

# OHA - DWS

## Membrane Filter Monthly Operating Report

County: **Clatsop**

System Name: **Arch Cape Water District**

Month/Year: **Mar-2026**

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 <sub>Max</sub> [ <sup>psi</sup> / <sub>min</sub> ]	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 [ <sup>psi</sup> / <sub>min</sub> ]	Lowest LRV <sub>ambient</sub> of day [log removal]	[Y/N] or "off"
1	OFF	OFF	OFF	OFF	OFF	OFF
2	OFF	OFF	OFF	OFF	OFF	OFF
3	OFF	OFF	OFF	OFF	OFF	OFF
4	0.030	0.04	0.04	0.053	4.30	YES
5	OFF	OFF	OFF	OFF	OFF	OFF
6	OFF	OFF	OFF	OFF	OFF	OFF
7	OFF	OFF	OFF	OFF	OFF	OFF
8	0.030	0.04	0.040	0.056	4.29	YES
9	0.030	0.04	0.040	0.052	4.37	YES
10	0.030	0.040	0.040	0.054	4.34	YES
11	OFF	OFF	OFF	OFF	OFF	OFF
12	OFF	OFF	OFF	OFF	OFF	OFF
13	OFF	OFF	OFF	OFF	OFF	OFF
14	OFF	OFF	OFF	OFF	OFF	OFF
15	0.030	0.04	0.040	0.048	4.39	YES
16	0.030	0.04	0.040	0.055	4.34	YES
17	0.030	0.04	0.040	0.053	4.44	YES
18	OFF	OFF	OFF	OFF	OFF	OFF
19	OFF	OFF	OFF	OFF	OFF	OFF
20	OFF	OFF	OFF	OFF	OFF	OFF
21	OFF	OFF	OFF	OFF	OFF	OFF
22	0.030	0.04	0.04	0.05	4.33	YES
23	0.030	0.04	0.040	0.056	4.21	YES
24	OFF	OFF	OFF	OFF	OFF	OFF
25	OFF	OFF	OFF	OFF	OFF	OFF
26	OFF	OFF	OFF	OFF	OFF	OFF
27	0.030	0.04	0.040	0.051	4.38	YES
28	0.030	0.04	0.040	0.055	4.39	YES
29	0.030	0.04	0.040	0.047	4.28	YES
30	0.030	0.04	0.040	0.057	4.19	YES
31	OFF	OFF	OFF	OFF	OFF	OFF

**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 <sub>Max</sub> , LRV ≥ LRC)	DIT Daily?
Yes	Yes	Yes	Yes	Yes
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?	
Yes	Yes	Yes	Yes	

PRINTED NAME: **Matthew R. Gardner**      DATE: **4/15/26**  
 SIGNATURE: *[Signature]*      WT CERT #: **T-09382 D-09383**  
 Notes:      PHONE #: **503 812 7578**

♣ Used for optimization purposes only.

