

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Tillamook**

System Name: **Oceanside Cape Meares**

Month/Year: **February, 2025**

PWS ID#: 41 - **00882**

Minimum test pressure applied: 20 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

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	Highest PDR of day [psi/min]	Lowest LRV _{ambient} of day [log removal]	DIT Daily [Y/N] or "off"
				0.072	4.00	
1	0.019	0.022	0.022	0.023	4.457	Y
2	0.019	0.021	0.021	0.019	4.703	Y
3	0.020	0.023	0.023	0.021	4.596	Y
4	0.019	0.022	0.022	0.013	4.429	Y
5	0.019	0.021	0.021	0.028	4.271	Y
6				0.023	4.690	Y
7	0.019	0.022	0.022	0.023	4.541	Y
8	0.020	0.021	0.021	0.019	4.490	Y
9	0.017	0.023	0.023	0.028	4.339	Y
10				0.021	4.670	Y
11	0.019	0.026	0.026	0.007	4.721	Y
12				0.021	4.830	Y
13	0.019	0.021	0.021	0.024	4.605	Y
14	0.019	0.019	0.019	0.024	4.527	Y
15	0.018	0.025	0.025	0.018	4.531	Y
16	0.018	0.020	0.020	0.019	4.515	Y
17	0.018	0.019	0.019	0.019	4.350	Y
18	0.018	0.021	0.021	0.020	4.330	Y
19	0.018	0.019	0.019	0.020	4.575	Y
20	0.017	0.020	0.020	0.028	4.192	Y
21	0.018	0.029	0.029	0.018	4.446	Y
22	0.018	0.021	0.021	0.021	4.287	Y
23	0.020	0.021	0.021	0.020	4.246	Y
24	0.018	0.020	0.020	0.027	4.296	Y
25	0.018	0.018	0.018	0.018	4.689	Y
26	0.018	0.020	0.020	0.018	4.670	Y
27	0.019	0.026	0.026	0.018	4.718	Y
28	0.019	0.019	0.019	0.018	4.715	Y

Compliance summary (operator to complete any blank fields)

95% of daily turbidity readings ≤ 1 NTU? [Y/N] Yes	All turbidity readings ≤ 5 NTU? [Y/N] Yes	All IFE turbidity readings ≤ 0.15 NTU? [Y/N] Yes	Performance std met? [Y/N] (PDR ≤ PDR _{Max} , LRV ≥ LRC) Yes	DIT Daily? Yes
CT's met daily? (p. 2) Yes	All Cl ₂ residual at EP ≥ 0.2 mg/L? Yes	PDR ≤ PDR _{Max} ? Yes	LRV _{ambient} ≥ LRC? Yes	

PRINTED NAME: Christian Anderson	DATE: 03/01/2025
SIGNATURE: 	WT CERT #: T-650708
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	0.730	170	124.1	7.8	7.29	23.9	YES	100	
2	0.680	170	115.6	8.1	7.29	23.3	YES	100	
3	0.640	170	108.8	7.7	7.33	24.2	YES	100	
4	0.600	170	102.0	7.4	7.37	24.9	YES	100	
5	0.700	170	119.0	6.6	7.43	27.2	YES	100	
6	0.590	170	100.3	6.8	7.39	26.1	YES	100	Plant Off
7	0.540	170	91.8	5.7	7.71	31.4	YES	100	
8	0.640	170	108.8	7.1	7.63	28.0	YES	100	
9	0.590	170	100.3	6.8	7.47	26.9	YES	100	
10	0.600	170	102.0	6.6	7.67	29.3	YES	100	Plant Off
11	0.520	170	88.4	6.1	7.39	27.1	YES	100	
12	0.520	170	88.4	6.2	7.43	27.4	YES	100	Plant Off
13	0.510	170	86.7	6.1	7.44	27.6	YES	100	
14	0.540	170	91.8	6.1	7.61	29.5	YES	100	
15	0.510	170	86.7	6.5	7.47	27.2	YES	100	
16	0.670	170	113.9	7.0	7.73	29.4	YES	100	
17	0.540	170	91.8	7.3	7.62	27.3	YES	100	
18	0.480	170	81.6	7.7	7.57	25.9	YES	100	
19	0.590	170	100.3	7.8	7.74	27.7	YES	100	
20	0.530	170	90.1	7.8	7.48	25.0	YES	100	
21	0.460	170	78.2	9.6	7.50	22.2	YES	100	
22	0.330	170	56.1	9.7	7.59	22.4	YES	100	
23	0.520	170	88.4	8.7	7.51	23.8	YES	100	
24	0.460	170	78.2	9.0	7.53	23.3	YES	100	
25	0.450	170	76.5	8.9	7.58	23.9	YES	100	
26	0.420	170	71.4	8.8	7.94	27.3	YES	100	
27	0.410	170	69.7	9.1	7.89	26.2	YES	100	
28	0.430	170	73.1	9.1	8.21	29.5	YES	100	

* 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