

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

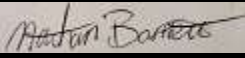
County: CLATSOP
Month/Year: Sep, 2024

System Name: City of Astoria

ID#: 41-00055

WTP: WTP-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]
01	0.05	0.05	0.04	0.04	0.05	0.05	0.06
02	0.05	0.04	0.04	0.04	0.05	0.05	0.05
03	0.05	0.04	0.04	0.04	0.05	0.05	0.05
04	0.05	0.04	0.04	0.04	0.05	0.06	0.06
05	0.05	0.04	0.04	0.04	0.06	0.06	0.06
06	0.05	0.05	0.04	0.04	0.06	0.06	0.06
07	0.05	0.05	0.04	0.04	0.05	0.06	0.06
08	0.05	0.04	0.04	0.04	0.05	0.06	0.06
09	0.05	0.04	0.04	0.04	0.05	0.06	0.06
10	0.05	0.04	0.04	0.04	0.06	0.06	0.06
11	0.05	0.04	0.04	0.04	0.05	0.05	0.05
12	0.05	0.04	0.04	0.04	0.04	0.05	0.05
13	0.04	0.04	0.04	0.04	0.04	0.05	0.05
14	0.05	0.04	0.04	0.04	0.04	0.05	0.05
15	0.05	0.04	0.04	0.04	0.04	0.05	0.05
16	0.05	0.04	0.04	0.04	0.05	0.06	0.06
17	0.04	0.04	0.04	0.04	0.04	0.04	0.05
18	0.04	0.04	0.04	0.04	0.04	0.05	0.06
19	0.05	0.04	0.04	0.04	0.04	0.05	0.08
20	0.07	0.04	0.04	0.04	0.05	0.06	0.07
21	0.05	0.04	0.04	0.04	0.05	0.1	0.1
22	0.06	0.04	0.04	0.04	0.06	0.1	0.1
23	0.06	0.05	0.04	0.04	0.05	0.08	0.08
24	0.05	0.04	0.04	0.04	0.1	0.11	0.11
25	0.06	0.05	0.04	0.05	0.05	0.05	0.06
26	0.04	0.04	0.04	0.04	0.08	0.08	0.08
27	0.05	0.04	0.04	0.04	0.07	0.08	0.08
28	0.05	0.04	0.04	0.04	0.08	0.08	0.08
29	0.05	0.04	0.04	0.04	0.07	0.07	0.07
30	0.07	0.05	0.04	0.04	0.04	0.08	0.1

Slow Sand / Membrane / DE Filtration / Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings =< 1 NTU? YES		CT's met everyday? (see back) YES	All CL2 residual at entry point >= 0.2 mg/L? YES
All daily turbidity readings =< 5 NTU? YES			
Notes:		PRINTED NAME: Nathan Bartlett	
		SIGNATURE: 	DATE: 10/2/2024
		PHONE #: (503)325-3524	CERT: T-08872

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP : WTP-A

System Name: City of Astoria ID#: 41-00055 Month/Year: Sep,2024 Disinfection Giardia Log Inactiv: 1.0

Date / Time	Minimum CL2 Residual at 1st User (C)	Contact Time (T)	Actual CT C X T	Temp [Celsius]	pH	Required CT formula	CT Met Yes / No	Peak Hourly Demand Flow [GPM]
01 / 6:33	1.24	76	94	18.08	7.52	28	YES	2475
02 / 4:35	1.23	133	163	17.45	7.51	29	YES	1415
03 / 6:12	1.67	133	222	16.89	7.54	32	YES	1413
04 / 15:52	1.46	82	120	17.15	7.57	31	YES	2296
05 / 23:16	1.37	81	110	18.36	7.54	28	YES	2331
06 / 16:53	1.38	81	112	19.21	7.51	26	YES	2324
07 / 17:55	1.44	76	110	18.92	7.5	27	YES	2472
08 / 11:14	1.51	76	115	18.37	7.51	28	YES	2477
09 / 17:34	1.56	75	118	18.07	7.52	29	YES	2495
10 / 8:13	1.56	76	119	17.57	7.53	30	YES	2464
11 / 20:23	1.61	75	121	17.08	7.52	31	YES	2510
12 / 6:21	1.65	75	124	16.57	7.55	32	YES	2496
13 / 20:24	1.68	97	164	16.15	7.58	34	YES	1930
14 / 9:23	1.68	81	136	16.58	7.54	32	YES	2325
15 / 19:23	1.75	81	141	15.93	7.55	34	YES	2328
16 / 14:03	1.72	81	139	15.63	7.55	35	YES	2326
17 / 6:32	1.65	82	135	16.08	7.51	33	YES	2295
18 / 1:19	1.63	109	178	15.92	7.53	33	YES	1724
19 / 3:04	1.62	109	177	16.32	7.53	33	YES	1725
20 / 10:16	1.63	76	124	16.1	7.53	33	YES	2472
21 / 5:30	1.79	75	134	15.96	7.54	34	YES	2510
22 / 10:03	1.79	75	134	16.2	7.52	33	YES	2511
23 / 5:02	1.72	76	131	16.59	7.49	32	YES	2473
24 / 6:02	1.72	76	131	16.59	7.49	32	YES	2473
25 / 18:15	1.53	83	126	17	7.5	30	YES	2274
26 / 20:18	1.53	109	167	17.05	7.36	29	YES	1727
27 / 0:01	1.63	109	177	15.76	7.53	34	YES	1727
28 / 9:48	1.62	109	176	15.78	7.5	33	YES	1726
29 / 11:59	1.74	109	189	15.67	7.51	34	YES	1727
30 / 7:20	1.66	88	147	14.59	7.55	37	YES	2126

If CL2 at entry point < 0.2 mg/L or CT not met, notify DWS within 24 hours.