**Disinfection Monthly Operating Report**

System Name: Arch Cape Water District

PWS ID#: 41 - 00802

0.5

Plant ID : WTP - A

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]	Lowest Reservoir Level (ft)
1	0.840	281	236.4	8.6	7.00	20.8	YES	80	26.6
2	0.830	374	310.3	8.9	6.98	20.2	YES	58	25.4
3	0.850	361	306.7	9.1	6.98	20.0	YES	58	24.3
4	0.850	450	382.7	8.8	6.92	20.0	YES	50	26.6
5	0.870	430	374.3	9.2	7.00	20.0	YES	52	26.4
6	0.860	432	371.8	9.3	7.00	19.9	YES	50	25.3
7	0.850	389	330.5	9.4	7.00	19.7	YES	54	24.4
8	0.840	526	441.4	9.2	6.92	19.4	YES	41	25.2
9	0.870	430	374.0	9.4	6.99	19.7	YES	49	24.5
10	0.910	397	361.6	9.1	6.93	19.8	YES	57	26.8
11	0.890	436	388.0	9.2	6.99	20.0	YES	51	26.2
12	0.880	680	598.2	9.4	6.99	19.7	YES	32	25.5
13	0.870	579	504.0	9.5	7.01	19.7	YES	36	24.2
14	0.870	524	456.0	9.4	6.98	19.6	YES	39	23.6
15	0.860	361	310.2	9.2	7.00	20.0	YES	54	22.2
16	0.870	329	286.1	9.0	6.97	20.1	YES	63	24.0
17	0.870	413	359.3	9.2	6.93	19.6	YES	53	25.7
18	0.880	462	406.8	9.7	6.99	19.3	YES	49	26.8
19	0.890	488	434.3	9.8	7.00	19.3	YES	45	25.8
20	0.890	471	419.3	10.1	7.00	18.9	YES	45	24.7
21	0.890	407	362.7	10.0	7.03	19.3	YES	50	23.5
22	0.910	406	369.7	9.8	6.94	19.0	YES	51	24.0
23	0.890	722	642.3	9.9	6.94	18.8	YES	31	26.4
24	0.870	295	256.3	10.0	6.99	19.0	YES	75	26.0
25	0.850	288	245.1	10.0	7.07	19.4	YES	74	24.9
26	0.850	314	266.8	9.7	7.02	19.5	YES	66	24.0
27	0.840	236	198.2	9.6	6.95	19.1	YES	89	24.4
28	0.830	321	266.4	9.6	6.96	19.2	YES	68	25.6
29	0.810	262	212.6	9.6	6.99	19.3	YES	80	24.4
30	0.800	404	323.3	9.6	7.00	19.4	YES	54	25.6
31	0.800	608	486.7	9.5	7.00	19.5	YES	37	26.6

† 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

## 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	18,335	229	8	1,600	4,176
18,381	0.0375	17,508	302	8	1,600	4,176
18,381	0.0375	16,750	289	8	1,600	4,176
18,381	0.0375	18,335	367	8	1,600	4,176
18,381	0.0375	18,197	350	8	1,600	4,176
18,381	0.0375	17,439	349	8	1,600	4,176
18,381	0.0375	16,819	311	8	1,600	4,176
18,381	0.0375	17,370	424	8	1,600	4,176
18,381	0.0375	16,888	345	8	1,600	4,176
18,381	0.0375	18,473	324	8	1,600	4,176
18,381	0.0375	18,059	354	8	1,600	4,176
18,381	0.0375	17,577	549	8	1,600	4,176
18,381	0.0375	16,681	463	8	1,600	4,176
18,381	0.0375	16,267	417	8	1,600	4,176
18,381	0.0375	15,302	283	8	1,600	4,176
18,381	0.0375	16,543	263	8	1,600	4,176
18,381	0.0375	17,715	334	8	1,600	4,176
18,381	0.0375	18,473	377	8	1,600	4,176
18,381	0.0375	17,784	395	8	1,600	4,176
18,381	0.0375	17,025	378	8	1,600	4,176
18,381	0.0375	16,198	324	8	1,600	4,176
18,381	0.0375	16,543	324	8	1,600	4,176
18,381	0.0375	18,197	587	8	1,600	4,176
18,381	0.0375	17,921	239	8	1,600	4,176
18,381	0.0375	17,163	232	8	1,600	4,176
18,381	0.0375	16,543	251	8	1,600	4,176
18,381	0.0375	16,819	189	8	1,600	4,176
18,381	0.0375	17,646	259	8	1,600	4,176
18,381	0.0375	16,819	210	8	1,600	4,176
18,381	0.0375	17,646	327	8	1,600	4,176
18,381	0.0375	18,335	496	8	1,600	4,176

Log  
Inactivation  
Required via  
Disinfection

Pipe Contact Time	Notes (e.g. "Plant Off")
52	OFF
72	OFF
72	OFF
84	OFF
80	OFF
84	
77	
102	
85	
73	OFF
82	
131	OFF
116	OFF
107	
77	OFF
66	OFF
79	OFF
85	
93	OFF
93	OFF
84	OFF
82	OFF
135	
56	
56	
63	
47	
61	
52	
77	
113	