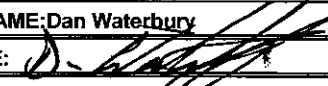


OHA - Drinking Water Services - Turbidity Monitoring Report Form

County: Clatsop
 Month/Year: Jun-22

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	0.060	0.043	0.047	0.041	0.024	0.032	0.060
2	Off	0.035	Off	0.019	0.022	0.020	0.035
3	0.021	0.057	0.037	0.064	0.057	0.058	0.064
4	0.071	0.049	0.072	0.063	0.096	0.222	0.222
5	Off	Off	Off	Off	Off	Off	Off
6	Off	Off	Off	0.029	0.038	0.027	0.038
7	0.030	0.042	0.030	0.019	0.053	0.021	0.053
8	0.034	0.029	0.037	0.028	0.021	0.028	0.037
9	0.045	0.036	0.047	0.018	0.024	Off	0.047
10	Off	Off	Off	Off	0.028	0.045	0.045
11	0.033	0.088	0.045	0.020	0.029	0.018	0.088
12	0.017	0.020	0.018	0.024	0.018	0.019	0.024
13	Off	Off	0.095	0.021	0.019	0.019	0.095
14	Off	Off	0.020	0.021	0.031	0.018	0.031
15	0.019	Off	Off	0.037	0.017	0.016	0.037
16	0.021	Off	Off	0.021	0.020	0.022	0.022
17	0.026	Off	Off	0.017	0.018	0.022	0.026
18	Off	Off	0.021	0.018	0.021	Off	0.021
19	0.020	Off	0.020	0.019	0.020	Off	0.020
20	Off	0.019	0.020	0.018	0.022	0.017	0.022
21	Off	Off	0.020	0.019	0.019	0.020	0.020
22	0.020	0.018	0.019	0.021	0.017	0.016	0.021
23	Off	Off	0.020	0.019	0.021	0.018	0.021
24	0.017	0.019	0.019	0.020	0.027	0.024	0.027
25	0.020	0.021	0.018	0.021	0.017	0.016	0.021
26	0.018	0.017	0.018	0.021	0.059	0.018	0.059
27	0.018	0.021	0.015	0.018	0.018	0.016	0.021
28	0.016	0.022	0.019	0.020	0.018	0.021	0.022
29	0.024	0.023	0.030	0.016	0.017	0.018	0.030
30	0.020	Off	Off	0.020	Off	Off	0.020
31							

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: 7/8/22
	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:	Jun-22	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	0.95	241	229.0	12.0	7.99	47.6	YES	171
2	0.94	241	226.5	12.3	7.94	45.8	YES	161
3	0.91	241	219.3	11.8	7.92	46.8	YES	198
4	0.85	241	204.9	11.8	7.94	46.9	YES	163
5	0.87	241	209.7	11.9	7.99	47.5	YES	164
6	0.82	241	197.6	11.7	7.91	46.5	YES	155
7	0.93	241	224.1	11.8	7.96	47.6	YES	173
8	1.11	241	267.5	12.1	7.93	47.1	YES	205
9	0.74	241	178.3	12.0	7.95	45.8	YES	144
10	0.9	241	216.9	12.1	7.96	46.5	YES	204
11	0.87	241	209.7	12.7	8.00	45.3	YES	163
12	0.87	241	209.7	11.9	8.07	48.8	YES	168
13	0.79	241	190.4	11.6	8.12	50.3	YES	171
14	0.92	241	221.7	12.6	8.09	47.4	YES	174
15	0.93	241	224.1	11.8	8.30	53.8	YES	161
16	0.86	241	207.3	11.7	8.16	51.1	YES	161
17	1.02	241	245.8	11.4	8.21	54.0	YES	166
18	0.97	241	233.8	11.4	8.14	52.4	YES	179
19	1.04	241	250.6	11.3	8.26	55.5	YES	173
20	1.12	241	269.9	12.1	8.31	54.0	YES	185
21	0.9	241	216.9	11.8	7.95	47.3	YES	193
22	1.06	241	255.5	12.5	7.94	45.8	YES	190
23	1.04	241	250.6	12.2	7.97	47.1	YES	202
24	0.99	241	238.6	12.2	8.16	50.1	YES	184
25	1.05	241	253.1	13.6	8.18	46.5	YES	200
26	1.08	241	260.3	14.5	8.24	44.9	YES	189
27	0.99	241	238.6	14.5	8.18	43.5	YES	169
28	0.92	241	221.7	15.1	8.22	42.1	YES	190
29	1.09	241	262.7	13.6	8.28	48.4	YES	153
30	0.95	241	229.0	13.5	8.23	47.1	YES	117
31		241						

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.dnce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350