OHA - Drinking Water Services - Surface Water Quality Data Form

Cartridge or Bag Filtration

County: Wallowa

Month/Year: 2-2025

System Name: Lake Shore Wtr & Dev. Co-Op ID#: OR4194169 WTP ID: TP-A

Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day [1] [NTU]
1	0	0	0	25		.43
2						.81
3						.93
4						1.05
5						.89
6						.77
7						.38
8						.71
9						.68
10						.50
11						.44
12						.39
13						.85
14						.43
15						.89
16						.47
17						.68
18						.63
19						.49
20						.55
21						.61
22						.48
23						.47
24						.84
25						.33
26						.87
27						.62
28						.51
29						
30						
31						

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	Yes / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 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: JAMES BURTON

SIGNATURE: [signature] DATE: 3-4-2025

PHONE #: (541) 432-8106 CERT #:

[1] 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: Lake Shore Wtr & Dev. Co-op ID#: 41 OR4194169 Month/Year: 2-2025 Disinfection *Giardia* Log Inactiv: 1

Date / Time	Minimum Cl_2 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	.4	1400	560	7	7.6	46	Y	10
2	.4	1400	560	7	7.6	46	Y	10
3	.4	1400	560	7	7.4	46	Y	10
4	.4	1400	560	7	7.6	46	Y	10
5	.4	1400	560	7	7.4	46	Y	10
6	.4	1400	560	7	7.3	46	Y	10
7	.4	1400	560	7	7.6	46	Y	10
8	.4	1400	560	7	7.5	46	Y	10
9	.4	1400	560	8	7.4	46	Y	10
10	.4	1400	560	8	7.6	46	Y	10
11	.4	1400	560	8	7.5	46	Y	10
12	.4	1400	560	8	7.4	46	Y	10
13	.4	1400	560	7	7.6	46	Y	10
14	.4	1400	560	7	7.5	46	Y	10
15	.4	1400	560	7	7.6	46	Y	10
16	.4	1400	560	8	7.3	46	Y	10
17	.5	1400	700	8	7.4	46	Y	10
18	.5	1400	700	8	7.2	46	Y	10
19	.5	1400	700	8	7.4	46	Y	10
20	.5	1400	700	8	7.4	46	Y	10
21	.5	1400	700	8	7.3	46	Y	10
22	.5	1400	700	8	7.6	46	Y	10
23	.5	1400	700	8	7.4	46	Y	10
24	.5	1400	700	8	7.5	46	Y	10
25	.5	1400	700	8	7.4	46	Y	10
26	.5	1400	700	8	7.6	46	Y	10
27	.5	1400	700	8	7.5	46	Y	10
28	.5	1400	700	8	7.7	46	Y	10
29								
30								
31								

[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