

OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Clatsop**
 Month/Year: **Jul-23**

System Name: **City of Cannon Beach** ID#: **4100164** WTP: **TP - A**

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day ¹ [NTU]
1							
2							
3							
4			0.16				0.16
5			0.15				0.15
6			0.15				0.15
7			0.15				0.15
8			0.14				0.14
9			0.14				0.14
10			0.14				0.14
11			0.14				0.14
12			0.13				0.13
13			0.12				0.12
14			0.08				0.08
15			0.07				0.07
16			0.06				0.06
17			0.06				0.06
18			0.06				0.06
19			0.06				0.06
20			0.06				0.06
21			0.07				0.07
22			0.07				0.07
23			0.07				0.07
24			0.07				0.07
25			0.08				0.08
26			0.08				0.08
27			0.08				0.08
28			0.08				0.08
29			0.09				0.09
30			0.09				0.09
31			0.09				0.09

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings \leq 1 NTU? ² Yes	CT's met everyday? (see back) Yes	All Cl2 residual at entry point \geq 0.2 mg/l? Yes
All daily turbidity readings \leq 5 NTU? Yes		

Notes:	PRINTED NAME: <i>Daniel Willyard</i>	
	SIGNATURE: <i>Daniel Willyard</i>	DATE: <i>8/4/2023</i>
	PHONE #: <i>(503) 436-8082</i>	CERT #: <i>1588</i>

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :A

System Name: City of Cannon Beach ID#: 4100164

Month/Year: Jul-23

Disinfection *Giardia* Log
Inactiv: 1.0

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/l]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1								
2								
3								
4	0.47	151	71.0	11.0	6.96	33.7	YES	720
5	0.48	146	70.1	12.0	6.99	31.9	YES	745
6	0.5	146	73.0	12.0	6.95	31.6	YES	740
7	0.48	151	72.5	12.0	6.95	31.5	YES	730
8	0.5	156	78.0	12.0	6.96	31.7	YES	690
9	0.48	168	80.6	12.0	6.95	31.5	YES	660
10	0.53	168	89.0	12.0	6.96	31.8	YES	650
11	0.5	175	87.5	12.0	6.94	31.5	YES	615
12	0.51	168	85.7	12.0	6.91	31.2	YES	640
13	0.51	175	89.3	12.0	6.95	31.6	YES	630
14	0.53	168	89.0	12.0	6.95	31.7	YES	640
15	0.42	168	70.6	12.0	6.93	31.1	YES	660
16	0.49	168	82.3	12.0	6.96	31.7	YES	660
17	0.55	162	89.1	12.0	6.96	31.9	YES	675
18	0.53	168	89.0	12.0	6.94	31.6	YES	645
19	0.51	168	85.7	12.0	6.95	31.6	YES	650
20	0.51	168	85.7	12.0	6.95	31.6	YES	660
21	0.51	162	82.6	12.0	6.91	31.2	YES	670
22	0.48	162	77.8	12.0	6.95	31.5	YES	670
23	0.41	134	54.9	12.0	6.95	31.3	YES	660
24	0.48	162	77.8	12.0	6.96	31.6	YES	680
25	0.5	168	84.0	12.0	6.95	31.6	YES	635
26	0.48	168	80.6	12.0	6.93	31.3	YES	660
27	0.51	168	85.7	12.0	6.95	31.6	YES	650
28	0.5	162	81.0	12.0	6.95	31.6	YES	670
29	0.5	162	81.0	12.0	6.95	31.6	YES	670
30	0.48	162	77.8	12.0	6.95	31.5	YES	675
31	0.49	162	79.4	13.0	6.96	28.9	YES	680

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

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