

# OHA - DWS

## Membrane Filter Monthly Operating Report

County: **Lincoln**

System Name: **Seal Rock Water District**

Month/Year: **Jun-2024**

PWS ID#: 41 - **00798**

Minimum test pressure applied || req'd: 19.2 psi || 18.2

Plant ID: WTP - **C** (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<sub>Max</sub> [psi/min]**

**LRC [log removal]**

**0.090**

**4.00**

**DIT  
Daily**

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 min duration)	Highest PDR of day [psi/min]	Lowest LRV <sub>ambient</sub> of day [log removal]	[Y/N] or "off"
1						OFF
2						OFF
3						OFF
4	0.020	0.02	0.020	0.03	4.71	YES
5	0.020	0.02	0.020	0.03	4.57	
6	0.020	0.02	0.020	0.03	4.54	
7	0.020	0.02	0.020	0.03	4.50	
8						OFF
9						OFF
10	0.020	0.02	0.020	0.03	4.54	
11	0.020	0.02	0.020	0.03	4.33	
12	0.020	0.02	0.020	0.04	4.52	
13	0.020	0.02	0.020	0.05	4.49	
14	0.020	0.02	0.020	0.04	4.54	
15						OFF
16						OFF
17	0.030	0.03	0.030	0.03	4.62	
18	0.030	0.02	0.020	0.03	4.65	
19						OFF
20	0.020	0.02	0.020	0.02	4.67	
21	0.020	0.02	0.020	0.02	4.71	
22	0.020	0.02	0.020	0.02	4.46	
23						OFF
24	0.020	0.02	0.020	0.02	4.62	
25	0.020	0.02	0.020	0.02	4.72	
26	0.020	0.02	0.020	0.02	4.66	
27	0.020	0.02	0.020	0.02	4.63	
28	0.020	0.02	0.020	0.02	4.61	
29						OFF
30						OFF
31						

**Compliance summary (operator to complete any blank fields)**

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

PRINTED NAME:	Larry Estes	DATE:	7/1/2024
SIGNATURE:	Larry Estes	WT CERT #:	T-09229
Notes:		PHONE #:	541-563-7715

♣ Used for optimization purposes only.

# OHA-DWS

## Disinfection Monthly Operating Report

System Name: Seal Rock Water District

PWS ID#: 41 - 00798

Plant ID : WTP - C

**0.5**

↩ Log  
Inactivation  
Required via  
Disinfection

Day	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> 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	1.350	77.42	104.5	17.0	7.44	14.6	YES	657	
2	1.310	38.88	50.9	17.1	7.51	14.8	YES	465	
3									OFF
4	1.390	31.94	44.4	16.8	7.48	15.1	YES	660	
5	1.290	73.91	95.3	16.2	7.55	15.9	YES	536	
6	1.190	39.42	46.9	16.7	7.25	13.6	YES	662	
7	1.050	69.3	72.8	17.1	7.21	12.9	YES	683	
8	1.020	76.91	78.4	17.5	7.02	11.6	YES	682	
9									OFF
10	1.210	54.28	65.7	17.2	7.40	14.0	YES	659	
11	1.560	48.69	76.0	17.8	7.54	14.7	YES	648	
12	1.560	59.38	92.6	17.4	7.32	14.0	YES	659	
13	1.430	63.25	90.4	16.9	7.38	14.5	YES	657	
14	1.510	76.24	115.1	17.3	7.41	14.4	YES	676	
15									OFF
16	1.320	44.82	59.2	17.5	7.29	13.3	YES	500	
17	1.520	71.84	109.2	17.6	7.50	14.6	YES	506	
18	1.480	59.18	87.6	16.4	7.40	15.2	YES	657	
19									OFF
20	1.340	66.78	89.5	17.3	7.51	14.7	YES	526	
21	1.360	37.9	51.5	18.0	7.53	14.1	YES	664	
22	1.210	58.32	70.6	18.6	7.47	13.1	YES	658	
23	1.180	35.97	42.4	18.9	7.41	12.5	YES	462	
24	1.480	38.04	56.3	18.5	7.47	13.6	YES	654	
25	1.460	63.34	92.5	19.4	7.55	13.1	YES	490	
26	1.500	61.14	91.7	19.5	7.61	13.4	YES	660	
27	1.510	62.43	94.3	20.3	7.45	12.0	YES	659	
28	1.480	81.07	120.0	19.6	7.49	12.7	YES	660	
29	1.330	70.32	93.5	19.2	7.66	13.6	YES	663	
30	1.310	34.23	44.8	19.5	7.54	12.7	YES	516	
31									

♦ 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 10<sup>th</sup> of following month by**

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

email: [dwp.dmce@odhsoha.oregon.gov](mailto:dwp.dmce@odhsoha.oregon.gov)

fax: 971-673-0458