

OHA - Drinking Water Services - Surface Water Quality Data Form

OHA - Drinking Water Services - Surface Water Quality Data Form							WTP ID:	WTP-A
System Name:	Breitenbush Hot Springs		ID#: 41 93461	Month/Year: 05/24			Disinfection Giardia Log Inactiv:	1
Date / Time	Minimum Cl2 Residual at 1st User (C) 2	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? 2	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	0.46	170	78.2	10.0	7.85	48.93316893	YES	Unknown
2	0.46	170	78.2	9.9	7.87	49.64909632	YES	Unknown
3	0.43	170	73.1	10.1	7.72	46.39876382	YES	Unknown
4	0.42	170	71.4	10.1	7.80	47.50128675	YES	Unknown
5	0.39	170	66.3	9.9	7.72	46.70200041	YES	Unknown
6	0.38	170	64.6	9.8	7.68	46.33421381	YES	Unknown
7	0.39	170	66.3	10.5	7.77	45.64689147	YES	Unknown
8	0.36	170	61.2	10.2	7.83	47.33111735	YES	Unknown
9	0.36	170	61.2	10.4	7.78	45.98997332	YES	Unknown
10	0.36	170	61.2	10.7	7.78	44.98627272	YES	Unknown
11	0.32	170	54.4	10.1	7.63	44.39232522	YES	Unknown
12	0.31	170	52.7	10.0	7.72	45.93985481	YES	Unknown
13	0.32	170	54.4	10.4	7.67	44.04157983	YES	Unknown
14	0.33	170	56.1	10.0	7.70	45.7202499	YES	Unknown
15	0.35	170	59.5	11.0	7.69	42.74637855	YES	Unknown
16	0.38	170	64.6	11.6	7.66	40.92419179	YES	Unknown
17	0.38	170	64.6	12.3	7.76	40.42059715	YES	Unknown
18	0.39	170	66.3	11.7	7.83	43.16426216	YES	Unknown
19	0.41	170	69.7	12.3	7.64	38.90015315	YES	Unknown
20	0.44	170	74.8	12.0	7.66	40.02039725	YES	Unknown
21	0.47	170	79.9	12.2	7.67	39.85878885	YES	Unknown
22	0.48	170	81.6	12.2	7.67	39.90334253	YES	Unknown
23	0.50	170	85	11.6	7.58	40.33755329	YES	Unknown
24	0.48	170	81.6	12.2	7.61	39.08055547	YES	Unknown
25	0.47	170	79.9	11.9	7.61	39.74987728	YES	Unknown
26	0.47	170	79.9	12.0	7.62	39.60029413	YES	Unknown
27	0.47	170	79.9	11.4	7.61	41.07000222	YES	Unknown
28	0.47	170	79.9	12.0	7.69	40.57643604	YES	Unknown
29	0.42	170	71.4	12.6	7.66	38.17281417	YES	Unknown
30	0.39	170	66.3	12.5	7.63	37.90325307	YES	Unknown
31	0.40	170	68	12.0	7.49	37.56361494	YES	Unknown

2 If Cl2 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