

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

System Name: Butte Creek Sept Ranch ID #: _____ WTP: 94191 Month/Year: 3/2024

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					.08		
3					.08		
4					.09		
5					.09		
6					.09		
7					.09		
8					.09		
9					.08		
10					.08		
11					.08		
12					.08		
13					.08		
14					.08		
15					.09		
16					.09		
17					.10		
18					.10		
19					.10		
20					.09		
21					.11		
22					.10		
23					.10		
24					.11		
25					.11		
26					.11		
27					.11		
28					.12		
29					.11		
30					.12		
31					.15		

Slow Sand/Membrane/DE Filtration/Unfiltered Monthly Summary		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No All daily turbidity readings ≤ 5 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 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>4/6/2024</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 #:

9419

WTP.:

Month/Year:

3/2024

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ³ [^]	Contact Time (T)	Actual CT	Temp ^γ	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/	.33	280	92.4	6.6	7.3	55	Y	1.0
2/	.31	280	86	6.3	7.4	55	Y	1.9
3/	.40	280	112	6.1	7.4	55	Y	1.6
4/	.49	280	137	6.0	7.4	57	Y	1.0
5/	.56	280	156	6.0	7.4	57	Y	1.0
6/	.62	280	173	5.8	7.4	57	Y	1.3
7/	.62	280	173	5.7	7.4	57	Y	1.0
8/	.59	280	165	5.8	7.4	57	Y	.95
9/	.65	280	182	6.6	7.4	58	Y	1.5
10/	.62	280	173	6.9	7.4	58	Y	1.6
11/	.69	280	193	6.9	7.4	58	Y	1.3
12/	.69	280	193	7.1	7.5	58	Y	1.1
13/	.67	280	187	6.7	7.4	58	Y	.9
14/	.69	280	193	6.8	7.4	58	Y	1.1
15/	.64	280	179	7.5	7.4	58	Y	1.3
16/	.60	280	168	8.3	7.5	57	Y	1.9
17/	.53	280	148	8.6	7.4	57	Y	1.7
18/	.49	280	137	9.0	7.5	57	Y	1.0
19/	.45	280	126	9.1	7.5	57	Y	1.6
20/	.44	280	123	9.5	7.4	57	Y	1.0
21/	.40	280	112	9.8	7.4	55	Y	1.6
22/	.38	280	95	9.3	7.4	55	Y	1.0
23/	.41	280	114	9.4	7.5	55	Y	1.8
24/	.44	280	123	9.2	7.5	57	Y	1.3
25/	.42	280	117	9.2	7.5	57	Y	1.2
26/	.40	280	112	9.2	7.5	55	Y	1.4
27/	.41	280	114	9.1	7.5	55	Y	1.1
28/	.38	280	106	8.8	7.5	55	Y	1.3
29/	.39	280	109	8.9	7.5	55	Y	1.6
30/	.39	280	109	8.7	7.4	55	Y	1.7
31/	.39	280	109	8.7	7.4	55	Y	1.1

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

Revised September 2016

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

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