

OHA - Drinking Water Services - Surface Water Quality Data Form

County: Josephine

Cartridge or Bag Filtration

Month/Year: Apr 2023

System Name:		Deer Creek/SFI		ID#:	41 95360	WTP ID:	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	40.00	40.00	0.00	40.00	0.05	0.03	
2	40.00	40.00	0.00	40.00	0.05	0.03	
3	40.00	40.00	0.00	40.00	0.05	0.03	
4	40.00	40.00	0.00	40.00	0.05	0.03	
5	40.00	40.00	0.00	40.00	0.05	0.03	
6	40.00	40.00	0.00	40.00	0.04	0.03	
7	40.00	40.00	0.00	40.00	0.04	0.03	
8	40.00	40.00	0.00	40.00	0.04	0.03	
9	40.00	40.00	0.00	40.00	0.04	0.03	
10	40.00	40.00	0.00	40.00	0.04	0.03	
11	40.00	40.00	0.00	40.00	0.04	0.03	
12	40.00	40.00	0.00	40.00	0.04	0.03	
13	40.00	40.00	0.00	40.00	0.04	0.03	
14	40.00	40.00	0.00	40.00	0.04	0.03	
15	40.00	40.00	0.00	40.00	0.04	0.03	
16	40.00	40.00	0.00	40.00	0.04	0.02	
17	40.00	40.00	0.00	40.00	0.04	0.02	
18	40.00	40.00	0.00	40.00	0.04	0.02	
19	40.00	40.00	0.00	40.00	0.04	0.02	
20	40.00	40.00	0.00	40.00	0.03	0.02	
21	40.00	40.00	0.00	40.00	0.03	0.02	
22	40.00	40.00	0.00	40.00	0.03	0.02	
23	40.00	40.00	0.00	40.00	0.03	0.02	
24	40.00	40.00	0.00	40.00	0.98	0.03	
25	40.00	40.00	0.00	40.00	0.98	0.03	
26	40.00	40.00	0.00	40.00	0.13	0.03	
27	40.00	40.00	0.00	40.00	0.13	0.03	
28	40.00	40.00	0.00	40.00	0.13	0.03	
29	40.00	40.00	0.00	40.00	0.13	0.03	
					Monthly Summary (Answer Yes or No)		
Yes					Yes	All Cl2 residual at entry point ≥ 0.2 mg/l?	
Yes					Yes	Yes	
PSID = pounds per square inch difference (before filter - after filter)					Lillie Hazelton		
					leh	5/3/2023	
PSID When to Change Filter = look in manual for manufacturer's specifications when to change the filter, at what PSID.					541 415-9788	CERT #:	

1 Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in Daily Turbidity Reading column may not

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System Name: Deer Creek/SFI						ID#: 41 95360		Month/Year: Jan-23		WTP- : Disinfection Giardia Log Inactiv: 0.5	
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Date / Time	Minimum Cl2 Residual at 1st User (C) 2 [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? 2 Yes / No	Peak Hourly Demand Flow [GPM]
1	1	65	65.0	10.0	8.20	29.5	YES	6
2	1	80	80.0	10.0	8.20	29.5	YES	3
3	1	60	60.0	10.0	8.20	29.5	YES	4
4	1	85	85.0	10.0	8.20	29.5	YES	3.5
5	1	60	60.0	10.0	8.20	29.5	YES	6.4
6	1	70	70.0	10.0	8.20	29.5	YES	3.1
7	1	75	75.0	10.0	8.20	29.5	YES	2.9
8	1	70	70.0	10.0	8.20	29.5	YES	2.8
9	1	95	95.0	10.0	8.20	29.5	YES	3.7
10	1	75	75.0	10.0	8.20	29.5	YES	3.3
11	1	60	60.0	10.0	8.20	29.5	YES	4.3
12	1	70	70.0	10.0	8.20	29.5	YES	4.1
13	1	65	65.0	11.0	8.20	27.6	YES	6.4
14	1	60	60.0	12.0	8.20	25.8	YES	3.2
15	1	95	95.0	12.0	8.20	25.8	YES	6.4
16	1	70	70.0	12.0	8.20	25.8	YES	2.8
17	1	65	65.0	12.0	8.20	25.8	YES	2.7
18	1	80	80.0	12.0	8.20	25.8	YES	3.1
19	1	70	70.0	13.0	8.20	24.2	YES	6.3
20	1	85	85.0	12.0	8.20	25.8	YES	5.2
21	1	90	90.0	12.0	8.20	25.8	YES	3.7
22	1	85	85.0	13.0	8.20	24.2	YES	6.1
23	1	80	80.0	13.0	8.20	24.2	YES	5.2
24	1	65	65.0	13.0	8.20	24.2	YES	3.1
25	1	70	70.0	13.0	8.20	24.2	YES	3.7
26	1	70	70.0	14.0	8.20	22.7	YES	5.2
27	1	90	90.0	14.0	8.20	22.7	YES	4.7
28	1	80	80.0	13.0	8.20	24.2	YES	6.1
29	1	80	80.0	13.0	8.20	24.2	yes	
30	1	80	80.0	13.0	8.20	24.2	YES	6.3

2 If Cl2 at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised July 2018

Return by 10th of following month by email, fax, or mail to:
dws.dmsc@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350