

OHA - Drinking Water Services - Surface Water Quality Data Form

County: COOS

Cartridge or Bag Filtration

Month/Year: Jun-22

System Name: USFS Horseshoe Bend CG		ID#: 41	94179	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 <sup>1</sup> [NTU]
1	100-90-10	80-75-5	70-70-0	15.00	1.09	
2	100-90-10	85-75-10	70-70-0	15.00	0.67	
3	80-79-1	79-80-1	70-78-8	15.00	1.37	
4	80-81-1	79-80-1	70-75-5	15.00	0.69	
5	81-82-1	79-80-1	70-76-6	15.00	0.86	
6	79-80-1	79-79-0	76-70-6	15.00	1.14	
7	80-80-0	80-78-2	76-70-6	15.00	0.78	
8	80-80-0	80-80-0	75-70-5	15.00	0.66	
9	82-82-0	80-79-1	75-70-5	15.00	0.53	
10	82-85-0	80-76-4	75-70-5	15.00	0.96	
11	86-85-0	84-79-5	75-70-5	15.00	0.54	
12	92-95-3	92-80-12	75-70-5	15.00	2.37	
13	100-98-2	98-87-11	72-70-2	15.00	2.20	
14	105-103-2	80-81-1	80-70-10	15.00	3.29	
15	80-80-2	80-80-0	79-70-9	15.00	1.41	
16	80-80-0	79-80-1	75-70-5	15.00	1.20	
17	86-80-6	78-80-2	76-70-6	15.00	0.60	
18	85-80-5	80-80-0	76-70-6	15.00	1.09	
19	85-80-5	85-78-7	73-69-4	15.00	0.52	
20	96-90-6	85-80-5	70-70-0	15.00	0.68	
21	98-90-8	70-70-0	65-70-5	15.00	0.42	
22	80-80-0	80-79-1	70-78-8	15.00	0.39	
23	80-80-0	79-79-0	79-70-8	15.00	0.31	
24	79-80-1	78-79-1	76-70-6	15.00	0.28	
25	79-80-1	77-70-7	76-70-6	15.00	0.38	
26	79-80-1	78-76-2	76-70-6	15.00	0.59	
27	80-80-0	76-78-2	75-70-5	15.00	0.27	
28	80-80-0	79-79-0	75-70-5	15.00	0.24	
29	85-80-5	80-80-0	75-70-5	15.00	0.23	
30	90-80-10	79-75-4	74-70-4	15.00	0.32	
31						

Cartridge & Bag Filtration	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back) <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No

<b>Notes:</b> 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: Jonathan Woody
	SIGNATURE: <i>Jonathan Woody</i> DATE: 7-10-22
	PHONE #: (541) 643-6137 CERT #: 7232

<sup>1</sup> 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:	Horseshoe Bend CG	ID#: 41	94179	Month/Year:	Jun-22	Disinfection Giardia Log Inactiv:	1
--------------	-------------------	---------	-------	-------------	--------	---	---

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>2</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.53	140	214.2	9.1	7.80	57.7	YES	40
2	1.5	140	210.0	9.9	6.90	39.7	YES	40
3	0.58	140	81.2	9.5	6.90	36.8	YES	40
4	0.48	140	67.2	9.4	6.80	35.4	YES	40
5	0.98	140	137.2	7.9	7.00	44.2	YES	40
6	0.76	140	106.4	8.1	7.20	45.6	YES	40
7	1.35	140	189.0	10.2	6.80	37.0	YES	40
8	1.42	140	198.8	8.9	6.90	42.0	YES	40
9	1.17	140	163.8	9.0	6.90	40.5	YES	40
10	0.74	140	103.6	9.5	7.00	38.7	YES	40
11	0.54	140	75.6	10.8	6.80	32.5	YES	40
12	0.7	140	98.0	11.3	6.80	32.1	YES	40
13	1.14	140	159.6	9.2	6.80	38.5	YES	40
14	0.35	140	49.0	8.1	6.90	39.2	YES	40
15	0.41	140	57.4	8.9	6.90	37.5	YES	40
16	0.35	140	49.0	10.3	6.80	32.9	YES	40
17	0.41	140	57.4	8.3	7.40	46.4	YES	40
18	1.07	140	149.8	8.6	7.00	42.6	YES	40
19	1.03	140	144.2	9.9	7.10	40.4	YES	40
20	1.11	140	155.4	8.9	6.80	39.2	YES	40
21	0.94	140	131.6	11.4	7.30	38.8	YES	40
22	0.79	140	110.6	11.4	7.20	36.9	YES	40
23	0.94	140	131.6	11.3	7.30	39.1	YES	40
24	0.9	140	126.0	10.6	7.10	38.0	YES	40
25	1.06	140	148.4	11.8	6.90	33.4	YES	40
26	1.13	140	158.2	12.6	6.80	30.1	YES	40
27	1.04	140	145.6	12.7	7.10	33.1	YES	40
28	1.02	140	142.8	12.6	7.10	33.3	YES	40
29	0.81	140	113.4	13.1	7.00	30.3	YES	40
30	1.08	140	151.2	13.3	7.08	31.7	YES	40
31		28						40

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

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

Revised July 2018