

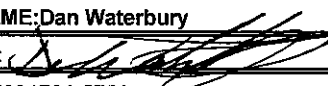
OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Clatsop

Conventional or Direct Filtration

Month/Year: Jul-22

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	0.015	0.017	0.018	0.017	Off	Off	0.018
2	Off	Off	Off	0.017	0.018	0.016	0.018
3	0.016	0.018	0.017	0.015	0.019	0.015	0.019
4	0.017	0.020	0.016	0.018	0.017	0.016	0.020
5	0.019	0.018	0.020	0.016	0.016	0.016	0.020
6	0.016	0.019	0.017	0.018	0.019	0.017	0.019
7	0.018	0.020	0.019	0.024	0.017	0.017	0.024
8	0.019	Off	Off	0.017	0.028	Off	0.028
9	Off	Off	0.027	0.020	0.015	0.017	0.027
10	0.018	0.021	0.019	0.018	Off	0.022	0.022
11	0.015	Off	0.018	0.016	0.016	0.017	0.018
12	0.017	0.018	0.015	0.017	0.014	0.015	0.018
13	0.019	0.016	0.017	0.015	0.014	0.014	0.019
14	0.014	0.014	0.013	0.016	0.015	0.015	0.016
15	0.019	0.017	Off	0.015	0.015	0.015	0.019
16	0.016	0.016	0.016	0.017	0.015	0.024	0.024
17	0.016	Off	Off	0.017	0.021	0.013	0.021
18	0.020	0.018	0.016	0.015	0.015	0.017	0.020
19	0.017	0.015	0.017	0.016	0.015	0.019	0.019
20	0.016	0.016	0.016	0.016	0.015	0.017	0.017
21	0.019	0.014	Off	0.017	0.015	0.018	0.019
22	Off	0.015	0.019	0.016	0.015	0.014	0.019
23	Off	Off	0.017	0.017	0.016	0.016	0.017
24	0.015	0.018	0.021	0.016	0.016	0.015	0.021
25	0.014	0.016	0.016	0.018	0.015	0.016	0.018
26	0.014	0.014	0.017	0.016	0.015	0.015	0.017
27	0.017	0.015	0.017	0.016	0.014	0.015	0.017
28	0.013	0.014	0.015	0.016	0.014	0.014	0.016
29	Off	0.014	0.015	0.013	0.018	0.016	0.018
30	0.018	0.017	0.016	0.015	0.015	0.016	0.018
31	0.015	0.015	0.014	0.015	0.015	0.017	0.017

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: 8/8/22
	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:	Jul-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	0.88	241	212.1	13.5	8.31	48.2	YES	65
2	0.86	241	207.3	14.3	8.13	42.7	YES	50
3	1.1	241	265.1	13.5	8.29	49.0	YES	211
4	0.94	241	226.5	12.9	8.22	48.8	YES	170
5	0.92	241	221.7	13.1	8.31	49.7	YES	167
6	0.91	241	219.3	14.1	8.37	47.5	YES	161
7	0.89	241	214.5	14.1	8.38	47.5	YES	90
8	0.96	241	231.4	13.9	8.28	46.8	YES	103
9	0.84	241	202.4	13.9	8.35	47.4	YES	106
10	0.9	241	216.9	13.8	8.31	47.3	YES	158
11	0.89	241	214.5	14.1	8.32	46.5	YES	186
12	0.86	241	207.3	14.2	8.21	44.2	YES	191
13	0.85	241	204.9	14.3	8.29	45.2	YES	192
14	0.86	241	207.3	14.2	8.28	45.4	YES	192
15	0.87	241	209.7	14.2	8.26	45.1	YES	141
16	0.74	241	178.3	15.2	8.09	39.1	YES	155
17	0.74	241	178.3	14.2	8.34	45.8	YES	196
18	0.84	241	202.4	14.1	8.22	44.6	YES	146
19	0.89	241	214.5	14.1	8.13	43.4	YES	256
20	0.79	241	190.4	14.7	8.30	43.9	YES	216
21	0.88	241	212.1	14.3	8.29	45.3	YES	180
22	0.94	241	226.5	14.3	8.31	46.0	YES	162
23	1.03	241	248.2	14.3	8.27	45.8	YES	152
24	0.94	241	226.5	14.6	8.08	41.4	YES	152
25	0.94	241	226.5	15.5	8.18	40.5	YES	246
26	0.96	241	231.4	15.4	8.15	40.4	YES	220
27	0.9	241	216.9	15.4	8.22	41.2	YES	271
28	0.9	241	216.9	15.2	8.12	40.2	YES	199
29	0.81	241	195.2	17.4	7.92	31.9	YES	165
30	0.97	241	233.8	15.8	8.16	39.5	YES	249
31	1.02	241	245.8	15.7	8.21	40.8	YES	225

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