


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

County: Clatsop  
 Month/Year: Dec-23

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 <sup>1</sup> [NTU]
1			0.07				0.07
2			0.19				0.19
3			0.22				0.22
4			0.01				0.01
5			0.09				0.09
6			0.01				0.01
7			0.02				0.02
8			0.01				0.01
9			0.03				0.03
10			0.01				0.01
11			0.01				0.01
12			0.03				0.03
13			0.04				0.04
14			0.04				0.04
15			0.02				0.02
16			0.01				0.01
17			0.01				0.01
18			0.03				0.03
19			0.01				0.01
20			0.01				0.01
21			0.01				0.01
22			0.02				0.02
23			0.01				0.01
24			0.01				0.01
25			0.01				0.01
26			0.01				0.01
27			0.01				0.01
28			0.01				0.01
29			0.01				0.01
30			0.01				0.01
31			0.01				0.01

<b>Slow Sand/Membrane/DE Filtration/Unfiltered</b>		<b>Monthly Summary (Answer Yes or No)</b>	
95% of daily turbidity readings ≤ 1 NTU? <sup>2</sup>	<u>Yes</u> / No	CT's met everyday? (see back)	All Cl2 residual at entry point ≥ 0.2 mg/l?
All daily turbidity readings ≤ 5 NTU?	<u>Yes</u> / No	<u>Yes</u> / No	<u>Yes</u> / No
<b>Notes:</b>	PRINTED NAME: Dan Waterbury		
	SIGNATURE: 		DATE: 1/8/2024
	PHONE #: ( 503 ) 791-5751		CERT #: T-08798

<sup>1</sup> 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. <sup>2</sup> Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :A

System Name: Wickiup Water District ID#: 41-00063

Month/Year: Dec-23

Disinfection *Giardia* Log

Inactiv:

1.0

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User (C) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T			formula	Yes / No	[GPM]
1	0.78	149	116.2	6.3	8.24	75.2	YES	62
2	0.67	149	99.8	6.6	8.06	68.1	YES	65
3	0.69	149	102.8	8.2	7.85	56.7	YES	67
4	0.37	149	55.1	8.3	7.66	50.7	YES	64
5	0.39	149	58.1	8.3	7.66	50.8	YES	61
6	0.39	149	58.1	8.4	7.74	51.9	YES	62
7	0.83	149	123.7	8.6	7.60	51.3	YES	68
8	0.64	149	95.4	8.3	7.93	57.6	YES	70
9	0.67	149	99.8	8.0	7.85	57.3	YES	71
10	0.43	149	64.1	8.9	7.63	48.5	YES	76
11	0.67	149	99.8	8.3	7.95	58.2	YES	64
12	0.64	149	95.4	8.9	7.92	55.1	YES	58
13	0.86	149	128.1	8.5	8.02	60.2	YES	64
14	0.9	149	134.1	8.4	7.95	59.4	YES	60
15	0.86	149	128.1	8.5	8.07	61.3	YES	62
16	0.62	149	92.4	8.6	8.03	58.4	YES	58
17	0.71	149	105.8	8.3	8.04	60.4	YES	55
18	0.72	149	107.3	8.6	7.98	58.0	YES	72
19	0.89	149	132.6	8.3	8.14	64.0	YES	67
20	0.87	149	129.6	8.4	8.15	63.7	YES	62
21	0.85	149	126.7	8.4	8.14	63.3	YES	73
22	0.88	149	131.1	8.6	7.95	58.5	YES	76
23	1.03	149	153.5	7.4	8.09	67.9	YES	78
24	1.01	149	150.5	7.3	8.16	70.0	YES	82
25	0.83	149	123.7	7.4	8.12	67.1	YES	86
26	0.6	149	89.4	7.5	8.05	63.2	YES	752
27	0.59	149	87.9	7.5	8.12	64.8	YES	82
28	0.54	149	80.5	7.6	8.00	61.3	YES	84
29	1.79	149	266.7	8.7	8.30	73.4	YES	82
30	1.64	149	244.4	8.7	8.26	71.0	YES	78
31	1.36	149	202.6	9.6	8.31	65.8	YES	76

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

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