

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Tillamook**

System Name: **Oceanside Cape Meares**

Month/Year: **Sep-2024**

PWS ID#: 41 - **00882**

Minimum test pressure applied: **24** 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]
0.072

LRC [log removal]
4.00

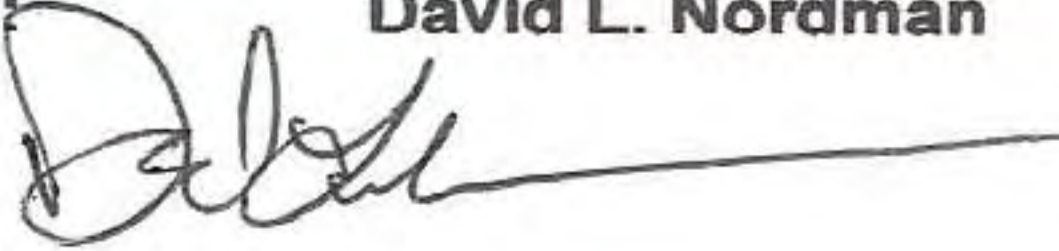
DIT Daily

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	Highest PDR of day [psi/min]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.014	0.014	0.014	0.02	4.73	Y
2	0.014	0.014	0.014	0.01	4.74	Y
3	0.014	0.014	0.014	0.02	4.69	Y
4	0.014	0.014	0.014	0.00	4.68	Y
5				0.01	4.81	Off
6	0.014	0.014	0.014	0.01	4.71	Y
7	0.041	0.0414	0.041	0.01	4.78	Y
8	0.014	0.014	0.014	0.02	4.71	Y
9	0.014	0.014	0.014	0.01	4.68	Y
10				0.01	4.95	Off
11	0.014	0.014	0.014	0.02	4.78	Y
12	0.014	0.014	0.014	0.02	4.80	Y
13	0.014	0.014	0.014	0.01	4.72	Y
14	0.014	0.014	0.014	0.02	4.71	Y
15	0.014	0.014	0.014	0.01	4.73	Y
16	0.014	0.014	0.014	0.01	4.75	Y
17	0.014	0.014	0.014	0.01	4.68	Y
18				0.01	4.73	Off
19	0.014	0.014	0.014	0.03	4.90	Y
20	0.014	0.014	0.014	0.02	4.90	Y
21	0.014	0.014	0.014	0.01	4.90	Y
22	0.014	0.014	0.014	0.02	4.86	Y
23	0.014	0.014	0.014	0.01	4.85	Y
24	0.014	0.014	0.014	0.02	4.80	Y
25	0.014	0.014	0.014	0.02	4.79	Y
26	0.014	0.014	0.014	0.01	4.74	Y
27	0.014	0.014	0.014	0.01	4.70	Y
28				0.02	4.75	Off
29	0.014	0.014	0.014	0.02	4.68	Y
30	0.014	0.014	0.014	0.02	4.65	Y

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: **David L. Nordman** DATE: **10/8/2024**

SIGNATURE:  WT CERT #: **T-08918**

Notes: PHONE #: **503-842-6462**

♣ Used for optimization purposes only.

OHA-DWS

Disinfection Monthly Operating Report

System Name: Oceanside Cape Meares

PWS ID#: 41 - 00882

Plant ID : WTP - A

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	0.860	170	146.2	16.8	7.67	15.2	YES	80	
2	0.710	170	120.7	16.6	7.72	15.5	YES	80	
3	0.660	170	112.2	16.7	7.73	15.3	YES	80	
4	0.650	170	110.5	16.9	7.68	14.8	YES	80	
5	0.760	170	129.2	17.3	7.67	14.6	YES	80	OFF
6	0.720	170	122.4	17.3	7.59	14.1	YES	80	
7	0.730	170	124.1	17.4	7.64	14.3	YES	80	
8	0.730	170	124.1	17.4	7.83	15.3	YES	80	
9	0.710	170	120.7	17.2	7.78	15.2	YES	80	
10	0.740	170	125.8	17.0	7.74	15.2	YES	80	OFF
11	0.700	170	119.0	17.1	7.88	15.9	YES	80	
12	0.500	170	85.0	17.9	7.77	14.1	YES	80	
13	0.790	170	134.3	16.6	7.79	16.0	YES	80	
14	1.080	170	183.6	19.6	7.74	13.3	YES	80	
15	0.990	170	168.3	16.7	7.87	16.8	YES	80	
16	0.950	170	161.5	16.6	7.84	16.6	YES	80	
17	0.810	170	137.7	16.4	7.70	15.7	YES	80	
18	0.840	170	142.8	16.6	7.70	15.6	YES	80	OFF
19	0.900	170	153.0	16.6	7.57	15.0	YES	80	
20	0.830	170	141.1	16.4	7.73	15.9	YES	80	
21	0.830	170	141.1	16.4	7.58	15.1	YES	80	
22	0.860	170	146.2	16.1	7.58	15.4	YES	80	
23	0.870	170	147.9	16.5	7.57	15.0	YES	80	
24	0.710	170	120.7	16.3	7.55	14.8	YES	80	
25	0.850	170	144.5	16.0	7.63	15.8	YES	80	
26	0.730	170	124.1	16.0	7.53	15.0	YES	80	
27	0.720	170	122.4	16.0	7.56	15.2	YES	80	
28	0.680	170	115.6	15.6	7.55	15.5	YES	80	OFF
29	0.840	170	142.8	15.2	7.62	16.6	YES	80	
30	0.660	170	112.2	15.8	7.60	15.5	YES	80	

* 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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