

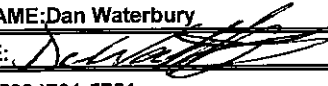
OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: Clatsop

Conventional or Direct Filtration

Month/Year: Sep-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	Off	Off	Off	0.091	0.031	Off	0.091
2	0.029	0.026	0.025	0.022	0.029	0.024	0.029
3	0.023	0.026	Off	Off	0.024	0.028	0.028
4	0.023	0.026	Off	0.025	0.022	0.028	0.028
5	0.025	0.027	0.027	0.025	0.026	0.023	0.027
6	0.026	Off	0.025	0.032	0.022	0.022	0.032
7	0.025	0.025	Off	0.021	Off	0.023	0.025
8	0.024	0.025	Off	0.021	0.019	0.020	0.025
9	0.021	0.022	0.022	0.023	0.021	0.030	0.030
10	0.026	Off	0.030	0.028	Off	0.025	0.030
11	0.028	0.027	0.028	0.028	0.028	0.027	0.028
12	0.027	0.037	0.028	0.031	0.027	0.026	0.031
13	Off	Off	0.027	0.030	0.026	0.028	0.030
14	0.030	0.029	0.031	0.028	0.028	0.025	0.031
15	0.027	0.040	Off	0.026	0.027	0.024	0.040
16	0.029	0.026	0.028	0.032	0.025	0.025	0.032
17	0.026	Off	Off	0.027	0.024	0.029	0.029
18	0.026	0.025	0.030	0.029	0.022	Off	0.030
19	Off	Off	0.025	0.026	0.026	0.027	0.027
20	0.024	0.025	0.032	0.036	Off	Off	0.036
21	0.063	0.030	0.025	0.029	0.023	0.024	0.060
22	0.027	Off	0.027	0.024	0.023	0.026	0.027
23	0.026	0.032	Off	0.022	0.022	0.021	0.026
24	0.024	Off	Off	0.026	0.021	0.039	0.039
25	0.024	0.025	Off	0.023	0.030	0.063	0.063
26	Off	Off	Off	Off	0.155	Off	0.155
27	Off	Off	Off	Off	0.040	Off	0.040
28	0.025	0.028	0.029	0.019	0.021	0.021	0.029
29	0.024	0.024	0.019	0.016	0.021	0.020	0.024
30	0.021	0.018	0.021	0.021	0.021	0.020	0.021
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 <sup>2</sup> triggers <input checked="" type="radio"/> Yes / <input type="radio"/> No		
Notes:	PRINTED NAME: Dan Waterbury	
	SIGNATURE: 	DATE: 10/9/23
	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: Sep-23 Disinfection *Giardia* Log Inactive: 1

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	0.6	241	144.6	15.2	7.67	32.9	YES	187
2	0.56	241	135.0	15.5	7.53	30.5	YES	180
3	0.7	241	168.7	15.7	7.53	30.6	YES	182
4	0.76	241	183.2	15.2	7.60	32.7	YES	184
5	1.04	241	250.6	14.9	7.65	35.0	YES	197
6	0.92	241	221.7	14.5	7.68	35.9	YES	212
7	0.97	241	233.8	14.1	7.71	37.5	YES	207
8	1.06	241	255.5	13.9	7.74	38.8	YES	197
9	1.2	241	289.2	14.1	7.80	39.8	YES	188
10	1.24	241	298.8	14.2	7.75	39.0	YES	218
11	1.38	241	332.6	14.3	7.93	42.0	YES	192
12	1.31	241	315.7	14.1	7.98	43.0	YES	179
13	1.38	241	332.6	14.1	8.03	44.2	YES	193
14	1.46	241	351.9	14.4	8.02	43.5	YES	203
15	1.54	241	371.1	14.4	8.10	45.3	YES	192
16	1.15	241	277.2	14.7	8.15	43.2	YES	178
17	1.06	241	255.5	14.5	8.09	42.4	YES	187
18	1.11	241	267.5	14.0	8.13	44.8	YES	189
19	1.16	241	279.6	13.7	8.24	47.8	YES	212
20	1.11	241	267.5	13.8	8.18	46.2	YES	186
21	1.05	241	253.1	13.7	8.25	47.4	YES	199
22	1.12	241	269.9	12.7	8.24	50.8	YES	182
23	1.01	241	243.4	13.1	8.28	49.6	YES	173
24	1.13	241	272.3	13.0	8.32	51.4	YES	185
25	1.04	241	250.6	12.8	8.29	51.0	YES	173
26	1.1	241	265.1	12.8	8.24	50.4	YES	155
27	1.18	241	284.4	12.9	8.39	53.4	YES	170
28	1.02	241	245.8	12.6	8.33	52.3	YES	166
29	0.9	241	216.9	12.4	8.07	47.4	YES	182
30	1.03	241	248.2	11.8	8.00	48.9	YES	174
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