


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

County: Clatsop
 Month/Year: Feb-24

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			0.01				0.01
2			0.01				0.01
3			0.01				0.01
4			0.01				0.01
5			0.01				0.01
6			0.01				0.01
7			0.01				0.01
8			0.01				0.01
9			0.01				0.01
10			0.01				0.01
11			0.01				0.01
12			0.01				0.01
13			0.01				0.01
14			0.01				0.01
15			0.01				0.01
16			0.01				0.01
17			0.01				0.01
18			0.01				0.01
19			0.01				0.01
20			0.01				0.01
21			0.01				0.01
22			0.01				0.01
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							0.00
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: 	DATE: 3/8/2024
	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-24

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	0.98	149	146.0	9.5	8.10	58.8	YES	64
2	1.04	149	155.0	9.4	8.06	58.7	YES	63
3	1.31	149	195.2	8.6	7.98	62.1	YES	56
4	1.02	149	152.0	8.1	7.94	61.3	YES	67
5	1.1	149	163.9	7.9	7.92	62.2	YES	62
6	0.82	149	122.2	8.5	7.86	56.6	YES	63
7	1.34	149	199.7	7.9	8.04	66.9	YES	48
8	1.53	149	228.0	7.7	8.04	69.3	YES	52
9	1.67	149	248.8	8.2	8.14	70.6	YES	56
10	1.59	149	236.9	7.9	8.12	70.9	YES	61
11	1.42	149	211.6	7.9	8.10	69.0	YES	63
12	1.07	149	159.4	8.3	8.02	62.6	YES	67
13	1.31	149	195.2	7.4	8.05	69.2	YES	76
14	1.27	149	189.2	9.2	8.24	65.3	YES	78
15	1.22	149	181.8	7.0	8.07	70.9	YES	75
16	1.23	149	183.3	7.5	8.23	72.7	YES	76
17	1.04	149	155.0	6.7	8.05	70.3	YES	71
18	1.67	149	248.8	8.7	7.99	64.6	YES	68
19	1.07	149	159.4	7.6	7.96	64.2	YES	64
20	1.06	149	157.9	7.1	7.94	65.9	YES	65
21	1.56	149	232.4	8.4	8.44	76.7	YES	75
22	0.93	149	138.6	7.7	8.04	64.6	YES	76
23	1.59	149	236.9	7.6	8.36	79.0	YES	83
24	1.46	149	217.5	7.3	8.32	78.3	YES	82
25	1.31	149	195.2	7.2	8.48	82.2	YES	78
26	0.91	149	135.6	7.9	8.35	71.2	YES	84
27	1.52	149	226.5	6.4	8.32	83.9	YES	76
28	1.47	149	219.0	7.7	8.43	79.4	YES	68
29	1.33	149	198.2	7.6	8.54	81.9	YES	64
30		149						
31		149						

³ If Cl₂ 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