

OHA - Drinking Water Program - Turbidity Monitoring Report Form County: Douglas
 Cartridge or Bag Filtration

System Name: USFS HORSESHOE BEND CG-ID #: OR4194179 WTP: WTP-A Month/Year: MAY 2021

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						
2						
3						
4						
5						
6						
7						
8						
9						
10						
11						
12						
13						
14						
15						
16						
17						
18						
19						
20	83-83=0	81-81=0	81-72=9	15	0.18	0.18
21	81-81=0	81-81=0	81-76=5	15	0.20	0.20
22	83-83=0	82-82=0	81-71=10	15	0.18	0.18
23	84-83=1	82-82=0	81-74=7	15	0.15	0.15
24	82-82=0	83-81=2	81-72=9	15	0.14	0.14
25	82-82=0	81-83=2	80-72=8	15	0.14	0.14
26	84-83=1	81-82=1	80-71=9	15	0.17	0.17
27	84-83=1	80-82=2	80-71=9	15	0.15	0.15
28	84-83=1	81-82=1	80-72=8	15	0.13	0.13
29	85-81=4	80-81=1	80-72=8	15	0.13	0.13
30	90-80=10	80-80=0	79-75=4	15	0.13	0.13
31	81-81=0	80-82=2	80-75=5	15	0.13	0.13

Closed

Cartridge Filtration		Monthly Summary (Answer Yes or No)	
35% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No	
Notes: PSI = pounds per square inch PSID = pounds per square inch difference (before filter - after filter) PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change filter, at what PSID.		PRINTED NAME: Jonathan Woody	
		SIGNATURE: <i>John Woody</i>	DATE: 6-5-21
		PHONE #: (541) 643-6137	CERT #: 7232

Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in "Daily Turbidity Reading" Column may not correspond to continuous readings' maximum.

OHA - Drinking Water Program – Surface Water Quality Data Form

USFS HORSESHOE BEND CG ID #: OR4194179 WTP-: WTP-A Month/Year:

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ² [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT Use tables	CT Met? ² Yes / No	Peak Hourly Demand Flow [GPM]
1/								
2/								
3/								
4/								
5/								
6/								
7/								
8/								
9/								
10/								
11/								
12/								
13/								
14/								
15/								
16/								
17/								
18/								
19/								
20/	1.07	140.9	150.8	8.0	7.28	61	Yes	15
21/	0.74	140.9	104.2	8.1	7.18	58	yes	15
22/	1.03	140.9	145.12	8.7	7.33	61	yes	15
23/	0.84	140.9	118.3	7.7	7.18	60	yes	15
24/	1.01	140.9	142.3	9.8	7.26	46	yes	15
25/	0.93	140.9	131.0	10	7.28	44	yes	15
26/	0.81	140.9	114.1	10.7	7.38	45	yes	15
27/	0.98	140.9	138.0	10.7	7.27	45	Yes	15
28/	0.86	140.9	121.1	8.5	7.13	62	Yes	15
29/	0.61	140.9	85.9	10.0	7.34	45	yes	15
30/	0.89	140.9	125.4	10.1	7.18	45	yes	15
31/	0.86	140.9	121.1	11.9	7.40	45	yes	15

² If Cl₂ at entry point < 0.2 mg/l, OR CT not met, notify DWP by end of next business day.
 Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf