	11.2	8.8	5236146	7183	13977054	13442			20298
7	.78	1.8	11.2	8.7	5242921	6775	13988923	11878			21513
8	.36	2.0	11.1	8.7	5250348	7427	14004894	15062			22953
9	.40	2.0	12.0	8.8	5257603	7255	14027785	22889			23257
10	.42	2.0	12.2	8.8	5264774	7176	14029223	1440			25531
11	.46	2.0	11.2	8.7	5272239	7460	14033517	4789			26570
12	.48	1.8	12.8	8.8	5274297	2058	14039874	6357			28034
13	.54	1.8	12.4	8.9	5276266	1969	14042503	2627			29424
14	.54	1.8	12.1	8.9	5278016	1750	14045464	2961			30677
15	.58	1.8	12.2	8.8	5280246	2230	14048585	3121			32182
16	.52	1.8	12.4	8.9	5282411	2165	14054893	6308			33011
17	.58	2.0	13.1	8.9	5284415	2004	14058883	3990			35267
18	.46	2.0	11.2	8.9	5286881	2466	14061167	2280			37688
19	.48	1.2	10.2	8.7	5288911	2630	14065243	4088			38544
20	.48	2.0	10.1	8.9	5290767	1856	14068213	2970			4000
21	.50	2.0	10.4	8.9	5292724	1997	14074574	6361			41558
22	.61	1.8	10.2	8.8	5295006	2282	14078563	3984			42960
23	.61	1.4	11.2	8.9	5297465	2459	14083514	4951			44917
24	.64	1.2	11.8	8.9	5299557	2072	14087234	3728			46366
25	.64	1.2	12.2	8.8	5302122	2585	14090523	3289			48195
26	.62	1.4	12.3	8.8	5304633	2511	14098853	8330			50078
27	.62	2.0	12.4	8.9	5306885	2252	1410702	2849			51687
28	.61	2.0	12.2	8.9	5309154	2269	14105532	2830			53169
29	.64	1.8	12.4	8.9	5311321	2767	14109555	4023			54780
30	.66	2.0	13.2	8.8	5313685	2364	14114335	4780			56438
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Notes: