

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Lincoln**

System Name: **Seal Rock Water District**

Month/Year: **Aug-2024**

PWS ID#: 41 - **00798**

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

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

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 min duration)	PDR _{Max} [^{psi} / _{min}]	LRC [log removal]	DIT Daily
				0.090	4.00	
1	0.030	0.03	0.030	0.03	4.57	
2	0.020	0.02	0.020	0.03	4.62	
3	0.020	0.02	0.020	0.04	4.43	
4						OFF
5	0.020	0.02	0.020	0.04	4.61	
6	0.020	0.02	0.020	0.04	4.43	
7	0.020	0.02	0.020	0.05	4.62	
8	0.020	0.02	0.020	0.05	4.32	
9	0.020	0.02	0.020	0.03	4.53	
10						OFF
11						OFF
12	0.030	0.03	0.030	0.03	4.46	
13	0.030	0.03	0.030	0.03	4.57	
14	0.030	0.03	0.030	0.03	4.50	
15	0.030	0.03	0.030	0.03	4.58	
16	0.030	0.03	0.030	0.05	4.44	
17	0.040	0.04	0.040	0.04	4.57	
18						OFF
19	0.030	0.03	0.030	0.03	4.55	
20	0.040	0.04	0.040	0.04	4.49	
21	0.040	0.04	0.040	0.04	4.37	
22	0.020	0.02	0.020	0.03	4.50	
23	0.020	0.02	0.020	0.04	4.52	
24	0.020	0.02	0.020	0.03	4.59	
25						OFF
26	0.020	0.02	0.020	0.04	4.51	
27	0.020	0.02	0.020	0.03	4.85	
28	0.020	0.02	0.020	0.04	4.51	
29	0.020	0.02	0.020	0.03	4.73	
30	0.030	0.03	0.030	0.04	4.71	
31	0.020	0.02	0.020	0.04	4.48	

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 _{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:	Larry Estes	DATE:	9/3/2024
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 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	1.450	36.17	52.4	21.8	7.38	10.5	YES	706	
2	1.400	51.88	72.6	23.3	7.80	11.0	YES	673	
3	1.470	30.04	44.2	23.2	7.60	10.4	YES	676	
4	1.450	31.83	46.2	22.0	7.59	11.2	YES	664	
5	1.310	44.62	58.5	21.9	7.56	10.9	YES	687	
6	1.570	49.88	78.3	21.5	7.53	11.5	YES	688	
7	1.520	83.3	126.6	22.1	7.58	11.1	YES	668	
8	1.550	73.53	114.0	22.1	7.59	11.2	YES	686	
9	1.470	71.57	105.2	21.3	7.59	11.8	YES	683	
10	1.420	49.17	69.8	21.1	7.65	12.1	YES	670	
11									OFF
12	1.600	50.68	81.1	21.3	7.57	11.8	YES	692	
13	1.650	46.17	76.2	21.4	7.67	12.3	YES	679	
14	1.600	26.68	42.7	21.5	7.70	12.2	YES	676	
15	1.680	37.64	63.2	21.4	7.61	12.0	YES	669	
16	1.600	27.54	44.1	21.7	7.63	11.8	YES	683	
17									OFF
18									OFF
19	1.610	57.03	91.8	19.9	7.40	12.2	YES	665	
20	1.480	33.13	49.0	22.7	7.51	10.4	YES	695	
21	1.590	42.43	67.5	22.8	7.54	10.6	YES	517	
22	1.580	63.57	100.4	22.8	7.49	10.3	YES	671	
23	1.610	87.69	141.2	22.1	7.41	10.6	YES	686	
24	1.600	89.61	143.4	22.3	7.39	10.3	YES	690	
25									OFF
26	0.980	61.85	60.6	21.9	7.81	11.5	YES	690	
27	1.550	62.96	97.6	22.8	7.75	11.4	YES	677	
28	1.650	89.26	147.3	22.1	7.94	12.9	YES	526	
29	1.600	56.97	91.2	22.2	7.89	12.6	YES	695	
30	1.670	65.84	110.0	21.6	8.07	14.1	YES	676	
31	1.630	75.27	122.7	22.0	8.15	14.1	YES	679	

♦ 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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