

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: AUG 7 2024

DAY	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the Day [NTU]
1	95-95=0	95-92=3	87-73=14	15	.15	
2	95-95=0	95-90=5	87-73=14	15	.23	
3	96-95=0	96-90=6	88-74=14	15	.16	
4	101-100=1	98-90=8	88-74=14	15	.16	
5	102-100=2	99-86=13	87-73=14	15	.15	
6	102-100=2	80-80=0	81-73=8	15	.16	
7	90-80=10	80-80=0	79-73=6	15	.14	
8	89-79=10	80-79=1	79-71=8	15	.14	
9	84-82=2	84-84=0	82-75=7	15	.13	
10	81-79=2	81-80=1	81-73=8	15	.14	
11	82-79=3	80-80=0	81-72=9	15	.14	
12	82-79=3	81-80=1	80-71=9	15	.15	
13	80-80=0	81-80=1	80-72=8	15	.12	
14	80-80=0	80-80=0	80-71=9	15	.15	
15	81-80=1	81-81=0	80-71=9	15	.15	
16	82-80=2	81-81=0	80-71=9	15	.14	
17	81-80=1	81-80=1	79-70=9	15	.14	
18	85-80=5	82-80=2	79-70=9	15	.15	
19	86-80=6	82-80=2	79-70=9	15	.14	
20	87-81=6	82-80=2	79-71=8	15	.20	
21	84-81=3	80-78=2	76-78=6	15	.13	
22	92-80=12	80-77=3	76-70=6	15	.15	
23	94-81=13	80-77=3	76-70=6	15	.13	
24	88-85=3	86-80=6	79-71=8	15	.18	
25	90-89=1	89-80=9	79-71=8	15	.17	
26	91-89=2	89-80=9	79-71=8	15	.18	
27	92-90=2	89-80=9	80-72=8	15	.17	
28	92-90=2	91-81=10	80-72=8	15	.17	
29	92-90=2	89-80=9	80-71=9	15	.21	
30	89-87=2	89-80=9	80-71=9	15	.19	
31	90-88=2	89-80=9	80-71=9	15	.20	

Cartridge Filtration % of daily turbidity readings ≤ 1 NTU? daily turbidity readings ≤ 5 NTU?	Yes/No <input checked="" type="radio"/> Yes / <input type="radio"/> No	Monthly Summary (Answer Yes or No)	
	Yes/No <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 the filter, at what PSID.	PRINTED NAME: <u>Eric Figueroa</u>	SIGNATURE: <u>[Signature]</u>	DATE: <u>9/4/24</u>
	PHONE #: <u>(541) 1671-7491</u>		CERT #: <u>7232</u>

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	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/	.56	140.9	78.9	15.8	7.0	24	YES	12
2/	.68	140.9	95.9	15.8	6.46	20	YES	12
3/	.61	140.9	86.0	15.1	6.62	24	YES	12
4/	.69	140.9	97.3	15.4	6.5A	24	YES	11.5
5/	.81	140.9	114.2	15.7	6.59	25	YES	11.5
6/	.63	140.9	88.8	14.4	6.59	37	YES	12
7/	.99	140.9	83.1	15.3	6.84	24	Yes	12
8/	.54	140.9	76.1	15.5	6.97	24	YES	13
9/	.61	140.9	85.9	13.9	6.49	31	Yes	12.5
10/	1.01	140.9	142.4	14.5	6.94	38	YES	12
11/	.70	140.9	98.7	15.0	6.82	24	YES	12.5
12/	.68	140.9	95.9	15.1	6.67	24	YES	12.5
13/	.72	140.9	101.4	15.0	6.64	31	Yes	12
14/	.69	140.9	119.7.2	14.5	6.77	37	Yes	12.5
15/	.74	140.9	104.2	13.6	6.9	37	YES	12
16/	.99	140.9	139.6	14.4	6.82	37	YES	12.5
17/	1.11	140.9	156.5	14.6	6.92	37	YES	12.5
18/	1.16	140.9	163.6	13.7	7.11	46	YES	12.5
19/	1.02	140.9	143.8	13.6	7.18	46	YES	12.5
20/	1.07	140.9	150.9	14.2	7.27	46	YES	12
21/	.56	140.9	78.9	14.1	7.27	43	YES	11.5
22/	.93	140.9	131.1	14.2	6.83	37	YES	12
23/	1.06	140.9	149.5	12.5	6.84	38	YES	12
24/	1.01	140.9	142.4	13.3	7.13	46	YES	12
25/	1.13	140.9	159.3	12.2	7.18	46	YES	12
26/	1.13	140.9	159.3	13.8	6.63	38	YES	12
27/	1.14	140.9	160.7	13.3	6.87	38	YES	12
28/	1.07	140.9	150.8	12.9	7.06	46	YES	12
29/	1.11	140.9	156.5	13.1	6.88	38	YES	12
30/	1.02	140.9	143.8	13.5	6.99	38	YES	12
31/	1.11	140.9	156.5	13.8	6.88	38	YES	12

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