

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: 5/22

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	80-80=0	80-80=0	79-76=3	15	.68	
19	80-81=1	80-80=0	70-76=6	15	.50	
20	80-80=0	80-80=0	70-76=6	15	.58	
21	80-80=0	80-80=0	70-78=8	15	.30	
22	80-80=0	80-80=0	79-70=9	15	.32	
23	80-80=0	80-80=0	79-70=9	15	.32	
24	80-80=0	79-79=0	76-70=6	15	.40	
25	80-80=0	79-79=0	76-70=6	15	.27	
26	80-80=0	79-79=0	76-70=6	15	.34	
27	81-80=1	78-79=1	76-70=6	15	.25	
28	85-80=5	80-80=0	75-70=5	15	.23	
29	95-85=10	82-75=7	75-70=5	15	1.12	see note below
30	95-85=10	85-75=10	75-70=5	15	1.38	see note below
31	98-88=10	85-75=10	75-70=5	15	1.29	see note below

POL

Cartridge Filtration 95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="checkbox"/> Yes / No All daily turbidity readings ≤ 5 NTU? <input checked="" type="checkbox"/> Yes / No		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / No All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / 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 the filter, at what PSID. note: Total number of readings over 1.0 ntu were not over 95% of the 1,248 continuous readings pulled from SC100		PRINTED NAME: Janie Purdo SIGNATURE: <i>Jan Purdo</i> DATE: 6/9/22	
		PHONE #: (541) 670-6812 CERT #:	

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: 5/22

Date / Time	Minimum Cl ₂ Residual at 1 st 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]		Use tables	Yes / No	[GPM]
1/								
2/								
3/								
4/								
5/								
6/								
7/								
8/								
9/								
10/								
11/								
12/								
13/								
14/								
15/								
16/								
17/								
18/	1.72	140.9	171.8	7.0	6.96	52	Y	
19/	6.64	140.9	90.17	7.3	7.0	57	Y	
20/	0.95	140.9	133.8	6.7	7.3	60	Y	
21/	2.20	140.9	309.9	7.3	8.3	100	Y	
22/	2.20	140.9	309.9	7.5	8.1	100	Y	
23/	2.20	140.9	309.9	8.7 ¹²	8.7 ¹²	68	Y	
24/	2.17	140.9	305.6	8.3	7.12	68	Y	
25/	1.68	140.9	236.7	8.8	7.04	68	Y	
26/	2.19	140.9	309.0	9.1	7.02	68	Y	
27/	1.37	140.9	193.0	8.6	6.9	62	Y	
28/	1.64	140.9	223.0	9.0	7.1	65	Y	
29/	1.24	140.9	174.7	8.0	7.1	65	Y	
30/	1.13	140.9	159.2	8.3	7.01	94	Y	
31/	1.12	140.9	157.8	8.3	7.1	94	Y	

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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