


**OHA - Drinking Water Services -Turbidity Monitoring Report Form**  
**Conventional or Direct Filtration**

County: **Clatsop**  
 Month/Year: **Jan-21**

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

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	0.049	0.050	0.065	0.155	0.051	Off	0.155
2	0.054	0.055	Off	0.058	0.062	Off	0.062
3	0.048	Off	Off	Off	Off	Off	0.048
4	Off	Off	Off	0.142	0.202	0.034	0.202
5	0.036	0.049	0.039	0.039	0.038	0.044	0.049
6	0.041	0.045	0.053	0.042	Off	Off	0.053
7	0.039	0.041	Off	0.045	0.041	0.045	0.045
8	0.043	Off	Off	0.039	0.037	0.048	0.048
9	0.036	Off	Off	0.038	0.060	0.043	0.060
10	0.049	Off	Off	0.062	0.046	0.048	0.062
11	0.049	Off	Off	0.038	0.042	0.048	0.049
12	Off	Off	Off	Off	0.084	0.042	0.084
13	Off	Off	Off	Off	Off	0.127	0.127
14	0.035	0.039	0.035	0.043	0.037	0.039	0.043
15	0.034	0.035	0.042	0.039	0.040	Off	0.042
16	0.034	0.042	0.040	0.044	Off	0.042	0.044
17	0.033	0.048	Off	0.037	0.073	0.041	0.073
18	0.038	Off	Off	0.033	0.036	0.043	0.043
19	0.059	Off	Off	0.037	0.036	0.043	0.059
20	0.035	Off	Off	0.036	0.040	Off	0.040
21	0.036	Off	Off	0.040	0.041	0.038	0.041
22	0.038	Off	Off	0.044	0.034	0.042	0.044
23	0.038	Off	Off	0.044	0.037	0.039	0.044
24	0.039	Off	Off	0.045	0.037	0.044	0.045
25	0.046	0.042	Off	0.038	0.043	0.043	0.046
26	0.041	Off	Off	0.041	0.043	0.087	0.087
27	0.040	Off	Off	0.038	0.039	0.045	0.045
28	0.124	Off	Off	0.046	0.042	0.044	0.124
29	0.043	0.069	Off	0.044	0.045	Off	0.069
30	0.042	Off	Off	0.040	0.049	0.042	0.049
31	0.039	Off	Off	0.044	0.045	0.042	0.045

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings $\leq$ 0.3 NTU? <span style="float:right"><u>Yes</u> / No</span>	CT's met everyday? (see back) <span style="float:right"><u>Yes</u> / No</span>	All Cl <sub>2</sub> residual at entry point $\geq$ 0.2 mg/l? <span style="float:right"><u>Yes</u> / No</span>
All 4-hour turbidity readings $\leq$ 1 NTU? <span style="float:right"><u>Yes</u> / No</span>		
All turbidity readings < IFE <sup>2</sup> triggers <span style="float:right"><u>Yes</u> / No</span>		

<b>Notes:</b>	<b>PRINTED NAME:</b> Dan Waterbury	
	<b>SIGNATURE:</b> 	<b>DATE:</b> 2/8/21
	<b>PHONE #:</b> ( 503 ) 791-5751	<b>CERT #:</b> 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> IFE = Individ. Filter Effl. (333-061-0040(1)(d)(B&C))

## OHA - Drinking Water Program - Surface Water Quality Data Form

WTP - :B

System Name: Wickiup Water District		ID#: 41-00063	Month/Year: Jan-21		Disinfection <i>Giardia</i> Log Inactive:		1	
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>	
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	
1	0.83	241	200.0	8.2	8.04	61.7	YES	221
2	1.11	241	267.5	9.8	7.65	49.7	YES	226
3	1.13	241	272.3	9.1	7.46	48.8	YES	219
4	1.02	241	245.8	9.3	7.58	49.7	YES	225
5	0.96	241	231.4	9.3	7.62	50.0	YES	221
6	1.61	241	388.0	9.8	7.59	51.6	YES	228
7	1.58	241	380.8	9.0	7.61	54.6	YES	239
8	1.31	241	315.7	9.1	7.73	54.9	YES	229
9	1.67	241	402.5	8.1	7.82	63.3	YES	231
10	1.47	241	354.3	8.5	7.70	57.6	YES	223
11	0.97	241	233.8	8.7	7.68	53.3	YES	234
12	1.01	241	243.4	9.5	7.60	49.3	YES	232
13	0.78	241	188.0	10.6	7.47	42.6	YES	225
14	1.27	241	306.1	9.5	7.77	54.0	YES	220
15	1.53	241	368.7	9.4	7.87	58.0	YES	250
16	1.45	241	349.5	8.9	7.96	61.4	YES	234
17	1.19	241	286.8	9.8	7.86	54.1	YES	233
18	1.08	241	260.3	9.1	7.68	52.5	YES	232
19	1.26	241	303.7	8.7	7.69	55.3	YES	242
20	0.92	241	221.7	6.8	7.67	60.0	YES	233
21	1.75	241	421.8	8.0	7.57	58.7	YES	235
22	1.65	241	397.7	7.7	7.57	59.3	YES	236
23	1.78	241	429.0	7.2	7.69	65.0	YES	229
24	1.91	241	460.3	8.1	7.64	61.0	YES	226
25	1.21	241	291.6	9.2	7.68	52.9	YES	251
26	1.11	241	267.5	6.8	7.60	59.8	YES	233
27	1.27	241	306.1	6.4	7.44	59.1	YES	237
28	0.89	241	214.5	6.2	7.51	58.8	YES	248
29	0.92	241	221.7	6.8	7.46	55.6	YES	245
30	1.18	241	284.4	7.3	7.53	56.8	YES	233
31	0.98	241	236.2	7.4	7.48	54.2	YES	241

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

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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