

OHA - DWS

Membrane Filter Monthly Operating Report

County: Tillamookj

System Name: Neskowin Regional Water District

Month/Year: Nov-2023

PWS ID#: 41 - 00970

Minimum test pressure applied || req'd: 16.0 psi || 11.3 psi

Plant ID: WTP - A (e.g. "A")

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]

0.910

4.00

**DIT
Daily**

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 min duration)	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	0.014	0.01587	0.016	0.34	4.43	Y
4	Off	Off	Off	Off	Off	Off
5	0.013	0.01345	0.013	0.34	4.40	Y
6	0.014	0.01508	0.015	0.34	4.39	Y
7	0.014	0.01468	0.015	0.39	4.34	Y
8	0.014	0.01431	0.014	0.39	4.36	Y
9	0.014	0.0139	0.014	0.39	4.30	Y
10	0.014	0.01409	0.014	0.39	4.34	Y
11	0.014	0.01442	0.014	0.39	4.34	Y
12	0.014	0.0142	0.014	0.39	4.34	Y
13	0.013	0.01335	0.013	0.39	4.34	Y
14	0.013	0.0134	0.013	0.40	4.35	Y
15	Off	Off	Off	Off	Off	Off
16	0.013	0.01336	0.013	0.39	4.27	Y
17	0.013	0.01351	0.014	0.40	4.27	Y
18	Off	Off	Off	Off	Off	Off
19	0.016	0.01598	0.016	0.40	4.27	Y
20	0.013	0.01381	0.014	0.41	4.27	Y
21	Off	Off	Off	Off	Off	Off
22	0.013	0.01356	0.014	0.40	Off	Y
23	0.014	0.01396	0.014	0.42	4.25	Y
24	Off	Off	Off	Off	Off	Off
25	0.013	0.0131	0.013	0.40	4.25	Y
26	0.013	0.01317	0.013	0.42	4.26	Y
27	Off	Off	Off	Off	Off	Off
28	0.013	0.01316	0.013	0.40	4.26	Y
29	0.013	0.01312	0.013	0.40	4.26	Y
30	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 _{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: Troy N. Trute SIGNATURE:  Notes:	DATE: 12/6/2023 WT CERT #: D-08123 T-08076 PHONE #: 541-992-1655
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♣ Used for optimization purposes only.

OHA-DWS

Disinfection Monthly Operating Report

System Name: Neskowin Regional Water District

PWS ID#: 41 - 00970

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	Off	129	Off	10.0	7.80	Off	Off	Off	Plant Off
2	Off	129	Off	10.0	7.80	Off	Off	Off	Plant Off
3	0.600	129	77.4	10.0	7.80	24.4	YES	202	
4	Off	129	Off	10.0	7.80	Off	Off	Off	Plant Off
5	0.600	129	77.4	10.0	7.80	24.4	YES	202	
6	1.200	129	154.8	10.0	7.80	26.2	YES	206	
7	1.200	129	154.8	10.0	8.00	28.1	YES	206	
8	1.800	129	232.2	10.0	8.00	30.1	YES	202	
9	1.600	129	206.4	10.0	8.00	29.4	YES	201	
10	1.400	129	180.6	10.0	7.80	26.8	YES	202	
11	1.400	129	180.6	10.0	7.80	26.8	YES	208	
12	1.300	129	167.7	10.0	7.80	26.5	YES	201	
13	1.200	129	154.8	10.0	8.00	28.1	YES	203	
14	1.400	129	180.6	10.0	7.80	26.8	YES	202	
15	Off	129	Off	10.0	7.80	Off	Off	Off	Plant Off
16	1.200	129	154.8	10.0	8.00	28.1	YES	203	
17	1.000	129	129.0	10.0	8.00	27.5	YES	202	
18	Off	129	Off	10.0	8.00	Off	Off	Off	Plant Off
19	1.200	129	154.8	10.0	8.00	28.1	YES	202	
20	1.000	129	129.0	10.0	8.00	27.5	YES	204	
21	Off	129	Off	10.0	8.00	Off	Off	Off	Plant Off
22	1.000	129	129.0	10.0	8.00	27.5	YES	202	
23	1.000	129	129.0	10.0	8.00	27.5	YES	202	
24	Off	129	Off	10.0	8.00	Off	Off	Off	Plant Off
25	1.200	129	154.8	10.0	8.00	28.1	YES	202	
26	1.200	129	154.8	10.0	8.00	28.1	YES	202	
27	Off	129	Off	8.0	8.00	Off	Off	Off	Plant Off
28	1.200	129	154.8	8.0	8.00	32.2	YES	201	
29	1.200	129	154.8	8.0	8.00	32.2	YES	202	
30	Off	129	Off	8.0	8.00	Off	Off	Off	Plant Off

* 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