

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

System Name: Batte Creek Scout Ranch ID #: 94191 WTP-: _____ Month/Year: 10/24

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

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>	
PHONE #: <u>(503) 539-3834</u>		DATE: <u>11-9-2024</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 #:

94191

WTP-:

Month/Year:

10/24

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/	.42	280	117.6	13.4	6.8	36	Y	2.7
2/	.42	280	117.6	13.4	6.8	36	Y	2.7
3/	.44	280	123.2	12.7	6.8	36	Y	2.8
4/	.46	280	128.8	12.5	6.8	36	Y	3.1
5/	.45	280	126	12.3	6.8	36	Y	5.5
6/	.52	280	145.6	12.3	6.8	36	Y	2.0
7/	.52	280	145.6	12.5	6.6	36	Y	2.0
8/	.57	280	159.6	12.7	6.6	36	Y	.96
9/	.56	280	156.8	12.8	6.6	36	Y	1.2
10/	.58	280	162.4	12	6.6	36	Y	1.3
11/	.61	280	170.8	12	6.6	36	Y	1.6
12/	.62	280	173.6	12	6.6	37	Y	1.9
13/	.61	280	170.8	12	6.8	37	Y	1.6
14/	.56	280	156.8	12.5	6.8	36	Y	1.6
15/	.65	280	156.8	12.8	6.8	37	Y	1.1
16/	.86	280	240.8	12.7	6.8	37	Y	1.7
17/	.84	280	235.2	12.2	6.8	37	Y	2.6
18/	.78	280	218.4	11.6	6.9	37	Y	1.5
19/	.75	280	210	12.6	6.8	37	Y	2.8
20/	.72	280	201.6	12.3	6.8	37	Y	1.9
21/	.68	280	190.4	12.2	6.9	37	Y	1.3
22/	.67	280	187.6	11.4	6.9	37	Y	1.2
23/	.63	280	176.4	11.2	6.9	37	Y	1.2
24/	.61	280	170.8	10.4	6.9	37	Y	1.3
25/	.63	280	176.4	10.4	6.8	37	Y	1.7
26/	.61	280	170.8	11.8	6.9	37	Y	3.2
27/	.59	280	165.2	11.5	7.0	36	Y	3.2
28/	.55	280	154	11.1	7.0	36	Y	1.4
29/	.52	280	145.6	10.9	6.9	36	Y	1.3
30/	.50	280	140	10.4	7.1	36	Y	1.2
31/	.48	280	134.4	10.3	7.0	36	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