

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Oct-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	0.025	0.025
2	53	53	0	25	0.025	0.025
3	50	50	0	25	0.021	0.021
4	55	55	0	25	0.025	0.025
5	55	55	0	25	0.026	0.026
6	54	54	0	25	0.031	0.031
7	55	55	0	25	0.026	0.026
8	50	50	0	25	0.020	0.020
9	50	50	0	25	0.020	0.020
10	55	55	0	25	0.023	0.023
11	53	53	0	25	0.032	0.032
12	55	55	0	25	0.025	0.025
13	55	55	0	25	0.026	0.026
14	54	54	0	25	0.027	0.027
15	48	48	0	25	0.025	0.025
16	50	50	0	25	0.019	0.019
17	50	50	0	25	0.024	0.024
18	53	53	0	25	0.020	0.020
19	51	51	0	25	0.019	0.019
20	55	55	0	25	0.021	0.021
21	51	51	0	25	0.016	0.016
22	54	54	0	25	0.025	0.025
23	53	53	0	25	0.022	0.022
24	54	54	0	25	0.023	0.023
25	52	52	0	25	0.061	0.061
26	54	54	0	25	0.018	0.018
27	55	55	0	25	0.025	0.025
28	52	52	0	25	0.021	0.021
29	52	52	0	25	0.018	0.018
30	55	55	0	25	0.025	0.025
31	55	55	0	25	0.029	0.029

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> Oct-24	<b>Disinfection Giardia Log Inactiv:</b>	<b>0.5</b>
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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	1.6	109.6	175.4	18.0	8.9	24.1	YES	5
2	1.5	124.5454545	186.8	18.0	9.1	25.6	YES	4.4
3	1.5	83.03030303	124.5	18.0	8.8	23.0	YES	6.6
4	1.6	99.63636364	159.4	18.0	8.7	22.4	YES	5.5
5	1.5	86.98412698	130.5	17.0	8.9	25.4	YES	6.3
6	1.5	85.625	128.4	17.0	8.9	25.4	YES	6.4
7	1.6	99.63636364	159.4	17.0	8.8	24.8	YES	5.5
8	1.1	92.88135593	102.2	16.0	8.4	21.6	YES	5.9
9	1.4	89.83606557	125.8	18.0	8.3	18.9	YES	6.1
10	1.4	166.0606061	232.5	18.0	8.9	23.5	YES	3.3
11	1.2	152.2222222	182.7	18.0	8.1	17.1	YES	3.6
12	1.3	130.4761905	169.6	17.0	8.9	24.9	YES	4.2
13	1.4	156.5714286	219.2	16.0	8.7	25.0	YES	3.5
14	1.3	119.1304348	154.9	17.0	8.9	24.9	YES	4.6
15	1.3	94.48275862	122.8	15.0	8.3	-0.4	YES	5.8
16	1.5	101.4814815	152.2	12.0	8.6	31.6	YES	5.4
17	1.7	111.8367347	190.1	16.0	8.0	20.0	YES	4.9
18	1.7	121.7777778	207.0	16.0	8.0	20.0	YES	4.5
19	1.7	111.8367347	190.1	16.0	7.8	18.6	YES	4.9
20	1.7	109.6	186.3	16.0	8.6	24.9	YES	5
21	1.7	103.3962264	175.8	13.0	7.8	22.6	YES	5.3
22	1.8	91.33333333	164.4	16.0	8.2	21.7	YES	6
23	1.6	137	219.2	13.0	8.8	32.3	YES	4
24	1.8	109.6	197.3	13.0	8.8	33.0	YES	5
25	1.6	137	219.2	11.0	8.5	33.0	YES	4
26	1.6	124.5454545	199.3	14.0	7.8	20.9	YES	4.4
27	1.7	121.7777778	207.0	14.0	8.8	30.6	YES	4.5
28	1.7	148.1081081	251.8	13.0	8.3	27.2	YES	3.7
29	1.6	116.5957447	186.6	12.0	8.0	25.7	YES	4.7
30	1.6	109.6	175.4	12.0	8.6	31.9	YES	5
31	1.8	91.33333333	164.4	12.0	8.6	32.7	YES	6

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

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

Revised November 2022