

OHA - Drinking Water Services - Surface Water Quality Data Form						County:	Curry
Cartridge or Bag Filtration						Month/Year:	Feb-22
System Name:		Whaleshead RV Park & Resort		ID#:	41-94489		WTP ID: B TP- Upper
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	20	10	10	OK	0.40		
2	20	10	10	OK	0.55		
3	21	10	11	OK	0.60		
4	21	10	11	OK	0.40		
5	13	10	3	OK	0.60		
6	15	10	5	OK	0.57		
7	16	10	6	OK	0.60		
8	16	10	6	OK	0.51		
9	16	10	6	OK	0.52		
10	17	10	7	OK	0.69		
11	17	10	7	OK	0.51		
12	18	10	8	OK	0.50		
13	18	10	8	OK	0.67		
14	19	10	9	OK	0.64		
15	20	10	10	OK	0.51		
16	21	10	11	OK	0.49		
17	22	10	12	OK	0.59		
18	23	10	13	OK	0.52		
19	24	10	14	OK	0.44		
20	25	10	15	OK	0.58		
21	15	10	5	OK	0.69		
22	15	10	5	OK	0.72		
23	15	10	5	OK	0.58		
24	16	10	6	OK	0.24		
25	16	10	6	OK	0.49		
26	17	10	7	OK	0.53		
27	17	10	7	OK	0.50		
28	17	10	7	OK	0.63		
29	0	10	-10	OK	0.00		
30	0	10	-10	OK	0.00		
31	0	10	-10	OK	0.00		
Cartridge & Bag Filtration					Monthly Summary (Answer Yes or No)		
95% of daily turbidity readings ≤ 1 NTU?				Yes	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?	
All daily turbidity readings ≤ 5 NTU?				Yes	Yes	Yes	
Notes: PSI = pounds per square inch					PRINTED NAME: Dave Terrusa		

PSID = pounds per square inch difference (before filter - after filter)	SIGNATURE: /S/ Dave Terrusa	
PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID. (30 psi Harmsco)	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 7/4/2020*

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OHA - Drinking Water Services - Surface Water Quality Data Form					WTP- :	B
System Name:	Whaleshead RV Park & Resort	ID#: 41-94489	Month/Year:	Feb-22	Disinfection Giardia Log Inactiv:	0.5

Date / Time	Minimum Cl2 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	1.43	132	188.8	13.2	7.00	16.1	YES	
2	1.62	132	213.8	13.0	7.10	17.3	YES	
3	1.71	132	225.7	13.1	7.00	16.8	YES	
4	1.38	132	182.2	12.8	6.90	15.9	YES	
5	1.15	132	151.8	12.4	6.90	16.2	YES	
6	1.21	132	159.7	12.0	6.80	16.2	YES	
7	1.32	132	174.2	12.4	6.70	15.5	YES	
8	1.42	132	187.4	11.9	6.80	16.7	YES	
9	1.27	132	167.6	12.6	6.80	15.3	YES	
10	1.39	132	183.5	12.1	6.70	15.9	YES	
11	1.52	132	200.6	12.3	6.60	15.4	YES	
12	1.47	132	194.0	12.6	6.20	12.5	YES	
13	1.31	132	172.9	12.9	6.20	12.1	YES	
14	1.24	132	163.7	12.1	6.30	13.7	YES	
15	1.58	13.3	21.0	12.3	6.40	14.5	YES	
16	1.62	132	213.8	12.0	6.50	15.3	YES	
17	1.49	132	196.7	12.6	6.60	14.6	YES	
18	1.38	132	182.2	13.0	6.70	14.5	YES	
19	1.24	132	163.7	12.6	6.80	15.3	YES	
20	1.17	132	154.4	12.2	6.80	15.9	YES	
21	1.31	132	172.9	12.5	6.90	16.1	YES	
22	1.43	132	188.8	12.0	7.00	17.8	YES	
23	1.52	132	200.6	12.4	7.00	17.5	YES	
24	1.57	132	207.2	13.4	7.00	16.2	YES	
25	1.38	132	182.2	12.6	7.00	16.7	YES	
26	1.24	132	163.7	12.6	7.10	17.0	YES	
27	1.17	132	154.4	12.2	7.10	17.7	YES	

28	1.27	132	167.6	12.4	7.10	17.6	YES	
29		132		13.5	7.10			
30		132		13.9	7.10			
31		132		13.4	7.10			

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