

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Jun-25

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 ¹ [NTU]
1	54	52	2	25	0.076	0.076
2	53	51	2	25	0.086	0.086
3	54	52	2	25	0.088	0.088
4	54	52	2	25	0.076	0.076
5	54	52	2	25	0.088	0.088
6	54	52	2	25	0.088	0.088
7	53	51	2	25	0.089	0.089
8	53	51	2	25	0.087	0.087
9	53	51	2	25	0.089	0.089
10	54	51	3	25	0.091	0.091
11	52	51	1	25	0.090	0.090
12	53	51	2	25	0.090	0.090
13	49	47	2	25	0.089	0.089
14	54	52	2	25	0.081	0.081
15	54	52	2	25	0.090	0.090
16	54	52	2	25	0.094	0.094
17	51	49	2	25	0.103	0.103
18	52	50	2	25	0.087	0.087
19	52	50	2	25	0.091	0.091
20	55	53	2	25	0.091	0.091
21	55	53	2	25	0.088	0.088
22	50	48	2	25	0.086	0.086
23	55	53	2	25	0.085	0.085
24	50	48	2	25	0.087	0.087
25	53	51	2	25	0.086	0.086
26	55	53	2	25	0.084	0.084
27	50	48	2	25	0.086	0.086
28	53	51	2	25	0.091	0.091
29	55	53	2	25	0.084	0.084
30	55	53	2	25	0.086	0.086
31				25		

Cartridge & Bag Filtration		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings $\leq$ 1 NTU?	Yes	CT's met everyday? (see back)	All Cl2 residual at entry point $\geq$ 0.2 mg/l?
All daily turbidity readings $\leq$ 5 NTU?	Yes	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

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.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- : 94645

System Name:	Lake Selmac - Keller's Landing	ID#: 41	Month/Year:	Jun-25	Disinfection <i>Giardia</i> Log Inactiv:	0.5
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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
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	1.4	176.7741935	247.5	18.0	8.5	20.3	YES	3.1
2	1.3	171.25	222.6	19.0	8.4	18.1	YES	3.2
3	1.4	219.2	306.9	20.0	8.6	18.5	YES	2.5
4	1.3	188.9655172	245.7	22.0	8.6	16.0	YES	2.9
5	1.2	228.3333333	274.0	21.0	8.3	15.1	YES	2.4
6	1.3	260.952381	339.2	21.0	8.5	16.5	YES	2.1
7	1.0	219.2	219.2	21.0	8.5	15.9	YES	2.5
8	1.4	238.2608696	333.6	22.0	8.6	16.2	YES	2.3
9	1.5	249.0909091	373.6	24.0	8.5	13.8	YES	2.2
10	2.2	219.2	482.2	26.0	8.9	15.2	YES	2.5
11	2.6	274	712.4	26.0	8.9	15.9	YES	2
12	1.7	99.63636364	169.4	21.0	8.4	16.6	YES	5.5
13	1.4	171.25	239.8	21.0	8.3	15.5	YES	3.2
14	1.3	260.952381	339.2	22.0	8.5	15.4	YES	2.1
15	1.3	188.9655172	245.7	22.0	8.3	14.3	YES	2.9
16	1.3	171.25	222.6	20.0	8.9	20.4	YES	3.2
17	2.1	176.7741935	371.2	20.0	8.7	20.7	YES	3.1
18	2.5	249.0909091	622.7	23.0	8.8	18.5	YES	2.2
19	1.0	99.63636364	99.6	21.0	8.6	16.5	YES	5.5
20	1.9	105.3846154	200.2	19.0	8.7	21.7	YES	5.2
21	1.6	107.4509804	171.9	17.0	8.6	23.0	YES	5.1
22	1.3	182.6666667	237.5	18.0	8.4	19.4	YES	3
23	1.1	78.28571429	86.1	19.0	7.8	14.2	YES	7
24	1.7	176.7741935	300.5	19.0	8.6	20.4	YES	3.1
25	1.3	195.7142857	254.4	21.0	8.6	17.1	YES	2.8
26	2.0	114.1666667	228.3	22.0	8.2	14.9	YES	4.8
27	2.0	228.3333333	456.7	22.0	7.9	13.4	YES	2.4
28	1.3	260.952381	339.2	22.0	8.2	13.8	YES	2.1
29	1.4	182.6666667	255.7	22.0	8.2	13.9	YES	3
30	1.3	156.5714286	203.5	21.0	8.3	15.3	YES	3.5
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² If Cl₂ at entry point < 0.2 mg/l or CT not met, notify

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

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