

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Tillamook**

System Name: **Oceanside Water District**

Month/Year: **Sep-2024**

PWS ID#: 41 - **00585**

Minimum test pressure applied: **P** psi

Plant ID: WTP - **A**

Minimum test pressure req'd: **18** psi

(e.g., "A")

DIT = Direct Integrity Test on filter(s) [Yes, No, or "off" if all filters are offline] ⇔

PDR = Pressure Decay Rate

LRC = Log Removal Credit

PDR_{Max} [^{psi}/min]

LRC [log removal]

0.900

4.00

DIT Daily

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	Highest PDR of day [^{psi} /min]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.017	0.0173	0.017	0.02	4.89	Y
2	0.016	0.016	0.016	0.03	4.69	Y
3	0.017	0.0169	0.017	0.03	4.63	Y
4	0.019	0.0189	0.019	0.03	4.46	Y
5	0.014	0.014	0.014	0.03	4.54	Y
6	0.014	0.014	0.014	0.30	4.53	Y
7	0.014	0.014	0.014	0.03	4.32	Y
8	0.014	0.014	0.014	0.02	4.80	Y
9	0.024	0.024	0.024	0.03	4.55	Y
10	0.016	0.0164	0.016	0.03	4.51	Y
11	0.018	0.018	0.018	0.02	5.06	Y
12	0.014	0.014	0.014	0.03	4.53	Y
13	0.014	0.014	0.014	0.02	4.83	Y
14	0.014	0.014	0.014	0.04	4.44	Y
15	0.014	0.014	0.014	0.03	4.72	Y
16	0.014	0.014	0.014	0.02	4.95	Y
17	0.014	0.014	0.014	0.02	4.76	Y
18	0.014	0.014	0.014	0.01	5.63	Y
19	0.014	0.014	0.014	0.02	4.87	Y
20	0.014	0.014	0.014	0.03	4.67	Y
21	0.014	0.014	0.014	0.03	4.49	Y
22	0.014	0.014	0.014	0.03	4.66	Y
23	0.014	0.014	0.014	0.03	4.64	Y
24	0.017	0.0169	0.017	0.03	4.55	Y
25	0.016	0.0156	0.016	0.03	4.67	Y
26	0.014	0.015	0.015	0.02	4.86	Y
27	0.013	0.014	0.014	0.03	4.48	Y
28	0.014	0.014	0.014	0.03	4.85	Y
29	0.014	0.014	0.014	0.03	4.64	Y
30	0.014	0.014	0.014	0.03	4.50	Y

3				
95% of daily turbidity readings ≤ 1 NTU? [Y/N]	All turbidity readings ≤ 5 NTU? [Y/N]	All IFE turbidity readings ≤ 0.15 NTU? [Y/N]	Performance std met? [Y/N] (PDR ≤ PDR _{Max} , LRV ≥ LRC)	DIT Daily?
Yes	Yes	Yes	Yes	Yes
CT's met daily? (p. 2)	All Cl ₂ residual at EP ≥ 0.2 mg/L?	PDR ≤ PDR _{Max} ?	LRV _{ambient} ≥ LRC?	
Yes	Yes	Yes	Yes	

PRINTED NAME: **David L. Nordman**

SIGNATURE: 

Notes:

DATE: **10/8/2024**

WT CERT #: **T08918**

PHONE #: **503-842-6462**

◆ Used for optimization purposes only.

OHA-DWS

Disinfection Monthly Operating Report

System Name: Oceanside Water District

PWS ID#: 41 - 00585

Plant ID : WTP - A

0.5

↩ Log
Inactivation
Required via
Disinfection

Day	Minimum Cl ₂ Residual at 1 st User (C) * [^{mg} / _L = ppm]	Contact Time (T) [minutes]	Actual CT C x T (Formula)	Temp [° C]	pH	Required CT (Formula)	CT Met? * [Yes / No] (Formula)	Peak Hourly Demand Flow [GPM]	Notes (e.g. "Plant Off")
1	0.790	142	112.2	16.4	7.54	14.8	YES	300	
2	0.770	142	109.3	15.8	7.64	15.9	YES	300	
3	0.770	142	109.3	15.8	7.56	15.5	YES	300	
4	0.730	142	103.7	15.7	7.67	16.2	YES	300	
5	0.740	142	105.1	16.1	7.51	14.8	YES	300	
6	0.670	142	95.1	16.1	7.58	15.1	YES	300	
7	0.750	142	106.5	0.0	7.54	44.7	YES	300	
8	0.700	142	99.4	16.3	7.40	14.0	YES	300	
9	0.690	142	98.0	17.1	7.48	13.7	YES	300	
10	0.600	142	85.2	16.9	7.61	14.4	YES	300	
11	0.690	142	98.0	16.4	7.54	14.6	YES	300	
12	0.650	142	92.3	16.3	7.49	14.4	YES	300	
13	0.829	142	117.7	16.0	7.55	15.3	YES	300	
14	0.620	142	88.0	17.1	7.51	13.7	YES	300	
15	0.640	142	90.9	15.6	7.41	14.6	YES	300	
16	0.590	142	83.8	16.7	7.53	14.1	YES	300	
17	0.650	142	92.3	15.9	7.63	15.6	YES	300	
18	0.760	142	107.9	16.0	7.58	15.4	YES	300	
19	0.680	142	96.6	15.7	7.55	15.4	YES	300	
20	0.580	142	82.4	17.7	7.67	13.9	YES	300	
21	0.590	142	83.8	15.6	7.59	15.5	YES	300	
22	0.680	142	96.6	15.7	7.53	15.3	YES	300	
23	0.790	142	112.2	15.9	7.47	14.9	YES	300	
24	0.740	142	105.1	17.1	7.39	13.3	YES	300	
25	0.820	142	116.4	15.9	7.42	14.7	YES	300	
26	0.710	142	100.8	15.5	7.40	14.8	YES	300	
27	0.600	142	85.2	15.5	7.43	14.8	YES	300	
28	0.680	142	96.6	16.0	7.45	14.5	YES	300	
29	0.650	142	92.3	14.7	7.41	15.5	YES	300	
30	0.680	142	96.6	14.7	7.43	15.7	YES	300	
31	0.710	142	100.8	15.9	7.50	14.9	YES	300	

* If chlorine concentration at entry point < 0.2 ^{mg}/_L, or CT not met, notify DWS within 24 hours.

Submit this monthly report by the 10th of following month by

mail: Drinking Water Services
PO Box 14350
Portland, OR 97293-0350

email: dwp.dmce@odhsoha.oregon.gov

fax: 971-673-0458

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