

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Tillamook**

System Name: **Oceanside Water District**

Month/Year: **February, 2025**

PWS ID#: 41 - **00585**

Minimum test pressure applied: **20** psi

Plant ID: WTP - **A**
(e.g., "A")

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

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

PDR = Pressure Decay Rate

LRC = Log Removal Credit

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	PDR _{Max} [^{psi} /min]	LRC [log removal]	DIT Daily
				0.900	4.00	
				Highest PDR of day [^{psi} /min]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.012	0.024	0.024	0.031	4.407	Y
2	0.013	0.016	0.016	0.031	4.461	Y
3	0.012	0.022	0.022	0.035	4.439	Y
4	0.013	0.017	0.017	0.022	4.620	Y
5	0.012	0.030	0.030	0.024	4.649	Y
6	0.013	0.025	0.025	0.024	4.660	Y
7	0.014	0.018	0.018	0.013	5.833	Y
8	0.013	0.022	0.022	0.014	5.690	Y
9	0.013	0.013	0.013	0.021	4.914	Y
10	0.012	0.024	0.024	0.021	4.910	Y
11	0.013	0.014	0.014	0.023	4.823	Y
12	0.012	0.016	0.016	0.009	4.890	Y
13	0.014	0.014	0.014	0.009	4.808	Y
14	0.012	0.020	0.020	0.026	4.723	Y
15	0.012	0.014	0.014	0.019	4.980	Y
16	0.012	0.021	0.021	0.027	4.659	Y
17	0.012	0.013	0.013	0.028	4.612	Y
18	0.013	0.015	0.015	0.028	4.667	Y
19	0.014	0.021	0.021	0.029	4.501	Y
20	0.013	0.018	0.018	0.029	4.559	Y
21	0.012	0.018	0.018	0.029	4.502	Y
22	0.012	0.015	0.015	0.028	4.521	Y
23	0.012	0.017	0.017	0.028	4.583	Y
24	0.013	0.015	0.015	0.025	4.623	Y
25	0.012	0.015	0.015	0.030	4.530	Y
26	0.014	0.014	0.014	0.030	4.534	Y
27	0.012	0.017	0.017	0.028	4.559	Y
28	0.012	0.014	0.014	0.028	4.589	Y

Compliance summary (operator to complete any blank fields)

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

PRINTED NAME: **Christian Anderson** DATE: **3/1/2025**
 SIGNATURE:  WT CERT #: **T-650708**
 Notes: PHONE #: **503-842-6462**

♣ Used for optimization purposes only. Revised 7/31/2023

Disinfection Monthly Operating Report

System Name: **Oceanside Water District**

PWS ID#: 41 - **00585**

0.5

↔ Log
Inactivation
Required via
Disinfection

Plant ID : WTP - **A**

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	0.700	142	99.4	9.2	7.72	25.3	YES	300	
2	0.590	142	83.8	8.5	7.62	25.3	YES	300	
3	0.560	142	79.5	9.8	7.75	24.2	YES	300	
4	0.610	142	86.6	10.1	7.69	23.4	YES	300	
5	0.570	142	80.9	8.4	7.72	26.3	YES	300	
6	0.540	142	76.7	8.2	7.65	25.9	YES	300	
7	0.550	142	78.1	8.4	7.61	25.3	YES	300	
8	0.560	142	79.5	8.4	7.65	25.6	YES	300	
9	0.550	142	78.1	8.2	7.68	26.2	YES	300	
10	0.510	142	72.4	9.6	7.64	23.5	YES	300	
11	0.550	142	78.1	8.8	7.66	25.0	YES	300	
12	0.490	142	69.6	10.2	7.66	22.7	YES	300	
13	0.560	142	79.5	8.9	7.68	25.1	YES	300	
14	0.540	142	76.7	7.6	7.70	27.5	YES	300	
15	0.510	142	72.4	8.9	7.51	23.5	YES	300	
16	0.540	142	76.7	7.5	7.70	27.7	YES	300	
17	0.490	142	69.6	9.7	7.67	23.5	YES	300	
18	0.550	142	78.1	9.0	7.59	24.1	YES	300	
19	0.550	142	78.1	13.0	7.64	18.7	YES	300	
20	0.560	142	79.5	8.7	7.65	25.1	YES	300	
21	0.580	142	82.4	11.1	7.64	21.4	YES	300	
22	0.560	142	79.5	9.9	7.66	23.3	YES	300	
23	0.480	142	68.2	9.8	7.78	24.2	YES	300	
24	0.400	142	56.8	12.4	7.68	19.5	YES	300	
25	0.560	142	79.5	9.6	7.60	23.3	YES	300	
26	0.550	142	78.1	10.5	7.87	24.1	YES	300	
27	0.500	142	71.0	10.2	7.75	23.4	YES	300	
28	0.470	142	66.7	11.8	7.66	20.3	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