

OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Clatsop

Conventional or Direct Filtration

Month/Year: Aug-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 ¹ [NTU]	
1	0.042	Off	Off	0.033	0.039	0.037	0.042	
2	0.033	0.039	0.033	0.038	0.035	0.037	0.039	
3	0.039	Off	Off	0.033	0.033	0.039	0.039	
4	0.032	0.038	0.041	0.042	0.040	0.036	0.042	
5	0.038	0.039	Off	0.036	Off	0.036	0.039	
6	0.037	0.039	0.039	0.040	0.038	0.040	0.040	
7	Off	Off	0.040	0.036	0.038	0.043	0.043	
8	0.051	Off	Off	0.037	0.035	0.042	0.051	
9	0.037	Off	Off	0.039	0.035	0.035	0.039	
10	0.037	0.036	0.039	0.030	0.040	0.039	0.040	
11	0.034	0.038	0.037	0.037	0.039	Off	0.039	
12	0.041	0.041	0.039	0.036	0.038	Off	0.041	
13	0.039	0.042	0.041	0.040	0.039	0.044	0.042	
14	0.039	0.045	0.040	0.040	0.048	0.041	0.045	
15	0.044	0.041	Off	0.042	0.040	0.042	0.044	
16	0.046	0.047	Off	0.039	0.046	0.039	0.047	
17	0.040	0.041	0.046	0.044	0.040	0.061	0.061	
18	0.045	0.043	Off	0.043	0.047	0.045	0.047	
19	0.047	0.045	0.043	0.044	0.043	0.045	0.047	
20	0.047	Off	0.044	Off	0.045	0.044	0.047	
21	0.046	Off	Off	0.042	0.040	0.041	0.046	
22	0.047	Off	Off	0.041	0.045	0.042	0.047	
23	0.041	Off	Off	0.047	0.034	0.044	0.047	
24	0.043	Off	Off	0.042	0.043	0.050	0.050	
25	0.043	0.043	0.039	Off	0.039	0.039	0.043	
26	0.044	Off	Off	0.039	0.036	0.043	0.044	
27	0.040	0.066	Off	0.039	0.040	0.040	0.066	
28	0.049	Off	Off	Off	Off	Off	0.049	
29	0.045	0.043	0.043	0.042	0.045	0.045	0.045	
30	0.043	0.044	Off	0.040	0.038	0.042	0.044	
31	0.040	0.040	Off	0.036	0.041	Off	0.041	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings \leq 0.3 NTU? <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 \geq 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All 4-hour turbidity readings \leq 1 NTU? <input checked="" type="radio"/> Yes / <input type="radio"/> No		
All turbidity readings < IFE ² triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No		

Notes:	PRINTED NAME: Dan Waterbury
	SIGNATURE:  DATE: 9/2/21
	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 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: Aug-21	Disinfection <i>Giardia</i> Log Inactive: 1
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Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³ [ppm or mg/L]	Contact Time (T) [minutes]	Actual CT C X T	Temp [° C]	pH	Required CT formula	CT Met? ³ Yes / No	Peak Hourly Flow GPM
1	1.18	241	284.4	15.5	7.58	33.3	YES	
2	1.08	241	260.3	15.3	7.62	33.9	YES	299
3	1.14	241	274.7	15.4	7.63	34.0	YES	238
4	1.08	241	260.3	15.5	7.65	33.8	YES	302
5	1.19	241	286.8	15.9	7.64	33.2	YES	229
6	1.21	241	291.6	15.8	7.64	33.5	YES	265
7	1.42	241	342.2	16.1	7.54	32.4	YES	266
8	1.16	241	279.6	15.4	7.71	35.1	YES	252
9	1	241	241.0	15.2	7.69	34.7	YES	268
10	1.07	241	257.9	15.2	7.73	35.5	YES	310
11	1.09	241	262.7	16.2	7.74	33.4	YES	337
12	1.13	241	272.3	16.4	7.70	32.6	YES	343
13	1.1	241	265.1	16.6	7.67	31.7	YES	278
14	1.17	241	282.0	16.7	7.73	32.5	YES	257
15	1.2	241	289.2	16.6	7.76	33.2	YES	230
16	1.15	241	277.2	16.4	7.74	33.2	YES	238
17	1.12	241	269.9	16.2	7.72	33.3	YES	251
18	1.26	241	303.7	15.6	7.76	35.7	YES	263
19	0.8	241	192.8	15.3	7.81	35.2	YES	258
20	0.8	241	192.8	15.1	7.86	36.4	YES	248
21	1.09	241	262.7	15.2	7.81	36.7	YES	231
22	1.01	241	243.4	14.9	7.86	37.7	YES	222
23	0.94	241	226.5	14.3	7.75	37.4	YES	209
24	0.96	241	231.4	14.2	7.68	36.8	YES	234
25	0.99	241	238.6	14.2	7.67	36.8	YES	275
26	0.96	241	231.4	14.4	7.80	37.9	YES	240
27	0.86	241	207.3	14.7	7.85	37.5	YES	243
28	0.93	241	224.1	14.4	7.85	38.5	YES	208
29	0.96	241	231.4	14.1	7.87	39.7	YES	228
30	0.92	241	221.7	13.9	7.84	39.6	YES	255
31	0.94	241	226.5	13.8	7.84	40.0	YES	216

³ If Cl₂ 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