


OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Clatsop
 Month/Year: Feb-23

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	0.017	0.020	0.022	0.019	0.022
2	0.020	Off	Off	0.036	0.020	0.020	0.036
3	0.021	Off	Off	0.036	0.020	0.020	0.036
4	0.021	Off	Off	0.023	0.020	0.022	0.023
5	Off	Off	Off	0.024	0.020	0.025	0.024
6	0.022	Off	Off	0.022	0.020	0.024	0.024
7	0.023	Off	Off	0.032	0.023	0.023	0.032
8	Off	Off	Off	0.022	0.025	0.020	0.025
9	Off	Off	Off	0.025	0.024	0.022	0.025
10	Off	Off	Off	0.026	0.022	0.022	0.026
11	0.025	Off	Off	0.065	0.026	0.025	0.065
12	0.023	Off	Off	0.024	0.023	0.023	0.024
13	0.024	Off	Off	0.025	Off	0.027	0.027
14	0.026	0.024	0.026	0.035	0.053	0.029	0.053
15	0.030	Off	Off	0.028	0.025	0.030	0.030
16	0.028	Off	Off	0.064	0.036	0.033	0.064
17	0.035	0.029	0.028	0.046	0.039	0.034	0.046
18	Off	0.029	Off	0.030	0.027	0.027	0.030
19	Off	Off	0.031	0.032	0.032	0.033	0.033
20	0.028	Off	Off	0.027	0.034	0.032	0.034
21	Off	0.026	0.044	0.029	0.048	0.026	0.048
22	Off	Off	Off	0.065	Off	0.039	0.065
23	0.040	0.036	0.035	0.036	0.032	0.033	0.040
24	Off	Off	Off	0.075	0.047	0.090	0.090
25	0.037	0.034	0.034	0.035	0.037	0.076	0.076
26	Off	0.077	0.036	0.031	0.051	0.040	0.077
27	0.031	0.029	0.034	0.051	0.052	0.050	0.052
28	0.044	0.029	Off	Off	0.063	0.034	0.063
29							
30							
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 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	CT's met everyday? (see back) <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl ₂ residual at entry point ≥ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
Notes:	PRINTED NAME: Dan Waterbury SIGNATURE:  PHONE #: (503)791-5151	
	DATE: 3/7/23	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:	Feb-23	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	1.22	241	294.0	5.5	7.68	68.1	YES	187
2	1.23	241	296.4	5.2	7.71	70.4	YES	180
3	1.33	241	320.5	5.9	7.75	68.9	YES	171
4	1.22	241	294.0	6.3	7.79	67.1	YES	158
5	1.24	241	298.8	6.8	7.74	63.9	YES	180
6	1.22	241	294.0	7.0	7.80	64.2	YES	181
7	1.28	241	308.5	7.6	7.85	63.2	YES	176
8	1.29	241	310.9	6.9	7.84	66.2	YES	194
9	1.27	241	306.1	7.3	7.85	64.5	YES	187
10	1.28	241	308.5	7.8	7.86	62.6	YES	183
11	1.31	241	315.7	6.7	7.91	69.0	YES	167
12	1.28	241	308.5	6.8	7.92	68.5	YES	199
13	1.19	241	286.8	7.5	7.93	64.9	YES	195
14	1.22	241	294.0	7.2	7.95	66.9	YES	180
15	1.23	241	296.4	5.7	7.96	74.5	YES	213
16	1.24	241	298.8	6.1	7.91	71.3	YES	195
17	1.32	241	318.1	6.6	7.91	69.5	YES	194
18	1.3	241	313.3	6.3	8.03	74.0	YES	167
19	1.31	241	315.7	6.6	7.82	67.2	YES	189
20	1.31	241	315.7	7.0	7.94	68.3	YES	190
21	1.33	241	320.5	6.9	7.91	68.2	YES	195
22	1.29	241	310.9	6.8	7.96	69.6	YES	181
23	0.94	241	226.5	6.1	8.01	71.4	YES	226
24	0.99	241	238.6	5.8	8.27	80.6	YES	210
25	1.13	241	272.3	5.7	8.31	83.8	YES	217
26	1.09	241	262.7	5.9	8.26	80.7	YES	220
27	1.04	241	250.6	5.0	7.82	72.7	YES	193
28	1.05	241	253.1	4.6	7.86	75.9	YES	237
29		241						
30		241						
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.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350