OHA - Drinking Water Services - Surface Water Quality Data Form

Cartridge or Bag Filtration

County: Wallowa

Month/Year: 10-2025

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						.89
3						.29
4						.60
5						.47
6						.43
7						.55
8						.71
9						.68
10						.91
11						.37
12						.48
13						.67
14						.42
15						.34
16						.27
17						.84
18						.73
19						.37
20						.51
21						.73
22						.64
23						.84
24						.87
25						.38
26						.29
27						.42
28						.50
29						.69
30						.41
31						.88

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 WILLIAMSON

SIGNATURE: [signature] DATE: 11-3

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. COS ID#: 41 OR4194169	Month/Year: 10-2025
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	8	7.2	46	Y	10
2	.4	1400	560	8	7.3	46	Y	10
3	.4	1400	560	8	7.4	46	Y	10
4	.4	1400	560	8	7.3	46	Y	10
5	.4	1400	560	8	7.4	46	Y	10
6	.4	1400	560	8	7.3	46	Y	10
7	.4	1400	560	8	7.4	46	Y	10
8	.4	1400	560	8	7.6	46	Y	10
9	.3	1400	420	8	7.3	46	Y	10
10	.3	1400	420	8	7.4	46	Y	10
11	.4	1400	560	8	7.6	46	Y	10
12	.4	1400	560	7	7.4	46	Y	10
13	.4	1400	560	7	7.1	46	Y	10
14	.4	1400	560	7	7.3	46	Y	10
15	.4	1400	560	7	7.3	46	Y	10
16	.4	1400	560	7	7.4	46	Y	10
17	.4	1400	560	8	7.6	46	Y	10
18	.4	1400	560	8	7.3	46	Y	10
19	.4	1400	560	8	7.2	46	Y	10
20	.4	1400	560	8	7.3	46	Y	10
21	.4	1400	560	8	7.3	46	Y	10
22	.4	1400	560	7	7.2	46	Y	10
23	.4	1400	560	7	7.4	46	Y	10
24	.4	1400	560	7	7.3	46	Y	10
25	.4	1400	560	7	7.4	46	Y	10
26	.4	1400	560	7	7.4	46	Y	10
27	.4	1400	560	7	7.3	46	Y	10
28	.4	1400	560	7	7.4	46	Y	10
29	.4	1400	560	7	7.3	46	Y	10
30	.4	1400	560	7	7.6	46	Y	10
31	.4	1400	560	7	7.4	46	Y	10

[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