OHA - DWS

Membrane Filter Monthly Operating Report

County: **Clatsop**

System Name: **Arch Cape Water District**

Month/Year: **Sep-2025**

PWS ID#: 41 - **00802**

Minimum test pressure **applied**: **18** 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

PDR_{Max} [$^{psi}/_{min}$]	LRC [log removal]
0.057	4.00

Day	CFE Daily Turbidity [NTU]	Highest CFE♣ [NTU]	Highest IFE [NTU] (>15 minutes)	Highest PDR of day [$^{psi}/_{min}$]	Lowest $LRV_{ambient}$ of day [log removal]	DIT Daily [Y/N] or "off"
1	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	OFF	OFF	4.59	OFF
3	OFF	OFF	OFF	OFF	4.43	OFF
4	OFF	OFF	OFF	OFF	4.38	OFF
5	0.030	0.04	0.040	0.048	4.41	YES
6	OFF	OFF	OFF	OFF	4.40	OFF
7	OFF	OFF	OFF	OFF	4.51	OFF
8	OFF	OFF	OFF	OFF	4.50	OFF
9	0.030	0.04	0.040	0.053	4.34	YES
10	OFF	OFF	OFF	OFF	OFF	OFF
11	0.030	0.04	0.040	0.056	4.23	YES
12	0.030	0.04	0.040	0.055	4.22	YES
13	OFF	OFF	OFF	OFF	OFF	OFF
14	OFF	OFF	OFF	OFF	OFF	OFF
15	OFF	OFF	OFF	OFF	OFF	OFF
16	0.030	0.04	0.040	0.050	4.39	YES
17	0.030	0.04	0.040	0.051	4.32	YES
18	OFF	OFF	OFF	OFF	OFF	OFF
19	OFF	OFF	OFF	OFF	OFF	OFF
20	0.030	0.04	0.040	0.029	4.24	YES
21	OFF	OFF	OFF	OFF	OFF	OFF
22	OFF	OFF	OFF	OFF	OFF	OFF
23	0.030	0.04	0.040	0.050	4.37	YES
24	OFF	OFF	OFF	OFF	OFF	OFF
25	OFF	OFF	OFF	OFF	OFF	OFF
26	0.030	0.04	0.040	0.055	4.32	YES
27	OFF	OFF	OFF	OFF	OFF	OFF
28	0.030	0.04	0.040	0.031	4.64	YES
29	OFF	OFF	OFF	OFF	OFF	OFF
30	OFF	OFF	OFF	OFF	OFF	OFF
31						

Compliance summary (operator to complete any blank fields)

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: Matthew R Gardner

SIGNATURE: MG

DATE: 10/9/25

WT CERT #: T-09382 D-09383

Notes:

