

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Curry

Cartridge or Bag Filtration

Month/Year: Sep-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	0.50	
2	20	10	10	OK	0.41	
3	20	10	10	OK	0.30	
4	20	10	10	OK	0.45	
5	21	10	11	OK	0.59	
6	21	10	11	OK	0.60	
7	21	10	11	OK	0.51	
8	21	10	11	OK	0.40	
9	22	10	12	OK	0.37	
10	22	10	12	OK	0.65	
11	23	10	13	OK	0.65	
12	23	10	13	OK	0.60	
13	23	10	13	OK	0.62	
14	24	10	14	OK	0.69	
15	24	10	14	OK	0.63	
16	25	10	15	OK	0.56	
17	25	10	15	OK	0.70	
18	25	10	15	OK	0.79	
19	25	10	15	OK	0.50	
20	25	11	14	OK	0.48	
21	25	11	14	OK	0.30	
22	26	11	15	OK	0.40	
23	26	11	15	OK	0.42	
24	26	11	15	OK	0.18	
25	27	11	16	OK	0.05	
26	27	11	16	OK	0.20	
27	27	11	16	OK	0.41	
28	25	11	14	OK	0.50	
29	30	11	19	OK	0.60	
30	10	5	5	OK	0.51	
31		10		Change Filter		
0.7				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:				PRINTED NAME: Dave Terrusa		
				SIGNATURE: /S/ Dave Terrusa		10/3/2022
				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 notcorrespond to continuous readings' maximum. **This form Modified 3/6/2022**

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :

B

System Name:

Whaleshead RV Park & Resort

ID#: 41-94489

Month/Year:

Sep-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	1.07	132	141.2	13.3	6.60	13.3	YES	
2	1.09	132	143.9	13.8	6.60	12.8	YES	
3	1.10	132	145.2	13.3	6.50	12.8	YES	
4	1.01	132	133.3	13.9	6.50	12.2	YES	
5	1.00	132	132.0	13.5	6.40	12.0	YES	
6	1.01	132	133.3	13.5	6.50	12.5	YES	
7	1.09	132	143.9	13.5	6.50	12.6	YES	
8	1.01	132	133.3	13.6	6.60	12.9	YES	
9	1.09	132	143.9	13.9	6.60	12.8	YES	
10	1.01	132	133.3	14.0	6.50	12.1	YES	
11	1.01	132	133.3	13.9	6.50	12.2	YES	
12	1.05	132	138.6	13.7	6.60	12.9	YES	
13	1.10	132	145.2	14.0	6.60	12.7	YES	
14	1.19	132	157.1	13.4	6.70	13.9	YES	
15	1.09	132	143.9	13.4	6.70	13.7	YES	
16	1.04	132	137.3	13.5	6.80	14.0	YES	
17	1.01	132	133.3	13.0	6.70	13.9	YES	
18	1.67	132	220.4	12.9	6.70	15.1	YES	
19	1.43	132	188.8	13.0	6.70	14.6	YES	
20	1.27	132	167.6	13.1	6.60	13.7	YES	
21	1.21	132	159.7	13.2	6.60	13.6	YES	
22	1.19	132	157.1	13.4	6.70	13.9	YES	
23	1.09	132	143.9	13.3	6.70	13.8	YES	
24	1.01	132	133.3	13.2	6.60	13.3	YES	
25	1.01	132	133.3	13.3	6.70	13.7	YES	
26	1.07	132	141.2	13.1	6.70	13.9	YES	
27	1.18	132	155.8	13.3	6.60	13.4	YES	
28	1.17	132	154.4	13.6	6.60	13.1	YES	
29	1.23	132	162.4	13.3	6.70	14.0	YES	
30	1.48	132	195.4	13.5	6.70	14.2	YES	
31		132						

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

Revised 3/6/2022 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