

Josephine Co.  
2023  
County: Josephine  
Month/Year: June

OHA - Drinking Water Services - Turbidity Monitoring Report Form  
Cartridge or Bag Filtration

System Name:		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	.038	.038
2	40	40	0	40	.039	.039
3	40	40	0	40	.039	.039
4	40	40	0	40	.039	.039
5	40	40	0	40	.039	.039
6	40	40	0	40	.039	.039
7	40	40	0	40	.039	.039
8	40	40	0	40	.038	.038
9	40	40	0	40	.038	.037
10	40	40	0	40	.039	.040
11	40	40	0	40	.039	.040
12	40	40	0	40	.040	.040
13	40	40	0	40	.040	.040
14	40	40	0	40	.040	.040
15	40	40	0	40	.040	.040
16	40	40	0	40	.040	.040
17	40	40	0	40	.040	.040
18	40	40	0	40	.040	.040
19	40	40	0	40	.040	.040
20	40	40	0	40	.040	.040
21	40	40	0	40	.039	.039
22	40	40	0	40	.039	.039
23	40	40	0	40	.039	.039
24	40	40	0	40	.039	.039
25	40	40	0	40	.039	.030
26	40	40	0	40	.040	.040
27	40	40	0	40	.040	.040
28	40	40	0	40	.040	.040
29	40	40	0	40	.040	.040
30	40	40	0	40	.040	.040
31						

Lillie  
lower  
to  
July 1 2023

<b>Cartridge Filtration Monthly Summary</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	CT's met everyday? (see back)	All Cl <sub>2</sub> residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes / <input type="checkbox"/> 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> Lillie Hazlett		<b>DATE:</b> July 9 2023
	<b>SIGNATURE:</b> <i>Lillie Hazlett</i>		<b>CERT #:</b>
	<b>PHONE #:</b> 501 465 9288		

<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.



# June 2023 OHA DATA

## OHA - Drinking Water Services - Surface Water Quality Data Form

Month/Year: 2023  
June

T=49 SST  
~~25976m~~ Deep Creek 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/	1.0	65	65	26	8.2	30	Y	3.9
2/	1.0	90	90	26	8.2	30		3.0
3/	1.0	90	90	32	8.2	20		2.8
4/	1.0	70	70	32	8.2	30		3.0
5/	1.0	70	70	32	8.2	30		3.0
6/	1.0	90	90	32	8.2	30		3.0
7/	1.0	71	71	30	8.2	30		2.8
8/	1.0	90	90	30	8.2	30		2.7
9/	1.0	95	95	30	8.2	30		2.7
10/	1.0	95	95	30	8.2	30		3.7
11/	1.0	70	70	30	8.2	30		2.8
12/	2.0	75	75	26	8.2	30		2.7
13/	1.0	90	90	26	8.2	30		2.8
14/	1.0	95	95	25	8.2	30		3.9
15/	1.0	90	90	26	8.2	30		3.0
16/	1.0	65	65	26	8.2	30		4.3
17/	1.0	85	85	26	8.2	30		4.3
18/	1.0	60	60	26	8.2	30		3.9
19/	1.0	60	60	25	8.2	30		3.7
20/	1.0	80	80	25	8.2	30		4.3
21/	1.0	65	65	25	8.2	30		2.8
22/	1.0	70	70	24	8.2	20		2.8
23/	1.0	60	60	24	8.2	20		4.3
24/	1.0	90	90	23	8.2	20		3.1
25/	1.0	90	90	23	8.2	20		4.3
26/	1.0	60	60	23	8.2	20		3.9
27/	1.0	83	83	20	8.2	20		2.8
28/	1.0	60	60	20	8.2	20		2.9
29/	1.0	65	65	20	8.2	20		3.1
30/	1.0	90	90	20	8.2	20		3.0
31/	<del>1.0</del>	<del>X</del>	<del>X</del>	<del>20</del>	<del>8.2</del>	<del>X</del>	<del>X</del>	<del>3.0</del>

Lollic  
Up  
to  
July

<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