

OHA - Drinking Water Services - Turbidity Monitoring Report Form County:
 Slow Sand, Membrane, Diatomaceous Earth Filtration or Unfiltered Systems

System Name: Butte Creek Scout Ranch ID #: 419419 WTP-: _____ Month/Year: 11/2021

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day ¹ [NTU]
1							
2					.15		
3					.15		
4					.14		
5					.15		
6					.14		
7					.14		
8					.15		
9					.15		
10					.15		
11					.14		
12					.14		
13					.13		
14					.13		
15					.13		
16					.14		
17					.14		
18					.14		
19					.13		
20					.18		
21					.18		
22					.12		
23					.15		
24					.13		
25					.14		
26					.12		
27					.11		
28					.13		
29					.11		
30					.10		
31					.16		

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
Monthly Summary			
95% of daily turbidity readings ≤ 1 NTU? ² <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 Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	
Notes:		PRINTED NAME: <u>Bill Hood</u>	
		SIGNATURE: <u>Bill Hood</u>	DATE: <u>12-15-2021</u>
		PHONE #: <u>(503) 539-3834</u>	CERT #:

¹ Including continuous turbidity data, if applicable, for optimization recording purposes. Compliance values in columns "12 AM" through "8 PM" may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

System Name: Batte Creek Scout Ranch

ID #: 4194191

WTP: _____

Month/Year: 11/2021

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1/	.37	280	103	15.0	9.5	47	Y	4
2/	.35	280	98	14.5	9.5	70	Y	1.5
3/	.35	280	98	15.3	9.4	47	Y	1.6
4/	.34	280	95.2	15.9	9.4	47	Y	.98
5/	.38	280	106.4	15.3	9.5	47	Y	.91
6/	.45	280	126	13.9	9.5	70	Y	1.8
7/	.62	280	173.6	13.3	9.5	73	X	1.7
8/	.69	280	193.2	13.4	9.5	73	Y	2.8
9/	.71	280	198.8	10.9	9.5	75	Y	2.0
10/	.80	280	224	9.9	9.5	75	Y	3.1
11/	.82	280	229	10.7	9.5	75	Y	3.6
12/	.78	280	218	11	9.5	75	Y	6.5
13/	.70	280	196	11	9.5	75	Y	5.4
14/	.64	280	179	11.6	9.5	73	Y	5
15/	.63	280	176	11.4	9.5	73	Y	3.1
16/	.58	280	162	9.7	9.5	73	Y	3.1
17/	.55	280	154	8.5	9.5	73	Y	3.0
18/	.48	280	134	8.9	9.3	73	Y	3.2
19/	.98	280	249	11.1	9.5	78	Y	3
20/	1.32	280	369	12.1	9.5	78	Y	1.8
21/	1.21	280	338	10.6	9.5	78	Y	1.4
22/	1.19	280	333	10.9	9.5	78	Y	3.0
23/	1.06	280	280	12.1	9.5	78	Y	.98
24/	1.04	280	291.2	11.1	9.5	78	Y	.95
25/	.97	280	271	11.6	9.4	78	Y	2.3
26/	.93	280	260	9.4	9.4	78	Y	1.85
27/	.89	280	249	10.2	9.3	78	Y	1.8
28/	.83	280	232	10.2	9.3	78	Y	1.5
29/	.78	280	218	11	9.4	78	Y	1.2
30/	.76	280	212	12	8.5	78	Y	.90
31/								

³ If Cl₂ at entry point < 0.2 mg/l OR CT not met, notify DWS within 24 hours.

Download form at: public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/urb-alt-unfiltered.pdf Revised September 2016

Return by 10th of following month by email, fax, or mail to:
 dwp.dnce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350