

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

County: Clatsop
 Month/Year: Jun-22

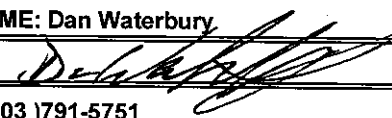
System Name: Wickiup Water District ID#: 41- 00063 WTP : TP - A

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			0.27				0.27
2			0.21				0.21
3			0.13				0.13
4			Off				Off
5			Off				Off
6			0.17				0.17
7			0.12				0.12
8			0.23				0.23
9			0.17				0.17
10			0.14				0.14
11			0.34				0.34
12			0.27				0.27
13			0.07				0.07
14			0.32				0.32
15			0.22				0.22
16			0.26				0.26
17			0.02				0.02
18			0.02				0.02
19			0.02				0.02
20			0.26				0.26
21			Off				Off
22			0.03				0.03
23			0.02				0.02
24			0.26				0.26
25			0.32				0.32
26			0.23				0.23
27			0.28				0.28
28			0.02				0.02
29			0.17				0.17
30			0.08				0.08
31							0.00

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

Notes:

PRINTED NAME: Dan Waterbury

SIGNATURE: 

PHONE #: (503)791-5751

DATE: 7/08/2022

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: Jun-22

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	0.77	149	114.7	12.1	8.14	48.9	YES	55
2	0.82	149	122.2	12.7	8.08	46.3	YES	54
3	0.99	149	147.5	12.2	8.16	50.1	YES	60
4	0.91	149	135.6	12.8	8.31	50.6	YES	58
5	0.93	149	138.6	12.7	8.36	52.0	YES	63
6	0.5	149	74.5	13.4	7.84	39.1	YES	56
7	0.87	149	129.6	12.0	8.08	48.7	YES	54
8	0.72	149	107.3	12.5	8.29	50.2	YES	58
9	0.7	149	104.3	12.9	8.19	47.0	YES	57
10	0.71	149	105.8	12.7	8.37	50.9	YES	55
11	0.84	149	125.2	13.6	8.28	47.1	YES	62
12	0.56	149	83.4	12.8	8.18	46.4	YES	53
13	0.56	149	83.4	12.3	8.18	47.7	YES	87
14	0.89	149	132.6	13.4	8.31	48.5	YES	73
15	0.44	149	65.6	13.1	8.02	42.3	YES	68
16	0.77	149	114.7	12.1	8.29	51.5	YES	67
17	0.88	149	131.1	12.1	8.39	54.1	YES	60
18	0.76	149	113.2	12.9	8.25	48.4	YES	54
19	0.78	149	116.2	12.3	8.31	51.3	YES	69
20	0.81	149	120.7	12.6	8.34	51.3	YES	60
21	0.93	149	138.6	13.7	8.35	48.5	YES	73
22	1.16	149	172.8	13.2	8.52	54.8	YES	86
23	0.98	149	146.0	13.4	8.26	48.1	YES	76
24	0.86	149	128.1	14.0	8.29	46.1	YES	82
25	1.19	149	177.3	14.2	8.41	49.4	YES	94
26	0.95	149	141.6	15.9	8.34	41.9	YES	88
27	1.1	149	163.9	14.9	8.31	45.0	YES	75
28	1.06	149	157.9	15.5	8.42	44.8	YES	68
29	0.96	149	143.0	14.6	8.40	46.7	YES	62
30	1.12	149	166.9	14.4	8.23	45.3	YES	58
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