

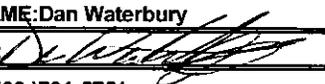
OHA - Drinking Water Services -Turbidity Monitoring Report Form

County: **Clatsop**
 Month/Year: **Nov-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	0.021	Off	Off	0.020	0.020	0.023	0.023
2	0.051	Off	Off	Off	0.037	0.039	0.051
3	0.023	0.025	0.021	0.020	0.026	0.019	0.026
4	Off	Off	Off	Off	Off	Off	Off
5	Off	Off	Off	Off	Off	Off	Off
6	Off	Off	Off	0.031	Off	0.026	0.031
7	0.030	0.022	0.039	0.103	Off	Off	0.103
8	0.022	0.019	Off	0.020	0.017	0.023	0.023
9	0.016	0.018	0.020	0.066	0.033	0.020	0.066
10	0.027	0.023	0.018	0.018	0.019	0.018	0.027
11	0.023	0.031	0.022	0.057	0.034	0.020	0.057
12	0.020	0.020	0.024	0.022	0.021	0.024	0.024
13	0.020	0.020	Off	0.067	0.023	0.020	0.067
14	0.021	0.019	0.019	0.020	0.018	0.020	0.021
15	0.018	0.018	0.016	Off	0.071	0.187	0.187
16	0.187	0.185	0.179	0.072	0.044	0.025	0.187
17	0.015	0.018	0.019	0.027	0.031	0.024	0.031
18	0.017	0.016	0.017	0.018	0.018	0.018	0.018
19	0.019	0.019	0.020	0.040	0.019	0.020	0.040
20	0.018	0.018	Off	0.018	0.018	0.022	0.022
21	0.022	0.018	0.018	0.021	0.018	0.015	0.022
22	0.017	Off	0.017	0.020	Off	0.017	0.020
23	0.017	0.025	Off	0.038	0.018	0.018	0.038
24	0.020	0.028	Off	0.019	0.018	0.019	0.028
25	0.018	0.017	Off	0.020	Off	0.020	0.020
26	0.019	0.023	Off	0.021	Off	Off	0.023
27	0.024	0.025	0.023	0.024	0.019	0.018	0.025
28	0.021	0.023	0.021	0.024	0.017	0.021	0.024
29	Off	Off	0.022	0.039	0.020	0.020	0.039
30	0.019	0.024	0.023	0.021	0.021	0.025	0.025
31							

Conventional or Direct Filtration	Monthly Summary (Answer Yes or No)	
95% of 4-hour turbidity readings ≤ 0.3 NTU? Yes/No	CT's met everyday? (see back) Yes/No	All Cl2 residual at entry point ≥ 0.2 mg/l? Yes/No
All 4-hour turbidity readings ≤ 1 NTU? Yes/No		
All turbidity readings < IFE ² triggers Yes/No		

Notes:	PRINTED NAME: Dan Waterbury	
	SIGNATURE: 	DATE: 12/07/23
	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:	Nov-23	Disinfection Log Inactive:	Giardia 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	1.09	241	262.7	9.6	8.64	71.9	YES	187
2	1.13	241	272.3	9.5	8.66	73.3	YES	196
3	1.12	241	269.9	9.2	8.71	76.1	YES	170
4	1.13	241	272.3	9.2	8.65	74.6	YES	163
5	0.74	241	178.3	9.4	8.68	71.0	YES	181
6	1.03	241	248.2	13.4	8.53	53.4	YES	169
7	1.17	241	282.0	10.7	8.45	62.8	YES	173
8	1.69	241	407.3	9.7	8.63	76.4	YES	163
9	1.64	241	395.2	9.4	8.24	67.2	YES	163
10	1.35	241	325.4	9.7	8.05	59.4	YES	176
11	1.35	241	325.4	9.9	8.18	61.5	YES	186
12	1.28	241	308.5	9.8	8.23	62.5	YES	194
13	1.45	241	349.5	9.5	7.92	58.1	YES	203
14	1.3	241	313.3	8.8	7.91	59.7	YES	173
15	1.43	241	344.6	9.2	7.94	59.6	YES	177
16	1.26	241	303.7	8.7	7.80	57.5	YES	252
17	1.12	241	269.9	8.5	7.69	55.1	YES	172
18	1.12	241	269.9	9.0	7.55	50.7	YES	182
19	1.23	241	296.4	9.3	7.40	47.7	YES	198
20	1.08	241	260.3	9.9	7.45	45.9	YES	193
21	1.15	241	277.2	8.5	7.51	51.9	YES	229
22	1.17	241	282.0	8.4	7.72	56.4	YES	179
23	1.24	241	298.8	8.5	7.73	56.7	YES	182
24	1.15	241	277.2	8.1	7.86	60.4	YES	180
25	1.45	241	349.5	6.8	7.32	56.2	YES	179
26	1.75	241	421.8	7.2	7.67	64.3	YES	183
27	1.16	241	279.6	7.1	8.36	77.8	YES	193
28	1.12	241	269.9	6.5	8.41	82.2	YES	177
29	1.15	241	277.2	6.3	8.49	86.1	YES	187
30	1.03	241	248.2	6.4	8.45	83.1	YES	198
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