

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Sep-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	52	52	0	25	0.061	0.061
2	52	52	0	25	0.043	0.043
3	51	51	0	25	0.026	0.026
4	50	50	0	25	0.049	0.049
5	52	52	0	25	0.049	0.049
6	52	52	0	25	0.061	0.061
7	52	52	0	25	0.051	0.051
8	52	52	0	25	0.029	0.029
9	52	52	0	25	0.065	0.065
10	51	51	0	25	0.046	0.046
11	52	52	0	25	0.080	0.080
12	52	52	0	25	0.078	0.078
13	52	52	0	25	0.069	0.069
14	52	52	0	25	0.021	0.021
15	52	52	0	25	0.019	0.019
16	51	51	0	25	0.047	0.047
17	51	51	0	25	0.034	0.034
18	52	52	0	25	0.019	0.019
19	51	51	0	25	0.061	0.061
20	51	51	0	25	0.038	0.038
21	51	51	0	25	0.041	0.041
22	51	51	0	25	0.027	0.027
23	52	52	0	25	0.062	0.062
24	52	52	0	25	0.057	0.057
25	52	52	0	25	0.020	0.020
26	51	51	0	25	0.023	0.023
27	51	51	0	25	0.020	0.020
28	51	51	0	25	0.018	0.018
29	50	50	0	25	0.021	0.021
30	50	50	0	25	0.019	0.019
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		PRINTED NAME:	
PSID = pounds per square inch difference (before filter - after filter)		SIGNATURE:	
PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter. at what PSID.		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:	Sep-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	1.2	182.6666667	219.2	22.0	8.5	15.2	YES	3
2	1.1	202.962963	223.3	23.0	8.5	14.1	YES	2.7
3	2.1	195.7142857	411.0	24.0	8.4	14.2	YES	2.8
4	1.2	61.57303371	73.9	23.0	8.5	14.2	YES	8.9
5	1.1	62.27272727	68.5	22.0	8.5	15.1	YES	8.8
6	2.2	219.2	482.2	22.0	8.5	17.1	YES	2.5
7	1.8	249.0909091	448.4	21.0	8.1	15.0	YES	2.2
8	1.2	228.3333333	274.0	21.0	7.9	13.0	YES	2.4
9	1.3	228.3333333	296.8	20.0	8.4	17.0	YES	2.4
10	1.3	182.6666667	237.5	20.0	8.4	17.0	YES	3
11	1.7	188.9655172	321.2	19.0	8.3	18.3	YES	2.9
12	2.2	210.7692308	463.7	19.0	8.4	20.1	YES	2.6
13	1.8	228.3333333	411.0	19.0	8.4	19.2	YES	2.4
14	1.4	219.2	306.9	19.0	8.2	17.0	YES	2.5
15	1.4	274	383.6	19.0	8.4	18.3	YES	2
16	2.2	182.6666667	401.9	19.0	8.4	20.1	YES	3
17	1.3	182.6666667	237.5	20.0	8.4	17.0	YES	3
18	1.1	219.2	241.1	23.0	8.3	13.1	YES	2.5
19	1.3	202.962963	263.9	21.0	8.2	14.7	YES	2.7
20	1.7	195.7142857	332.7	21.0	7.5	11.9	YES	2.8
21	1.2	219.2	263.0	21.0	7.6	11.7	YES	2.5
22	1.3	228.3333333	296.8	21.0	7.7	12.2	YES	2.4
23	2.1	202.962963	426.2	19.0	7.8	15.9	YES	2.7
24	2.3	195.7142857	450.1	19.0	7.7	15.7	YES	2.8
25	2.2	219.2	482.2	21.0	7.7	13.6	YES	2.5
26	2.4	219.2	526.1	20.0	7.6	14.3	YES	2.5
27	2.2	219.2	482.2	19.0	7.7	15.5	YES	2.5
28	2.4	219.2	526.1	19.0	7.6	15.3	YES	2.5
29	2.1	228.3333333	479.5	18.0	7.7	16.4	YES	2.4
30	3.4	274	931.6	18.0	7.8	19.7	YES	2
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² If Cl₂ 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