

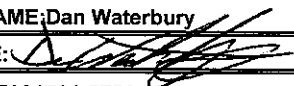
**OHA - Drinking Water Services -Turbidity Monitoring Report Form**  
**Conventional or Direct Filtration**

County: **Clatsop**  
 Month/Year: **May-23**

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	0.013	Off	Off	0.012	0.013	0.014	0.014
2	Off	Off	0.025	0.012	0.012	0.012	0.025
3	Off	Off	Off	0.015	0.019	0.013	0.019
4	Off	Off	0.014	0.013	0.034	Off	0.034
5	Off	Off	0.080	0.012	0.011	0.011	0.080
6	0.030	0.011	0.010	0.014	0.013	Off	0.030
7	Off	Off	0.012	0.013	0.011	0.013	0.013
8	0.010	Off	Off	0.012	0.013	0.014	0.014
9	0.012	Off	Off	0.012	0.010	0.012	0.012
10	0.010	0.012	0.013	0.011	0.012	0.013	0.013
11	0.010	0.013	0.012	0.012	0.013	0.013	0.013
12	0.013	0.012	0.011	0.014	0.017	0.012	0.017
13	0.013	0.012	0.013	0.007	0.013	0.012	0.013
14	0.012	0.017	0.014	0.014	0.013	0.013	0.017
15	0.014	0.014	Off	0.012	0.013	Off	0.014
16	0.013	0.012	0.012	Off	Off	Off	0.013
17	Off	Off	Off	0.010	0.011	0.023	0.023
18	0.013	0.013	0.013	0.011	0.013	0.016	0.016
19	0.014	0.015	0.017	0.011	0.013	0.012	0.017
20	Off	0.012	0.014	0.012	0.013	0.013	0.014
21	0.019	0.013	Off	0.010	0.014	0.012	0.019
22	0.014	0.015	Off	0.013	0.015	0.012	0.015
23	0.015	Off	0.011	0.034	0.014	0.015	0.034
24	0.015	0.015	0.021	0.013	0.012	0.013	0.021
25	0.012	Off	0.014	0.014	0.013	0.012	0.014
26	0.013	0.014	0.014	0.020	Off	0.011	0.020
27	Off	Off	0.012	0.012	0.012	0.024	0.024
28	0.013	0.012	0.014	0.015	0.010	0.013	0.015
29	0.012	0.015	0.011	0.011	0.015	0.017	0.017
30	0.013	Off	Off	0.013	0.013	0.013	0.013
31	0.012	0.012	0.014	0.015	0.014	0.015	0.015

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 <sup>2</sup> triggers <input checked="" type="radio"/> Yes <input type="radio"/> No		

Notes:	PRINTED NAME: <b>Dan Waterbury</b>	
	SIGNATURE: 	DATE: <b>6/5/23</b>
	PHONE #: <b>( 503 ) 791-5751</b>	CERT #: <b>T-08798</b>

<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:	May-23	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	1.06	241	255.5	10.7	8.16	55.9	YES	190
2	1.03	241	248.2	10.7	8.14	55.3	YES	182
3	1.07	241	257.9	10.9	8.14	54.8	YES	185
4	1.05	241	253.1	11.3	8.12	52.8	YES	179
5	0.84	241	202.4	10.3	7.92	51.4	YES	175
6	0.87	241	209.7	10.2	8.13	55.9	YES	188
7	0.91	241	219.3	10.3	8.11	55.4	YES	185
8	0.85	241	204.9	10.9	7.74	46.3	YES	192
9	1.08	241	260.3	10.6	7.91	51.6	YES	282
10	1.12	241	269.9	10.2	7.85	52.1	YES	212
11	1.1	241	265.1	10.9	7.84	49.4	YES	200
12	1.05	241	253.1	11.8	7.98	48.6	YES	198
13	1.05	241	253.1	12.8	8.00	45.9	YES	176
14	1.14	241	274.7	13.8	7.98	43.1	YES	202
15	0.87	241	209.7	14.1	7.92	40.1	YES	189
16	0.89	241	214.5	14.0	7.75	38.0	YES	171
17	0.85	241	204.9	13.9	7.73	37.8	YES	190
18	0.86	241	207.3	14.1	7.73	37.3	YES	219
19	0.84	241	202.4	13.4	7.77	39.6	YES	200
20	0.86	241	207.3	13.6	7.81	39.7	YES	213
21	0.93	241	224.1	13.3	7.75	39.9	YES	233
22	1.09	241	262.7	13.1	7.90	43.6	YES	204
23	1.1	241	265.1	13.2	7.87	42.8	YES	192
24	1.03	241	248.2	12.1	8.11	49.8	YES	193
25	1.09	241	262.7	12.2	8.23	52.0	YES	224
26	1.09	241	262.7	12.4	8.19	50.6	YES	194
27	1	241	241.0	12.7	8.16	48.7	YES	198
28	1.06	241	255.5	12.4	8.26	51.7	YES	184
29	1.08	241	260.3	13.0	8.06	46.4	YES	194
30	1.09	241	262.7	11.8	8.24	53.6	YES	227
31	1.12	241	269.9	11.5	8.18	53.7	YES	195

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