

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

County: Clatsop
 Month/Year: Feb-21

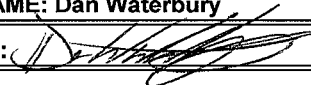
System Name: Wickiup Water District ID#: 41- 00063 WTP: TP - A

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			0.56				0.56
2			0.52				0.52
3			0.46				0.46
4			0.58				0.58
5			0.52				0.52
6			0.48				0.48
7			0.15				0.15
8			0.23				0.23
9			0.21				0.21
10			0.20				0.20
11			0.39				0.39
12			0.18				0.18
13			Off				Off
14			0.73				0.73
15			0.63				0.63
16			0.59				0.59
17			0.33				0.33
18			0.32				0.32
19			0.36				0.36
20			0.31				0.31
21			0.60				0.60
22			0.61				0.61
23			0.67				0.67
24			0.58				0.58
25			0.52				0.52
26			0.69				0.69
27			0.71				0.71
28			0.50				0.50
29							0.00
30							0.00
31							0.00

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ² <input checked="" type="radio"/> Yes / <input type="radio"/> No	CT's met everyday? (see back) <input checked="" type="radio"/> Yes / <input type="radio"/> No	All Cl2 residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All daily turbidity readings ≤ 5 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		

Notes:

PRINTED NAME: Dan Waterbury

SIGNATURE: 

DATE: 3/8/21

PHONE #: (503)791-5751

CERT #: T-08798

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: **Wickiup Water District ID#: 41-00063** Month/Year: **Feb-21** 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			formula	Yes / No	[GPM]
1	0.81	149	120.7	6.9	7.81	61.9	YES	
2	0.78	149	116.2	6.9	7.80	61.4	YES	
3	0.72	149	107.3	6.8	7.83	62.1	YES	
4	0.81	149	120.7	6.8	7.82	62.5	YES	
5	0.69	149	102.8	7.2	7.96	63.1	YES	
6	0.78	149	116.2	6.9	7.99	65.8	YES	
7	0.57	149	84.9	7.3	8.31	70.2	YES	
8	0.95	149	141.6	7.2	8.27	72.9	YES	
9	1.04	149	155.0	7.4	8.27	72.6	YES	
10	1.12	149	166.9	7.2	8.36	76.9	YES	
11	1.45	149	216.1	6.9	8.36	81.6	YES	
12	1.46	149	217.5	6.3	8.19	80.0	YES	
13	1.46	149	217.5	6.1	8.20	81.4	YES	
14	1.32	149	196.7	5.2	8.38	91.1	YES	
15	1.28	149	190.7	7.9	8.42	76.3	YES	
16	1.15	149	171.4	7.3	8.36	76.6	YES	
17	1.12	149	166.9	7.4	8.52	80.4	YES	
18	1.16	149	172.8	7.2	8.36	77.2	YES	
19	1.18	149	175.8	7.6	8.31	73.9	YES	
20	1.21	149	180.3	7.4	8.26	73.8	YES	
21	0.96	149	143.0	7.6	8.69	82.8	YES	
22	0.94	149	140.1	7.3	8.64	82.8	YES	
23	0.94	149	140.1	7.4	8.69	83.8	YES	
24	1.32	149	196.7	7.4	8.36	77.6	YES	
25	1.13	149	168.4	7.2	8.36	76.9	YES	
26	1.36	149	202.6	7.4	8.48	81.5	YES	
27	1.51	149	225.0	7.5	8.65	87.7	YES	
28	1.33	149	198.2	7.5	8.60	84.3	YES	
29		149						
30		149						
31		149						

³ 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:

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