OHA - Drinking Water Services - Surface Water Quality Data Form County: Josephine Month/Year: Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems Aug-24 4193465 WTP: TP-Black Bar Lodge ID#: 41 System Name: 12 AM 4 AM 8 AM NOON 4 PM 8 PM Highest Reading of the day 1 [NTU] Day [NTU] [NTU] [NTU] [NTU] [NTU] [NTU] 1 0.20 0.20 2 0.20 0.20 0.30 3 0.30 0.20 4 0.20 0.20 0.20 5 6 0.20 0.20 7 0.20 0.20 8 0.20 0.20 9 0.20 0.20 0.20 10 0.20 0.20 11 0.20 12 0.30 0.30 13 0.20 0.20 14 0.20 0.20 15 0.20 0.20 0.20 16 0.20 17 0.30 0.30 0.20 18 0.20 0.20 19 0.20 0.20 20 0.20 21 0.20 0.20 0.20 22 0.20 23 0.20 0.20 24 0.30 0.30 0.20 25 0.20 0.20 26 0.20 0.20 27 0.20 0.20 28 0.20 29 0.20 0.20 0.20 30 0.20 0.20 31 0.20 Monthly Summary (Answer Yes or No) Slow Sand/Membrane/DE Filtration/Unfiltered All Cl2 residual at entry point CT's met everyday? (see 95% of daily turbidity readings ≤ 1 NTU? ² Yes / No ≥ 0.2 mg/l? back) All daily turbidity readings ≤ 5 NTU? No (Yes / No Notes: Printed Name: John M James SIGNATURE: 9/9/2024

Phone: # 541-479-6507

CERT #:

Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA -	Drinking Water Servi	WTP-:				
					Disinfection Glardla Log	
System Name:	Black Bar Lodge	ID#: 41	93465	Month/Year: 2024/ August	Inactiv:	1.0

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	рН	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/l	[minutes]	CXT	[° C]		formula	Yes / No	[GPM]
1	1	60	60.0	21.0	7.95	25.9	YES	20
2	1	60	60.0	21.0	7.95	25.9	YES	20
3	1	60	60.0	21.2	7.98	25.9	YES	20
4	1.1	60	66.0	20.5	7.98	27.4	YES	20
5	1	60	60.0	20.7	7.95	26.5	YES	20
6	1	60	60.0	20.9	8.00	26.6	YES	20
7	1	60	60.0	21.0	8.10	27.4	YES	20
8	1.1	60	66.0	21.0	7.98	26.5	YES	20
9	1.1	60	66.0	20.9	8.00	26.9	YES	20
10	1	60	60.0	20.8	7.99	26.7	YES	20
11	1	60	60.0	21.0	7.99	26.3	YES	20
12	1	60	60.0	21.0	8.00	26.4	YES	20
13	1	60	60.0	21.5	8.00	25.6	YES	20
14	1	60	60.0	20.0	7.90	27.2	YES	20
15	1	60	60.0	20.0	8.00	28.3	YES	20
16	1	60	60.0	19.9	7.98	28.2	YES	20
17	1	60	60.0	19.7	7.90	27.8	YES	20
18	1	60	60.0	19.9	8.00	28.5	YES	20
19	1.1	60	66.0	20.0	8.00	28.6	YES	20
20	1	60	60.0	19.8	7.98	28.4	YES	20
21	1	60	60.0	19.7	7.98	28.6	YES	20
22	1.1	60	66.0	19.6	8.00	29.4	YES	20
23	1	60	60.0	19.7	7.98	28.6	YES	20
24	1	60	60.0	19.5	7.95	28.7	YES	20
25	1	60	60.0	19.8	7.98	28.4	YES	20
26	1	60	60.0	19.9	7.98	28.2	YES	20
27	1	60	60.0	20.0	7.95	27.7	YES	20
28	1.1	60	66.0	21.0	7.95	26.2	YES	20
29	1.1	60	66.0	20.4	8.00	27.8	YES	20
30	1	60	60.0	19.8	7.95	28.1	YES	20
31	1.1	60	66.0	19.7	8.00	29.2	YES	20

³ If Cl2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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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