

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Clatsop**

System Name: **Arch Cape Water District**

Month/Year: **Nov-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

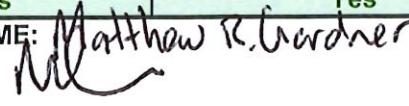
DIT
Daily

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]	[Y/N] or "off"
1	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	OFF	OFF	OFF	OFF
3	0.030	0.04	0.040	0.053	4.35	Yes
4	0.030	0.04	0.04	0.048	4.38	Yes
5	OFF	OFF	OFF	OFF	OFF	OFF
6	OFF	OFF	OFF	OFF	OFF	OFF
7	0.030	0.04	0.040	0.046	4.44	Yes
8	0.030	0.04	0.040	0.050	4.20	Yes
9	0.030	0.04	0.040	0.043	4.36	Yes
10	OFF	OFF	OFF	OFF	OFF	OFF
11	0.030	0.04	0.040	0.039	4.32	Yes
12	OFF	OFF	OFF	OFF	OFF	OFF
13	OFF	OFF	OFF	OFF	OFF	OFF
14	0.030	0.04	0.040	0.047	4.39	Yes
15	OFF	OFF	OFF	OFF	OFF	OFF
16	OFF	OFF	OFF	OFF	OFF	OFF
17	OFF	OFF	OFF	OFF	OFF	OFF
18	0.030	0.03	0.040	0.047	4.30	Yes
19	OFF	OFF	OFF	OFF	OFF	OFF
20	OFF	OFF	OFF	OFF	OFF	OFF
21	0.030	0.04	0.040	0.046	4.40	Yes
22	OFF	OFF	OFF	OFF	OFF	OFF
23	OFF	OFF	OFF	OFF	OFF	OFF
24	0.030	0.04	0.040	0.042	4.29	Yes
25	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	OFF	OFF	OFF	OFF
27	0.030	0.04	0.040	0.042	4.33	Yes
28	OFF	OFF	OFF	OFF	OFF	OFF
29	0.030	0.04	0.040	0.043	4.29	Yes
30	0.030	0.04	0.040	0.051	4.27	Yes
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: 

Notes:

DATE: **12/21/25**

WT CERT #: **T-09382 D-09383**

PHONE #: **503 436 2790**

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Disinfection Monthly Operating ReportSystem Name: Arch Cape Water DistrictPWS ID#: 41 - 00802**0.5**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]	Lowest Reservoir Level (ft)
1	0.870	414	360.5	12.4	7.09	16.8	YES	53	25.8
2	0.850	311	264.2	12.3	7.09	16.9	YES	68	24.6
3	0.830	420	348.8	12.3	7.11	17.0	YES	47	22.6
4	0.910	342	311.2	12.0	7.03	17.0	YES	63	25.2
5	0.890	94	83.9	12.2	7.09	17.1	YES	241	26.9
6	0.870	402	349.5	12.3	7.09	16.9	YES	55	26.0
7	0.840	41	34.2	12.0	7.09	17.2	YES	519	24.6
8	0.890	416	369.9	11.8	7.04	17.2	YES	52	25.3
9	0.870	278	241.8	11.9	7.05	17.1	YES	81	26.6
10	0.850	391	332.6	12.2	7.11	17.1	YES	57	26.3
11	0.850	330	280.9	11.8	7.02	17.0	YES	65	25.1
12	0.870	404	351.9	12.0	7.07	17.1	YES	56	26.8
13	0.860	405	348.6	12.1	7.09	17.1	YES	54	25.7
14	0.850	482	409.6	11.9	7.06	17.1	YES	45	25.4
15	0.830	334	277.0	12.2	7.12	17.1	YES	66	25.9
16	0.830	399	330.9	12.2	7.12	17.1	YES	53	24.6
17	0.830	502	416.6	12.2	7.11	17.1	YES	41	23.8
18	0.860	458	393.9	11.7	7.01	17.1	YES	49	26.5
19	0.850	426	362.3	11.5	7.08	17.7	YES	52	26.1
20	0.830	471	391.3	11.5	7.09	17.7	YES	46	25.4
21	0.830	380	315.7	11.2	7.05	17.8	YES	57	25.4
22	0.870	335	291.5	11.3	7.06	17.9	YES	68	27.0
23	0.840	326	273.6	11.3	7.10	18.0	YES	67	25.6
24	0.830	480	398.6	10.9	7.05	18.2	YES	44	24.6
25	0.860	457	393.4	10.8	7.11	18.7	YES	48	25.8
26	0.870	270	234.6	10.7	7.11	18.9	YES	84	26.8
27	0.850	243	206.5	10.8	7.14	18.9	YES	87	24.6
28	0.840	292	245.1	10.9	7.15	18.8	YES	71	24.0
29	0.820	309	253.5	10.8	7.14	18.8	YES	63	22.2
30	0.830	498	413.5	10.5	7.08	18.8	YES	42	24.3
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@odhsosha.oregon.gov

fax: 971-673-0458

OHA-DWS

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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	17,784	336	8	1,600	4,176
18,381	0.0375	16,956	249	8	1,600	4,176
18,381	0.0375	15,578	331	8	1,600	4,176
18,381	0.0375	17,370	276	8	1,600	4,176
18,381	0.0375	18,542	77	8	1,600	4,176
18,381	0.0375	17,921	326	8	1,600	4,176
18,381	0.0375	16,956	33	8	1,600	4,176
18,381	0.0375	17,439	335	8	1,600	4,176
18,381	0.0375	18,335	226	8	1,600	4,176
18,381	0.0375	18,128	318	8	1,600	4,176
18,381	0.0375	17,301	266	8	1,600	4,176
18,381	0.0375	18,473	330	8	1,600	4,176
18,381	0.0375	17,715	328	8	1,600	4,176
18,381	0.0375	17,508	389	8	1,600	4,176
18,381	0.0375	17,853	270	8	1,600	4,176
18,381	0.0375	16,956	320	8	1,600	4,176
18,381	0.0375	16,405	400	8	1,600	4,176
18,381	0.0375	18,266	373	8	1,600	4,176
18,381	0.0375	17,990	346	8	1,600	4,176
18,381	0.0375	17,508	381	8	1,600	4,176
18,381	0.0375	17,508	307	8	1,600	4,176
18,381	0.0375	18,611	274	8	1,600	4,176
18,381	0.0375	17,646	263	8	1,600	4,176
18,381	0.0375	16,956	385	8	1,600	4,176
18,381	0.0375	17,784	370	8	1,600	4,176
18,381	0.0375	18,473	220	8	1,600	4,176
18,381	0.0375	16,956	195	8	1,600	4,176
18,381	0.0375	16,543	233	8	1,600	4,176
18,381	0.0375	15,302	243	8	1,600	4,176
18,381	0.0375	16,750	399	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")
79	OFF
61	OFF
89	OFF
66	OFF
17	OFF
76	
8	
80	
52	
73	OFF
64	
75	OFF
77	OFF
93	
63	OFF
79	OFF
102	OFF
85	
80	OFF
91	OFF
73	OFF
61	OFF
62	
95	
87	
50	
48	
59	
66	
99	
#DIV/0!	