


OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Clatsop  
 Month/Year: Nov-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 <sup>1</sup> [NTU]
1	Off	Off	Off	0.024	0.015	0.015	0.024
2	0.029	0.027	0.025	0.113	0.048	0.026	0.113
3	0.023	0.015	0.047	0.020	0.012	0.010	0.047
4	0.247	Off	Off	Off	Off	Off	0.247
5	Off	Off	Off	Off	Off	Off	Off
6	Off	Off	Off	Off	Off	Off	Off
7	Off	Off	Off	Off	Off	Off	Off
8	Off	Off	Off	Off	Off	0.001	0.001
9	0.002	Off	0.003	0.027	0.028	0.016	0.028
10	0.017	0.016	0.018	0.040	0.072	0.022	0.072
11	0.025	0.026	0.024	0.024	0.020	0.019	0.026
12	0.016	0.019	0.017	0.020	0.022	0.017	0.022
13	0.016	0.019	Off	0.017	0.017	0.019	0.019
14	0.024	Off	Off	0.019	0.017	0.020	0.024
15	0.020	Off	Off	0.018	0.018	0.019	0.020
16	0.028	0.016	Off	0.017	0.016	0.019	0.028
17	0.017	Off	Off	0.026	0.018	0.017	0.026
18	0.019	0.021	Off	0.020	0.020	0.022	0.022
19	0.021	Off	Off	0.026	0.017	0.017	0.026
20	0.016	Off	Off	0.020	0.029	0.020	0.029
21	0.018	Off	Off	0.015	0.016	0.015	0.018
22	Off	Off	0.018	0.017	0.023	Off	0.023
23	0.023	Off	Off	Off	0.016	0.016	0.023
24	0.015	Off	Off	Off	Off	Off	0.015
25	0.017	Off	Off	0.019	0.017	0.045	0.045
26	0.085	Off	Off	0.027	0.015	0.018	0.085
27	0.015	Off	Off	0.028	0.023	0.021	0.028
28	0.019	0.035	Off	0.017	0.019	0.020	0.035
29	Off	Off	0.023	0.017	0.019	0.021	0.023
30	0.073	Off	Off	Off	0.179	0.163	0.179
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? <span style="float:right">Yes/No</span>	CT's met everyday? (see back) <span style="float:right">Yes/No</span>	All Cl2 residual at entry point ≥ 0.2 mg/l? <span style="float:right">Yes/No</span>
All 4-hour turbidity readings ≤ 1 NTU? <span style="float:right">Yes/No</span>		
All turbidity readings < IFE <sup>2</sup> triggers <span style="float:right">Yes/No</span>		
Notes:	PRINTED NAME: Dan Waterbury	
	SIGNATURE: 	DATE: 12/8/22
	PHONE #: (503) 791-5751	CERT #: 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: Nov-22	Disinfection <i>Giardia</i> Log Inactive: 1
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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>	Peak Hourly Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	GPM
1	0.56	241	135.0	10.2	8.01	51.7	YES	145
2	0.57	241	137.4	10.1	8.12	54.2	YES	188
3	0.53	241	127.7	10.1	8.14	54.3	YES	169
4	0.49	241	118.1	9.9	8.18	55.6	YES	174
5	0.42	241	101.2	9.8	7.88	49.9	YES	154
6	0.51	241	122.9	9.7	8.01	53.2	YES	145
7	0.37	241	89.2	9.5	7.81	49.4	YES	150
8	0.52	241	125.3	8.4	7.75	52.9	YES	140
9	0.62	241	149.4	8.4	7.70	52.6	YES	140
10	1.34	241	322.9	7.6	8.13	70.5	YES	168
11	0.83	241	200.0	7.6	8.09	65.5	YES	228
12	0.86	241	207.3	7.5	8.13	67.1	YES	163
13	0.91	241	219.3	7.4	8.12	67.7	YES	170
14	0.92	241	221.7	7.6	8.21	69.1	YES	183
15	0.99	241	238.6	7.6	8.36	73.6	YES	184
16	0.97	241	233.8	7.7	8.24	69.8	YES	194
17	0.72	241	173.5	7.0	8.39	75.1	YES	193
18	0.9	241	216.9	6.8	8.29	75.0	YES	180
19	0.96	241	231.4	6.9	8.31	75.6	YES	169
20	1	241	241.0	6.8	8.36	77.9	YES	186
21	0.73	241	175.9	6.2	8.06	70.4	YES	185
22	0.75	241	180.8	7.7	8.06	63.7	YES	198
23	0.73	241	175.9	7.4	7.88	60.8	YES	184
24	0.79	241	190.4	7.5	7.83	59.7	YES	177
25	0.84	241	202.4	7.8	7.96	61.7	YES	179
26	0.82	241	197.6	7.5	7.86	60.6	YES	178
27	0.81	241	195.2	7.7	7.75	57.4	YES	176
28	0.92	241	221.7	7.1	7.94	64.8	YES	180
29	0.82	241	197.6	7.3	7.92	62.7	YES	189
30	0.78	241	188.0	7.3	7.86	61.1	YES	191
31		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.

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