

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

System Name: Batte Creek Scott Ranch ID #: 94191 WTP-: _____ Month/Year: 4/2022

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

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
Monthly Summary			
95% of daily turbidity readings ≤ 1 NTU? ²	Yes / No All daily turbidity readings ≤ 5 NTU? Yes / No	CT's met everyday? (see back) Yes / No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? Yes / No
Notes:		PRINTED NAME: <u>Bill Hood</u>	
		SIGNATURE: <u>Bill Hood</u>	
		DATE: <u>5/16/2022</u>	CERT #:
		PHONE #: <u>(503) 539-3834</u>	

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: 4/2022

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/	.84	280	235	9.2	9.5	104	Y	9.7
2/	.85		238	9.4	9.5	104	Y	6.4
3/	.87		243	9.1	9.5	104	Y	4.9
4/	.86		240	9.0	9.5	104	Y	4.3
5/	.84		235	8.5	9.5	104	Y	2.4
6/	.83		232	8.4	9.5	104	Y	3.2
7/	.78		218	9.4	9.5	100	Y	7.1
8/	.71		198	9.5	9.6	100	Y	4.6
9/	.70		196	8.8	9.5	100	Y	4.1
10/	.68		190	8.2	9.5	100	Y	9.4
11/	.67		187	7.6	9.5	100	Y	3.2
12/	.67		187	7.6	9.5	100	Y	3.8
13/	.63		176	7.0	9.5	100	Y	3.6
14/	.60		168	6.9	9.5	100	Y	3.5
15/	.60		168	6.9	9.5	97	Y	4.0
16/	.59		165	7	9.5	97	Y	4.6
17/	.56		156	7.2	9.5	97	Y	2.3
18/	.56		156	7.7	9.5	97	Y	4.8
19/	.54		151	7.5	9.5	97	Y	6.1
20/	.52		145	7.4	9.5	97	Y	3.1
21/	.48		134	8	9.5	97	Y	6.6
22/	.46		128	8	9.5	97	Y	3.9
23/	.49		137	8.7	9.5	97	Y	4.5
24/	.63		176	8.9	9.5	100	Y	5.2
25/	.66		184	9.3	9.6	100	Y	3.3
26/	.65		182	9.2	9.6	100	Y	3.5
27/	.64		179	9.3	9.6	100	Y	3.2
28/	.60		168	9.1	9.5	100	Y	2.8
29/	.59		165	9.4	9.6	100	Y	3.5
30/	.56	280	156	9.7	9.6	100	Y	3.5
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