

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Linn

Cartridge or Bag Filtration

Month/Year: Sep-24

System Name: Whispering Falls ID#: 41 92786 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 <sup>1</sup> [NTU]
1	10.00	0.00	10.00	25.00	0.18	
2	10.00	0.00	10.00	25.00	0.18	
3	10.00	0.00	10.00	25.00	0.19	
4	10.00	0.00	10.00	25.00	0.19	
5	10.00	0.00	10.00	25.00	0.14	
6	11.00	0.00	11.00	25.00	0.10	
7	12.00	0.00	12.00	25.00	0.10	
8	15.00	0.00	15.00	25.00	0.10	
9	15.00	0.00	15.00	25.00	0.12	
10	16.00	0.00	16.00	25.00	0.16	
11	18.00	0.00	18.00	25.00	0.18	
12	18.00	0.00	18.00	25.00	0.10	
13	20.00	0.00	20.00	25.00	0.12	
14	22.00	0.00	22.00	25.00	0.12	
15	22.00	0.00	22.00	25.00	0.14	
16	22.00	0.00	22.00	25.00	0.16	
17	23.00	0.00	23.00	25.00	0.18	
18	23.00	0.00	23.00	25.00	0.18	
19	23.00	0.00	23.00	25.00	0.18	
20	25.00	0.00	25.00	25.00	0.19	
21	25.00	0.00	25.00	25.00	0.13	
22	25.00	0.00	25.00	25.00	0.11	
23	25.00	0.00	25.00	25.00	0.12	
24	25.00	0.00	25.00	25.00	0.12	
25	27.00	0.00	27.00	25.00	0.13	
26	28.00	0.00	28.00	25.00	0.15	
27	28.00	0.00	28.00	25.00	0.15	
28	28.00	0.00	28.00	25.00	0.17	
29	29.00	0.00	29.00	25.00	0.17	
30	29.00	0.00	29.00	25.00	0.19	
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<b>Cartridge &amp; Bag Filtration</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="radio"/> Yes	CT's met everyday? (see back)	<input checked="" type="radio"/> Yes
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="radio"/> Yes	<input checked="" type="radio"/> Yes / No	<input checked="" type="radio"/> 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: Adam Breemen  
 SIGNATURE: *Adam Breemen*  
 DATE: 10-7-24  
 PHONE #: (541) 801-4767  
 CERT #:

<sup>1</sup> Including 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- :

System Name:	Whispering Falls	ID#: 41	92786	Month/Year:	Sep-24	Disinfection <i>Giardia</i> Log Inactiv:	1
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Date / Time	Minimum Cl <sub>2</sub> Residual at 1st 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]		formula	Yes / No	[GPM]
1 / 5 pm	0.8	82	65.6	16.2	8.70	46.1	YES	
2 / 12:30 pm	0.7	82	57.4	16.0	8.70	46.2	YES	
3 / 3:30 pm	1.7	82	139.4	16.0	8.80	53.6	YES	
4 / 7:30 pm	1.7	82	139.4	16.0	8.80	53.6	YES	
5 / 5:30 pm	1.7	82	139.4	18.1	8.40	40.3	YES	
6 / 5:30 pm	1.7	82	139.4	19.1	8.70	42.1	YES	
7 / 11:30 am	1.7	82	139.4	16.9	8.80	50.5	YES	
8 / 1:30 pm	1.7	82	139.4	17.5	8.80	48.5	YES	
9 / 1:30pm	1.7	82	139.4	17.9	8.80	47.3	YES	
10 / 2:30 pm	1.5	82	123.0	16.1	8.70	50.2	YES	
11 / 3:30 pm	1.4	82	114.8	16.4	8.70	48.6	YES	
12 / 11:30 am	1.2	82	98.4	16.5	8.70	47.2	YES	
13 / 2:30 pm	1.2	82	98.4	17.1	8.70	45.4	YES	
14 / 1:40 pm	1.5	82	123.0	13.3	8.70	60.4	YES	
15 / 2 :30 pm	1.5	82	123.0	12.6	8.70	63.2	YES	
16 / 4:30 pm	1.4	82	114.8	12.4	8.70	63.0	YES	
17 / 3:30 pm	1.4	82	114.8	13.4	8.80	61.5	YES	
18 / 4:30 pm	1.6	82	131.2	15.5	8.70	52.8	YES	
19 / 12 pm	1.7	82	139.4	15.1	8.70	54.8	YES	
20 / 11:30 pm	1.7	82	139.4	10.7	8.70	73.3	YES	
21 / 3:30 pm	1.7	82	139.4	13.2	8.70	62.1	YES	
22 / 3:30 pm	1.8	82	147.6	14.4	8.80	60.2	YES	
23 / 4:40 pm	1.7	82	139.4	14.2	8.70	58.2	YES	
24 / 3:20 pm	1.5	82	123.0	12.2	8.60	62.3	YES	
25 / 11 am	1.6	82	131.2	12.1	8.60	63.4	YES	
26 / 4:30 pm	1.6	82	131.2	11.7	8.60	65.2	YES	
27 / 11:30 am	1.7	82	139.4	11.4	8.70	69.8	YES	
28 / 1 pm	1.5	82	123.0	11.3	8.70	68.7	YES	
29 / 4:30 pm	1.3	82	106.6	11.2	8.60	65.1	YES	
30 / 3:45 pm	1.3	82	106.6	11.5	8.20	55.2	YES	
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<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 July 2018

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

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