

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 #: 4194191 WTP-: _____ Month/Year: 8/2021

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

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	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>B. H. Hood</u>	
		SIGNATURE: <u>B. Hood</u>	DATE: <u>9/9/2021</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:

Butte Creek Scout Ranch

ID #:

4194191

WTP-:

Month/Year:

8/2021

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/	.6	280	168	19	9.5	49	Y	6.6
2/	.6	280	168	19	9.5	49	Y	7.2
3/	.6	280	168	19	9.5	49	Y	5.7
4/	.5	280	140	19	9.5	49	Y	4.8
5/	.5	280	140	19	9.5	49	Y	7.0
6/	.5	280	140	19	9.5	49	Y	6.8
7/	.5	280	140	19	9.5	49	Y	10.6
8/	.5	280	140	18	9.5	49	Y	8.4
9/	.6	280	168	18	9.5	49	Y	5.9
10/	.6	280	168	18	9.5	49	Y	6.0
11/	.6	280	168	18	9.5	49	Y	5.8
12/	.6	280	168	19	9.5	49	Y	5.6
13/	.6	280	168	19	9.5	49	Y	5.4
14/	.6	280	168	19	9.5	49	Y	6.4
15/	.5	280	140	19	9.5	49	Y	8.5
16/	.5	280	140	19	9.5	49	Y	6.3
17/	.5	280	140	19	9.5	49	Y	3.6
18/	.5	280	140	18	9.5	49	Y	4.8
19/	.5	280	140	18	9.5	49	Y	4.9
20/	.5	280	140	18	9.5	49	Y	8.4
21/	.5	280	140	18	9.5	49	Y	6.3
22/	.5	280	140	17	9.5	49	Y	9.9
23/	.5	280	140	16	9.5	49	Y	7.4
24/	.5	280	140	16	9.5	49	Y	9.0
25/	.5	280	140	16	9.5	49	Y	7.4
26/	.5	280	140	17	9.5	49	Y	6.2
27/	.5	280	140	16	9.5	49	Y	4.3
28/	.4	280	112	16	9.5	47	Y	7.3
29/	.4	280	112	16	9.5	47	Y	7.3
30/	.4	280	112	16	9.5	47	Y	5.8
31/	.4	280	112	16	9.5	47	Y	4.2

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.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350