

2023

OHA - Drinking Water Services - Turbidity Monitoring Report Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: JAN 23

System Name: Deer Creek / SFT ID# 41 95360 WTP ID:

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	40	40	0	40	0.33	.03
2	40	40	0	40	0.33	.03
3	40	40	0	40	0.33	.03
4	40	40	0	40	0.33	.03
5	40	40	0	40	0.33	.03
6	40	40	0	40	0.36	.03
7	40	40	0	40	0.30	.03
8	40	40	0	40	0.36	.03
9	40	40	0	40	0.36	.03
10	40	40	0	40	0.36	.03
11	40	40	0	40	0.36	.03
12	40	40	0	40	0.33	.03
13	40	40	0	40	0.33	.03
14	40	40	0	40	0.33	.03
15	40	40	0	40	0.33	.03
16	40	40	0	40	0.33	.03
17	40	40	0	40	0.33	.03
18	40	40	0	40	0.33	.02
19	40	40	0	40	0.33	.02
20	40	40	0	40	0.33	.02
21	40	40	0	40	0.33	.02
22	40	40	0	40	0.33	.02
23	40	40	0	40	0.33	.02
24	40	40	0	40	0.33	.02
25	40	40	0	40	0.33	.02
26	40	40	0	40	0.33	.03
27	40	40	0	40	0.33	.03
28	40	40	0	40	0.33	.03
29	40	40	0	40	0.33	.03
30	40	40	0	40	0.33	.03
31	40	40	0	40	0.33	.03

<b>Cartridge Filtration Monthly Summary</b> 95% of daily turbidity readings ≤ 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No	<b>Monthly Summary (Answer Yes or No)</b>	
	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
<b>Notes:</b> PSI = pounds per square inch PSID = pounds per square inch difference (before filter - after filter) PSID When to Change Filter = Manufacturer's recommendation; may need to look in manual for manufacturer's specifications when to change the filter, at what PSID.	<b>PRINTED NAME:</b> <u>Lillie Hazelton</u>	
	<b>SIGNATURE:</b> <u>[Signature]</u>	<b>DATE:</b> <u>2-1-23</u>
	<b>PHONE #:</b> <u>(541) 415-9788</u>	<b>CERT #:</b>

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

2023

OHA - Drinking Water Services - Surface Water Quality Data Form

Month/Year: Jan 23

Residual

System Name: Deer Creek/SFI

ID# 41 95360

WTP

Date / Time	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> 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]		Use tables	Yes / No	[GPM]
1/	1	60	60	14	8.2	22.7	Y	6.
2/	1	90	90	14	8.2	22.7	Y	3.
3/	1	60	60	14	8.2	22.7	Y	4.
4/	1	70	70	14	8.2	22.7	Y	3.5
5/	1	75	75	14	8.2	22.7	Y	6.4
6/	1	80	80	14	8.2	22.7	Y	3.1
7/	1	60	60	14	8.2	22.7	Y	2.9
8/	1	95	95	14	8.2	22.7	Y	2.8
9/	1	80	80	14	8.2	22.7	Y	3.7
10/	1	75	75	14	8.2	22.7	Y	3.3
11/	1	80	80	14	8.2	22.7	Y	4.3
12/	1	85	85	14	8.2	24.2	Y	4.1
13/	1	90	90	13	8.2	24.2	Y	6.4
14/	1	75	75	13	8.2	24.2	Y	3.2
15/	1	90	90	13	8.2	24.2	Y	6.4
16/	1	60	60	13	8.2	24.2	Y	2.8
17/	1	65	65	12	8.2	24.2	Y	2.8
18/	1	90	90	12	8.2	24.2	Y	2.1
19/	1	70	70	13	8.2	24.2	Y	3.6
20/	1	60	60	13	8.2	24.2	Y	6.4
21/	1	75	75	13	8.2	24.2	Y	5.2
22/	1	90	90	13	8.2	24.2	Y	2.7
23/	1	95	95	13	8.2	24.2	Y	2.8
24/	1	80	80	13	8.2	24.2	Y	6.2
25/	1	65	65	13	8.2	24.2	Y	3.1
26/	1	90	90	13	8.2	24.2	Y	3.7
27/	1	85	85	13	8.2	24.2	Y	5.2
28/	1	90	90	13	8.2	24.2	Y	4.7
29/	1	65	65	13	8.2	24.2	Y	6.1
30/	1	60	60	13	8.2	24.2	Y	4.3
31/	1	80	80	13	8.2	24.2	Y	6.3

<sup>2</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l, OR CT not met, notify DWS within 24 hours.

Revised August 2016

Download form at: [public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf](http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Monitoring/Documents/turb-cartridge.pdf)

Return by 10<sup>th</sup> of following month by email, fax or mail to:

dwp.dmce@state.or.us; Fax 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350