PHONE #: 503 436 2790

♣ *Used for optimization purposes only.*

OHA-DWS

Disinfection Monthly Operating Report

System Name: **Arch Cape Water District**

PWS ID#: 41 - **00802**

Plant ID : WTP - **A**

0.5

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]	Lowest Reservoir Level (ft)
1	0.850	298	253.3	16.1	7.62	15.7	YES	76	26.8
2	0.850	247	210.1	16.1	7.63	15.7	YES	91	26.4
3	0.830	226	187.4	16.2	7.63	15.6	YES	100	26.7
4	0.860	242	208.3	16.2	7.63	15.6	YES	94	26.8
5	0.860	274	235.4	16.3	7.60	15.4	YES	83	26.7
6	0.840	216	181.5	16.1	7.65	15.8	YES	101	25.6
7	0.850	248	210.7	16.1	7.64	15.8	YES	90	26.3
8	0.850	268	227.8	16.1	7.64	15.8	YES	84	26.6
9	0.850	252	214.6	16.1	7.61	15.6	YES	90	26.9
10	0.840	285	239.7	16.2	7.66	15.8	YES	76	25.4
11	0.820	219	179.6	16.2	7.65	15.7	YES	93	23.5
12	0.870	268	233.1	16.1	7.62	15.7	YES	83	26.2
13	0.860	306	263.1	15.9	7.67	16.2	YES	72	25.9
14	0.830	215	178.6	16.0	7.68	16.1	YES	95	23.6
15	0.810	180	145.9	15.9	7.70	16.3	YES	107	21.9
16	0.900	242	217.9	16.0	7.66	16.1	YES	87	24.5
17	0.890	221	196.7	16.0	7.72	16.4	YES	100	26.0
18	0.870	233	202.8	16.0	7.71	16.3	YES	96	26.4
19	0.840	285	239.1	15.7	7.74	16.8	YES	74	24.5
20	0.850	303	257.5	15.7	7.66	16.3	YES	75	26.9
21	0.810	252	204.0	15.6	7.74	16.8	YES	85	25.0
22	0.810	258	208.6	15.6	7.67	16.4	YES	85	25.7
23	0.770	263	202.7	15.5	7.64	16.3	YES	80	24.5
24	0.780	233	181.4	15.4	7.72	16.9	YES	95	26.0
25	0.760	239	181.9	15.2	7.77	17.4	YES	90	25.2
26	0.770	277	213.4	15.4	7.68	16.6	YES	77	24.9
27	0.800	237	189.6	15.1	7.72	17.3	YES	95	26.6
28	0.760	282	214.0	15.3	7.70	16.8	YES	78	25.8
29	0.790	266	209.8	15.2	7.74	17.3	YES	84	26.3
30	0.800	314	251.4	15.1	7.76	17.5	YES	69	25.4
31		#DIV/0!							

♦ 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

Volume/ft of depth (gal)	Baffling Factor(%)	Effective Reservoir Volume (gal)	Tank Contact Time (min)	Pipe Diameter (in)	Pipe Length (ft)	Pipe Volume (gal) (baffling=1)
18,381	0.0375	18,473	243	8	1,600	4,176
18,381	0.0375	18,197	201	8	1,600	4,176
18,381	0.0375	18,404	184	8	1,600	4,176
18,381	0.0375	18,473	198	8	1,600	4,176
18,381	0.0375	18,404	223	8	1,600	4,176
18,381	0.0375	17,646	175	8	1,600	4,176
18,381	0.0375	18,128	201	8	1,600	4,176
18,381	0.0375	18,335	218	8	1,600	4,176
18,381	0.0375	18,542	206	8	1,600	4,176
18,381	0.0375	17,508	230	8	1,600	4,176
18,381	0.0375	16,198	174	8	1,600	4,176
18,381	0.0375	18,059	218	8	1,600	4,176
18,381	0.0375	17,853	248	8	1,600	4,176
18,381	0.0375	16,267	171	8	1,600	4,176
18,381	0.0375	15,095	141	8	1,600	4,176
18,381	0.0375	16,888	194	8	1,600	4,176
18,381	0.0375	17,921	179	8	1,600	4,176
18,381	0.0375	18,197	190	8	1,600	4,176
18,381	0.0375	16,888	228	8	1,600	4,176
18,381	0.0375	18,542	247	8	1,600	4,176
18,381	0.0375	17,232	203	8	1,600	4,176
18,381	0.0375	17,715	208	8	1,600	4,176
18,381	0.0375	16,888	211	8	1,600	4,176
18,381	0.0375	17,921	189	8	1,600	4,176
18,381	0.0375	17,370	193	8	1,600	4,176
18,381	0.0375	17,163	223	8	1,600	4,176
18,381	0.0375	18,335	193	8	1,600	4,176
18,381	0.0375	17,784	228	8	1,600	4,176
18,381	0.0375	18,128	216	8	1,600	4,176
18,381	0.0375	17,508	254	8	1,600	4,176
18,381	0.0375	-	#DIV/0!	8	1,600	4,176

	⇦ Log Inactivation Required via Disinfection

Pipe Contact Time	Notes (e.g. "Plant Off")
55	OFF
46	OFF
42	OFF
45	OFF
51	OFF
41	
46	
50	
46	
55	OFF
45	
50	OFF
58	OFF
44	
39	OFF
48	OFF
42	OFF
44	
56	OFF
56	OFF
49	OFF
49	OFF
52	
44	
46	
54	
44	
54	
50	
61	
#DIV/0!	