

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Jefferson

Cartridge or Bag Filtration

Month/Year: SEPT 2025

System Name:	Camp Tamarack			ID#:	41 94144	WTP ID:	TP-	A
Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]			
1	76	60	16	30	.158			
2	64	59	5	30	.173			
3	75	55	16 20	30	.166			
4	71	44	27	30	.144			
5	75	69	6	30	.152			
6	62	58	4	30	.171			
7	74	70	4	30	.153			
8	66	46	20	30	.286			
9	64	58	6	30	.246			
10	72	67	5	30	.173			
11	70	65	5	30	.175			
12	79	72	7	30	.311			
13	76	69	7	30	.161			
14	83	66	17	30	.162			
15	70	50	20	30	.167			
16	70	68	2	30	.171			
17	70	66	4	30	.175			
18	68	64	4	30	.170			
19	68	64	4	30	.166			
20	72	68	4	30	.162			
21	74	70	4	30	.172			
22	71	66	5	30	.164			
23	79	75	4	30	.147			
24	80	74	6	30	.153			
25	65	59	6	30	.161			
26	70	55	15	30	.318			
27	78	65	13	30	.263			
28	76	64	12	30	.252			
29	66	49	17	30	.239			
30	82	46	36	30	.222			
31				30				

Cartridge & Bag Filtration

Monthly Summary (Answer Yes or No)

95% of daily turbidity readings $\leq$ 1 NTU?

Yes/No

CT's met everyday?
(see back)All Cl2 residual at entry point $\geq$ 0.2 mg/l?All daily turbidity readings $\leq$ 5 NTU?

Yes/No

Yes/No

Yes/No

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:

SIGNATURE:

DATE: 10/5/25

PHONE #:

CERT #: 94141

* 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: A

System
Name:

Camp Tamarack

ID#: 41 94144

Month/Year:

SEPT
2025Disinfection
Giardia Log
Inactiv:

0.5

Date	Cl ₂ Residual (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]		tables	Yes / No	[GPM]
1	1.16	66	79.2	23.4	7.2	12	YES	1 pm
2	1.46	66	105.6	20.1	7.1	12	YES	930 am
3	1.41	66	105.6	20.1	7.1	12	YES	830 am
4	1.34	66	105.6	21.1	7.1	12	YES	1030 am
5	1.15	66	79.2	20.2	7.2	12	YES	830 am
6	1.17	66	79.2	21.2	7.2	12	YES	10 am
7	.90	66	66	21.1	7.1	11	YES	830 am
8	1.10	66	79.2	21.1	7.1	12	YES	8 am
9	1.09	66	79.2	20.3	7.2	12	YES	8 am
10	1.70	66	118.8	19.4	7.2	16	YES	930 am
11	1.75	66	118.8	20.2	7.2	12	YES	430 pm
12	1.70	66	118.8	19.1	7.1	16	YES	9 am
13	1.75	66	118.8	20.1	7.1	12	YES	830 am
14	1.70	66	118.8	20.1	7.0	12	YES	12 pm
15	1.55	66	105.6	22.2	7.2	12	YES	4 pm
16	1	66	66	20.2	7.1	11	YES	8 am
17	.50	66	39.6	21.1	7.1	11	YES	1030 am
18	.98	66	66	22.2	7.1	11	YES	1130 am
19	1.27	66	92.4	23.1	7.2	12	YES	4 pm
20	1.18	66	79.2	22.1	7.2	12	YES	9 am
21	1.52	66	105.6	21.2	7.1	12	YES	11 am
22	1.35	66	92.4	20.2	7.1	12	YES	10 am
23	1.4	66	92.4	20.1	7.1	12	YES	9 am
24	.92	66	66	20.2	7.0	11	YES	1130 am
25	1.2	66	79.2	20.3	7.1	12	YES	10 am
26	.73	66	52.8	20.1	7.2	11	YES	8 am
27	.97	66	39.6	20.2	7.2	11	YES	1030 am
28	.94	66	66	21.1	7.1	11	YES	8 am
29	1.4	66	92.4	21.2	7.1	12	YES	11 am
30	1.51	66	105.6	20.2	7.1	12	YES	930 am
31		66						

² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Rev. April 18, 2025

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

dwp.dmce@odhsoha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14450, Portland, OR 97293-0350