OHA - DWS

Membrane Filter Monthly Operating Report

County: **Lincoln**

System Name: **Seal Rock Water District**

Month/Year: **Jun-2025**

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

PDR_{Max} [$^{psi}/_{min}$]	LRC [log removal]
0.090	**4.00**

Day	CFE Daily Turbidity [NTU]	Highest CFE♣ [NTU]	Highest IFE [NTU] (>15 min duration)	Highest PDR of day [$^{psi}/_{min}$]	Lowest $LRV_{ambient}$ of day [log removal]	DIT Daily [Y/N] or "off"
1						OFF
2	0.030	0.03	0.030	0.05	4.22	YES
3	0.030	0.03	0.030	0.06	4.32	YES
4	0.030	0.03	0.030	0.06	4.21	YES
5	0.030	0.03	0.030	0.06	4.24	YES
6	0.030	0.03	0.030	0.06	4.22	YES
7						OFF
8						OFF
9	0.030	0.03	0.030	0.07	4.22	YES
10	0.030	0.03	0.030	0.07	4.31	YES
11	0.030	0.03	0.030	0.06	4.24	YES
12	0.030	0.03	0.030	0.06	4.23	YES
13	0.030	0.03	0.030	0.06	4.21	YES
14						OFF
15						OFF
16	0.030	0.03	0.030	0.06	4.19	YES
17	0.030	0.03	0.030	0.06	4.24	YES
18	0.030	0.03	0.030	0.07	4.22	YES
19						OFF
20	0.030	0.03	0.030	0.07	4.23	YES
21						OFF
22	0.030	0.03	0.030	0.07	4.24	YES
23	0.030	0.03	0.030	0.06	4.23	YES
24	0.030	0.03	0.030	0.06	4.22	YES
25	0.030	0.03	0.030	0.06	4.30	YES
26	0.030	0.03	0.030	0.06	4.16	YES
27	0.030	0.03	0.030	0.06	4.16	YES
28						OFF
29						OFF
30	0.030	0.03	0.030	0.07	4.20	YES
31						OFF

Compliance summary (operator to complete any blank fields)

95% of daily turbidity readings ≤ 1 NTU?	All turbidity readings ≤ 5 NTU?	All IFE turbidity readings ≤ 0.15 NTU?	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:**	7/8/2025
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 1st 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									OFF
2	1.470	28.57	42.0	16.1	7.68	17.2	YES	687	ON
3	1.530	62.55	95.7	15.9	7.78	18.1	YES	527	ON
4	1.480	37.39	55.3	16.7	7.69	16.6	YES	663	ON
5	1.590	52.96	84.2	17.1	7.52	15.4	YES	685	ON
6	1.600	69.26	110.8	17.1	7.45	15.0	YES	683	ON
7	1.580	27.07	42.8	17.1	7.48	15.2	YES	692	ON
8									OFF
9	1.470	32.36	47.6	19.3	7.80	14.5	YES	680	ON
10	1.540	51.74	79.7	19.3	7.75	14.4	YES	682	ON
11	1.440	35.87	51.7	18.3	7.71	14.9	YES	540	ON
12	1.500	53.14	79.7	17.8	7.45	14.1	YES	693	ON
13	1.410	68.21	96.2	17.9	7.51	14.2	YES	682	ON
14	1.510	27.13	41.0	17.4	7.63	15.5	YES	679	ON
15									OFF
16	1.610	68.08	109.6	17.0	7.31	14.3	YES	693	ON
17	1.540	68	104.7	17.5	7.43	14.4	YES	686	ON
18	1.570	47.67	74.8	18.8	7.46	13.4	YES	619	ON
19									OFF
20	1.550	75.6	117.2	17.8	6.94	11.8	YES	684	ON
21	1.510	76.7	115.8	17.1	6.85	11.9	YES	621	ON
22	1.590	53.56	85.2	17.3	6.83	11.7	YES	541	ON
23	1.460	34.3	50.1	17.1	7.65	15.9	YES	625	ON
24	1.480	48.04	71.1	17.0	7.48	15.0	YES	488	On
25	1.510	61.11	92.3	17.8	7.45	14.1	YES	691	ON
26	1.570	43.95	69.0	18.2	7.94	16.6	YES	680	ON
27	1.600	52.07	83.3	18.1	7.81	16.0	YES	688	ON
28	1.520	27.87	42.4	18.3	7.56	14.3	YES	684	ON
29									OFF
30	1.580	53.55	84.6	18.4		0.5	YES	698	ON
31									OFF

♦ 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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