

OHA - Drinking Water Program – Turbidity Monitoring Report Form County: Douglas
Conventional or Direct Filtration

System Name: ROSEBURG FOREST PROD - DILLARD ID #: OR4194300 WTP: WTP-A Month/Year: 5/2025

DAY	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the Day [NTU]
1	OFF	OFF	.047	OFF	.046	OFF	.047
2	OFF	OFF	.037	OFF	.040	OFF	.040
3	OFF	OFF	.150	OFF	OFF	OFF	.150
4	OFF	OFF	.047	OFF	OFF	OFF	.047
5	OFF	OFF	.041	.044	OFF	OFF	.044
6	OFF	OFF	.047	OFF	.047	OFF	.047
7	OFF	OFF	.047	.050	OFF	OFF	.050
8	OFF	OFF	.043	OFF	.045	OFF	.045
9	OFF	OFF	.040	OFF	.040	OFF	.040
10	OFF	OFF	.040	OFF	OFF	OFF	.040
11	OFF	OFF	.037	OFF	OFF	OFF	.037
12	OFF	OFF	.037	OFF	.041	OFF	.041
13	OFF	OFF	.037	OFF	.039	OFF	.039
14	OFF	OFF	.037	OFF	.038	OFF	.038
15	OFF	OFF	.036	OFF	.038	OFF	.038
16	OFF	OFF	.142	OFF	.049	OFF	.142
17	OFF	OFF	.044	OFF	OFF	OFF	.044
18	OFF	OFF	.041	OFF	OFF	OFF	.041
19	OFF	OFF	.042	OFF	.044	.047	.047
20	OFF	.054	.049	OFF	.045	.046	.054
21	OFF	.046	.045	OFF	.043	OFF	.045
22	OFF	OFF	.036	OFF	.038	OFF	.038
23	OFF	OFF	.037	OFF	.039	OFF	.039
24	OFF	.039	OFF	OFF	OFF	OFF	.039
25	OFF	.048	OFF	.043	OFF	OFF	.048
26	OFF	OFF	.040	OFF	OFF	OFF	.040
27	OFF	OFF	.039	OFF	.043	OFF	.043
28	OFF	OFF	.039	OFF	.044	OFF	.044
29	OFF	OFF	.039	OFF	.043	OFF	.043
30	OFF	OFF	.039	.095	OFF	OFF	.095
31	OFF	OFF	.044	OFF	OFF	OFF	.044

Conventional or Direct Filtration 95% of the 4-hour turbidity readings $\leq$ 0.3 NTU? ☒ Yes / No All the 4-hour turbidity readings $\leq$ 1 NTU? ☒ Yes / No All turbidity readings < IFC ² triggers? ☒ Yes / No ²		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) ☒ Yes / No All Cl ₂ residuals at entry point $\geq$ 0.2 mg/l? ☒ Yes / No	
Notes: 		PRINTED NAME: Robert Fowler	
		SIGNATURE: Robert Fowler	DATE: 6-3-25
		PHONE #: (541) 1679-2549	CERT #: T-08679 D-08666

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 IFE = Individ. Filter Eff. (OAR 333-061-0040(1)(e)(B&C))

OHA - Drinking Water Program - Surface Water Quality Data Form

ROSEBURG FOREST PROD - DILLARD ID #: OR4194300 WTP: WTP-A Month/Year: 5/2025

Required Log Inactivation: 0.4

Date / Time	Minimum Cl ₂ Residual at 1 st User (C) ¹	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ²	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		Use tables	Yes / No	[GPM]
1 8:00 AM	.89	224	199	19.6	7.33	15	Yes	6.7
2 8:00 AM	.94	224	210	19.6	7.24	15	Yes	6.7
3 8:00 AM	.99	224	221	19.6	7.23	15	Yes	6.7
4 8:00 AM	1.16	224	259	19.2	7.21	15	Yes	6.7
5 8:00 AM	.98	224	219	19.0	7.16	15	Yes	6.7
6 8:00 AM	.91	224	203	19.2	7.12	15	Yes	6.7
7 8:00 AM	.85	224	190	19.4	7.17	15	Yes	6.7
8 8:00 AM	.81	224	181	19.5	7.16	15	Yes	6.7
9 8:00 AM	.82	224	183	19.5	7.12	15	Yes	6.7
10 8:00 AM	.80	224	183	19.6	7.08	12	Yes	6.7
11 8:00 AM	.78	224	174	20.0	6.99	9	Yes	6.7
12 8:00 AM	.83	224	185	20.0	6.98	9	Yes	6.7
13 8:00 AM	.94	224	210	20.0	6.98	9	Yes	6.7
14 8:00 AM	.88	224	197	20.1	6.97	9	Yes	6.7
15 8:00 AM	.85	224	190	20.2	7.03	9	Yes	6.7
16 8:00 AM	.83	224	185	20.2	7.07	9	Yes	6.7
17 8:00 AM	.98	224	219	19.9	6.93	13	Yes	6.7
18 8:00 AM	.90	224	201	19.9	6.90	13	Yes	6.7
19 8:00 AM	.92	224	206	19.9	6.89	13	Yes	6.7
20 8:00 AM	.97	224	217	19.6	7.04	13	Yes	6.7
21 8:00 AM	1.10	224	246	19.2	7.01	13	Yes	6.7
22 8:00 AM	1.01	224	226	19.2	7.02	13	Yes	6.7
23 8:00 AM	.93	224	208	19.5	6.99	13	Yes	6.7
24 8:00 AM	.86	224	192	19.5	7.01	12	Yes	6.7
25 8:00 AM	.80	224	179	19.7	7.02	12	Yes	6.7
26 8:00 AM	.72	224	161	19.7	7.03	12	Yes	6.7
27 8:00 AM	.74	224	165	19.8	7.03	12	Yes	6.7
28 8:00 AM	.88	224	197	20.0	7.04	9	Yes	6.7
29 8:00 AM	1.14	224	255	20.0	7.01	9	Yes	6.7
30 8:00 AM	1.16	224	259	20.0	7.03	9	Yes	6.7
31 8:00 AM	.98	224	219	20.7	7.03	9	Yes	6.7

¹ If Cl₂ at entry point < 0.2 mg/L, OR CT not met, notify DWP by end of next business day.

Download form at: www.public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-conv-direct.pdf