OHA - Drinking Water Services - Surface Water Quality Data Form

Cartridge or Bag Filtration

County: Curry

Month/Year: May-22

System Name: Whaleshead Resort & RV Park **ID#:** 41-94489 **WTP ID:** A **TP-** Lower

Day	PSI Before Filter	PSI After Filter	PSID	Change Filter ALERT (max is 30 psid)	Daily Turbidity Reading [NTU]	Highest Reading of the day [1] [NTU]
1	16	10	6	OK	0.46	
2	16	10	6	OK	0.50	
3	17	10	7	OK	0.77	
4	18	10	8	OK	0.80	
5	18	10	8	OK	0.85	
6	19	10	9	OK	0.70	
7	20	10	10	OK	0.80	
8	22	10	12	OK	0.57	
9	24	10	14	OK	0.61	
10	24	10	14	OK	0.70	
11	24	10	14	OK	0.80	
12	25	10	15	OK	0.72	
13	25	10	15	OK	0.39	
14	25	10	15	OK	0.60	
15	26	10	16	OK	0.70	
16	15	10	5	OK	0.61	
17	15	10	5	OK	0.51	
18	16	10	6	OK	0.49	
19	16	10	6	OK	0.51	
20	16	10	6	OK	0.60	
21	16	10	6	OK	0.61	
22	16	10	6	OK	0.85	
23	17	10	7	OK	0.74	
24	17	10	7	OK	0.60	
25	17	10	7	OK	0.69	
26	17	10	7	OK	0.51	
27	18	10	9	OK	0.60	
28	18	10	8	OK	0.51	
29	18	10	8	OK	0.24	
30	18	10	8	OK	0.34	
31	18	10	8	OK	0.40	

95% of daily turbidity readings ≤ 1 NTU?	**Yes**
All daily turbidity readings ≤ 5 NTU?	**Yes**

Monthly Summary (Answer Yes or No)

CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
Yes	**Yes**

Notes: PSI = pounds per square inch

PSID = pounds per square inch difference (before filter - after filter)

PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID. (*30 Harmsco)*

PRINTED NAME: Dave Terrusa

SIGNATURE: /S/ Dave Terrusa **2-Jun-22**

PHONE #: (541) 253-7556 **CERT #: 6930**

1 Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not correspond to continuous readings' maximum.

This form Modified 12/12/2019

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- : **A**

System Name:	**Whaleshead Resort & RV Park**	**ID#: 41-94489**	**Month/Year:**	**May-22**	**Disinfection *Giardia* Log Inactiv:**	**0.5**

Date / Time	Minimum Cl_2 Residual at 1st User (**C**) [2]	Contact Time (**T**)	Actual CT	Temp	pH	Required CT	CT Met? [2]	Peak Hourly Demand Flow
Daily @ 09:00	[ppm or mg/L]	[minutes]	**C X T**	[° C]		formula	Yes / No	[GPM]
1	1.57	60	94.2	13.1	7.20	17.8	YES	
2	1.43	60	85.8	13.0	7.20	17.6	YES	
3	1.47	60	88.2	13.4	7.30	17.9	YES	
4	1.29	60	77.4	13.1	7.30	17.9	YES	
5	1.41	60	84.6	12.9	7.20	17.7	YES	
6	1.37	60	82.2	12.8	7.20	17.7	YES	
7	1.55	60	93.0	14.3	7.20	16.4	YES	
8	1.31	60	78.6	13.5	7.10	16.2	YES	
9	1.05	60	63.0	14.0	7.00	14.6	YES	
10	1.21	60	72.6	13.8	7.00	15.1	YES	
11	1.07	60	64.2	13.1	7.00	15.6	YES	
12	1.19	60	71.4	13.4	6.90	14.9	YES	
13	1.49	60	89.4	14.4	6.90	14.4	YES	
14	1.08	60	64.8	15.4	6.80	12.4	YES	
15	1.01	60	60.6	15.0	6.80	12.7	YES	
16	1.10	60	66.0	15.3	6.80	12.5	YES	
17	1.23	60	73.8	15.0	6.70	12.5	YES	
18	1.14	60	68.4	15.2	6.70	12.2	YES	
19	1.20	60	72.0	15.4	6.60	11.7	YES	
20	1.09	60	65.4	13.9	6.70	13.2	YES	
21	1.01	60	60.6	11.0	6.80	16.9	YES	
22	1.42	60	85.2	14.1	6.90	14.6	YES	
23	1.38	60	82.8	13.9	6.80	14.2	YES	
24	1.39	60	83.4	13.9	6.90	14.8	YES	
25	1.19	60	71.4	13.7	6.90	14.6	YES	
26	1.20	60	89.4	13.9	6.90	14.5	YES	
27	1.19	60	71.4	13.8	6.90	14.5	YES	
28	1.49	60	89.4	14.0	7.00	15.4	YES	
29	1.01	60	60.6	14.6	7.10	14.5	YES	
30	1.09	60	65.4	14.8	7.20	15.0	YES	
31	1.17	60	70.2	14.7	7.20	15.3	YES	

[2] If Cl2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised 7/4/2020 PAX

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

Digitally signed by Dave Terrusa
DN: cn=Dave Terrusa, c=US, o=H2o System Consulting, ou=DRC, email=treatment6930@gmail.com
Reason: I have reviewed this document
Location: (541) 253-7556
Date: 2022.06.02 15:36:51 -07'00'