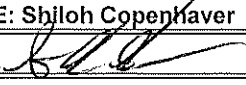


OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: **Tillamook**
 Month/Year: **May-25**

System Name: **OPRD Cape Lookout** ID#: **41 91068** WTP: **TP -**

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day ¹ [NTU]
1			0.02				0.02
2			0.04				0.04
3			0.03				0.03
4			0.02				0.02
5			0.01				0.01
6			0.01				0.01
7			0.01				0.01
8			0.01				0.01
9			0.01				0.01
10			0.01				0.01
11			0.01				0.01
12			0.05				0.05
13			0.03				0.03
14			0.02				0.02
15			0.02				0.02
16			0.03				0.03
17			0.02				0.02
18			0.04				0.04
19			0.04				0.04
20			0.04				0.04
21			0.03				0.03
22			0.03				0.03
23			0.04				0.04
24			0.04				0.04
25			0.04				0.04
26			0.04				0.04
27			0.05				0.05
28			0.05				0.05
29			0.05				0.05
30			0.05				0.05
31			0.05				0.05

Slow Sand/Membrane/DE Filtration/Unfiltered		Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings ≤ 1 NTU? ²	☒ Yes / No	CT's met everyday? (see back)	☒ Yes / No
All daily turbidity readings ≤ 5 NTU?	☒ Yes / No	All Cl ₂ residual at entry point ≥ 0.2 mg/l?	☒ Yes / No
Notes:		PRINTED NAME: Shiloh Copenhaver	
		SIGNATURE: 	6/1/2025
		PHONE #: (503) 842-3182	CERT #:

correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :

System Name: OPRD Cape Lookout ID#: 41 91068

Month/Year: 25-May

Disinfection *Giardia* Log

Inactiv:

1.0

Date / Time	Minimum Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	2.48	50	124.0	8.9	7.70	63.0	Yes	72
2	2.4	50	120.0	9.4	7.70	60.4	Yes	72
3	2.43	50	121.5	8.9	7.70	62.7	Yes	72
4	2.53	50	126.5	8.9	7.80	65.8	Yes	72
5	2.61	50	130.5	8.9	7.90	68.8	Yes	72
6	2.63	50	131.5	8.9	7.70	64.2	Yes	72
7	2.56	50	128.0	8.9	7.70	63.6	Yes	72
8	2.48	50	124.0	8.9	7.70	63.0	Yes	72
9	2.39	50	119.5	8.9	7.80	64.7	Yes	72
10	2.23	50	111.5	9.4	7.90	63.6	Yes	72
11	2.05	50	102.5	8.9	7.90	64.5	Yes	72
12	1.92	50	96.0	8.9	7.90	63.5	Yes	72
13	1.75	50	87.5	9.4	7.80	58.0	Yes	72
14	1.67	50	83.5	9.4	7.80	57.5	Yes	72
15	1.61	50	80.5	9.4	7.90	59.2	Yes	72
16	1.58	50	79.0	9.4	7.80	56.9	Yes	72
17	1.55	50	77.5	9.4	7.80	56.7	Yes	72
18	1.55	50	77.5	9.4	7.80	56.7	Yes	72
19	2.29	50	114.5	9.4	8.20	71.5	Yes	72
20	2.19	50	109.5	9.4	7.80	61.1	Yes	72
21	1.7	50	85.0	9.4	7.90	59.8	Yes	72
22	1.67	50	83.5	9.4	7.90	59.6	Yes	72
23	1.72	50	86.0	9.4	7.60	53.8	Yes	72
24	1.98	50	99.0	9.4	7.80	59.6	Yes	72
25	2.47	50	123.5	9.4	7.80	63.1	Yes	72
26	2.43	50	121.5	9.4	7.70	60.6	Yes	72
27	2.25	50	112.5	9.4	7.70	59.3	Yes	72
28	2.2	50	110.0	10.0	7.80	58.7	Yes	72
29	2.18	50	109.0	9.4	7.70	58.9	Yes	72
30	2.11	50	105.5	10.0	7.60	54.1	Yes	72
31	2.07	50	103.5	10.0	7.60	53.8	Yes	72

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised September 2016

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@state.or.us; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350