

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Jun-24

System Name: Lake Selmac - Keller's Landing ID#: 41 WTP ID: 94645 TP-

Day	PSI Before Filter	PSI After Filter	PSID	PSID When to Change Filter	Daily Turbidity Reading [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
1	55	55	0	25	0.028	0.028
2	55	55	0	25	0.022	0.022
3	55	55	0	25	0.025	0.025
4	55	55	0	25	0.025	0.025
5	54	54	0	25	0.027	0.027
6	56	56	0	25	0.024	0.024
7	55	55	0	25	0.024	0.024
8	56	56	0	25	0.026	0.026
9	56	56	0	25	0.022	0.022
10	56	56	0	25	0.027	0.027
11	57	57	0	25	0.047	0.047
12	52	52	0	25	0.029	0.029
13	56	56	0	25	0.024	0.024
14	55	55	0	25	0.031	0.031
15	55	55	0	25	0.028	0.028
16	52	52	0	25	0.049	0.049
17	55	55	0	25	0.028	0.028
18	55	55	0	25	0.028	0.028
19	54	54	0	25	0.028	0.028
20	55	55	0	25	0.031	0.031
21	54	54	0	25	0.026	0.026
22	56	56	0	25	0.037	0.037
23	55	55	0	25	0.023	0.023
24	57	57	0	25	0.023	0.023
25	56	56	0	25	0.025	0.025
26	55	55	0	25	0.033	0.033
27	54	54	0	25	0.029	0.029
28	55	55	0	25	0.049	0.049
29	55	55	0	25	0.250	0.250
30	52	52	0	25	0.028	0.028
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Cartridge & Bag Filtration	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU?	Yes	CT's met everyday? (see back)
All daily turbidity readings ≤ 5 NTU?	Yes	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.

PRINTED NAME: \_\_\_\_\_

SIGNATURE: \_\_\_\_\_ DATE: \_\_\_\_\_

PHONE #: ( ) \_\_\_\_\_ CERT #: 2379

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

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP-: 94645

<b>System Name:</b> Lake Selmac - Keller's Landing	<b>ID#: 41</b>	<b>Month/Year:</b> Jun-24	<b>Disinfection <i>Giardia</i> Log Inactiv:</b> 0.5
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Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>2</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>2</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.1	86.98412698	95.7	19	8.8	20.5	YES	6.3
2	2.1	141.9689119	298.1	22	8.8	18.8	YES	3.86
3	1.8	148.9130435	268.0	21	8.7	18.8	YES	3.68
4	1.3	96.14035088	125.0	18	8.4	19.4	YES	5.7
5	1.0	91.33333333	91.3	19	8.3	16.9	YES	6
6	1.5	84.30769231	126.5	20	8.3	16.7	YES	6.5
7	1.3	79.42028986	103.2	20	8.5	17.6	YES	6.9
8	1.3	86.98412698	113.1	22	8.6	16.0	YES	6.3
9	2.1	137	287.7	24	8.1	12.7	YES	4
10	1.3	109.6	142.5	22	8.9	17.9	YES	5
11	1.0	137	137.0	22	8.8	16.6	YES	4
12	1.6	84.30769231	134.9	22	9.1	19.9	YES	6.5
13	2.0	156.5714286	313.1	24	9.2	18.9	YES	3.5
14	1.6	78.28571429	125.3	21	8.9	19.7	YES	7
15	1.4	78.28571429	109.6	20	9.0	21.4	YES	7
16	1.5	78.28571429	117.4	22	8.9	18.3	YES	7
17	1.4	78.28571429	109.6	20	8.9	20.6	YES	7
18	1.3	91.33333333	118.7	18	8.8	22.4	YES	6
19	1.6	84.30769231	134.9	19	8.8	21.7	YES	6.5
20	1.5	99.63636364	149.5	20	8.9	20.9	YES	5.5
21	1.6	84.30769231	134.9	22	9.0	19.2	YES	6.5
22	1.5	86.98412698	130.5	22	8.9	18.3	YES	6.3
23	1.4	149.3188011	209.0	24	9.0	16.4	YES	3.67
24	2.1	146.9168901	308.5	22	8.9	19.6	YES	3.73
25	1.9	156.1253561	296.6	23	8.8	17.2	YES	3.51
26	1.6	140.1534527	224.2	23	8.7	16.1	YES	3.91
27	1.7	146.9168901	249.8	22	9.0	19.4	YES	3.73
28	1.4	78.28571429	109.6	22	8.9	18.1	YES	7
29	1.6	84.30769231	134.9	23	8.9	17.3	YES	6.5
30	1.0	91.33333333	91.3	22	8.8	16.6	YES	6
31								

<sup>2</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify

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Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350