


OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Clatsop
 Month/Year: Oct-21

Conventional or Direct Filtration

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	Off	Off	Off	Off	Off	Off	Off	
2	Off	Off	Off	0.040	0.037	0.036	0.040	
3	0.041	0.043	0.040	0.043	0.041	0.059	0.059	
4	0.045	0.039	0.047	0.066	0.052	0.048	0.066	
5	0.045	0.049	0.042	0.094	0.049	0.045	0.094	
6	0.045	0.056	0.047	0.060	0.050	0.050	0.060	
7	0.042	0.042	Off	0.088	0.055	0.048	0.088	
8	0.039	0.044	0.040	0.061	0.048	Off	0.061	
9	0.043	0.045	0.049	0.049	0.190	0.044	0.190	
10	0.052	0.043	0.041	0.047	0.044	0.047	0.052	
11	0.045	0.045	0.044	0.057	0.045	0.047	0.057	
12	0.047	Off	Off	0.062	0.048	0.040	0.062	
13	0.043	0.048	0.046	0.046	0.058	0.050	0.058	
14	0.048	0.080	0.046	Off	0.050	0.056	0.080	
15	0.052	0.047	0.044	0.071	0.056	0.046	0.071	
16	0.049	0.049	Off	0.046	Off	0.062	0.062	
17	0.053	0.051	0.047	0.048	0.052	0.049	0.053	
18	0.072	0.053	0.058	0.275	0.101	0.083	0.275	
19	0.067	0.065	0.063	0.239	Off	0.070	0.239	
20	0.063	0.063	0.054	0.155	0.064	0.049	0.155	
21	0.046	0.077	0.049	Off	0.066	0.069	0.077	
22	0.048	0.048	0.048	0.137	0.075	0.067	0.137	
23	0.048	Off	0.046	0.065	0.076	0.052	0.076	
24	0.052	0.048	0.047	Off	0.071	0.050	0.071	
25	0.049	0.050	0.045	Off	Off	Off	0.050	
26	Off	Off	Off	Off	Off	Off	Off	
27	Off	Off	Off	Off	Off	Off	Off	
28	Off	Off	Off	Off	0.054	0.051	0.054	
29	0.091	0.043	0.114	0.203	Off	Off	0.203	
30	0.134	Off	Off	Off	Off	Off	0.134	
31	Off	Off	Off	0.226	Off	Off	0.226	

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 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 ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes / <input type="radio"/> No
All 4-hour turbidity readings ≤ 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: 11/3/21
	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

System Name: Wickiup Water District	ID#: 41-00063	Month/Year: Oct-21	WTP - :B Disinfection <i>Giardia</i> Log Inactive: 1
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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 Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	GPM
1	0.75	241	180.8	12.8	8.19	47.6	YES	104
2	0.73	241	175.9	12.9	8.17	46.8	YES	88
3	0.69	241	166.3	12.8	8.13	46.2	YES	77
4	0.88	241	212.1	12.2	7.56	40.1	YES	122
5	0.88	241	212.1	12.2	7.56	40.1	YES	124
6	0.87	241	209.7	12.1	7.56	40.3	YES	126
7	0.9	241	216.9	11.1	7.64	44.4	YES	128
8	0.97	241	233.8	11.1	7.73	46.2	YES	215
9	1	241	241.0	11.0	7.80	47.8	YES	234
10	0.88	241	212.1	10.8	7.85	48.7	YES	233
11	0.96	241	231.4	10.3	7.91	51.9	YES	236
12	0.95	241	229.0	10.1	7.89	52.2	YES	249
13	1	241	241.0	10.1	7.93	53.2	YES	237
14	0.95	241	229.0	10.0	7.97	54.0	YES	242
15	0.94	241	226.5	10.3	7.84	50.5	YES	239
16	0.93	241	224.1	11.2	7.81	47.0	YES	243
17	0.9	241	216.9	11.4	7.77	45.6	YES	225
18	0.95	241	229.0	10.7	7.79	48.3	YES	241
19	0.96	241	231.4	10.4	7.67	47.3	YES	238
20	0.98	241	236.2	10.9	7.66	45.7	YES	242
21	0.92	241	221.7	11.2	7.69	45.0	YES	245
22	0.91	241	219.3	11.1	7.69	45.2	YES	241
23	0.94	241	226.5	11.4	7.71	44.8	YES	226
24	0.83	241	200.0	11.0	7.68	45.0	YES	231
25	0.97	241	233.8	10.9	7.73	46.8	YES	232
26	0.62	241	149.4	11.0	7.66	43.6	YES	215
27	0.77	241	185.6	10.9	7.70	45.3	YES	204
28	0.7	241	168.7	11.5	7.72	43.5	YES	200
29	0.75	241	180.8	11.3	8.38	56.0	YES	198
30	0.68	241	163.9	10.9	8.59	61.6	YES	205
31	0.81	241	195.2	10.8	8.65	64.4	YES	196

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