

Membrane Filter Monthly Operating Report

County: Deschutes

System Name: City of Bend

Month/Year: March 2024

PWS ID#: 41 - 00100 Minimum test pressure applied || req'd: 32 psi || 27 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

PDR Max[psi/min]

LRC [log removal]

DIT Daily

LRC = Log Removal Credit

0.21

4.00

Day	CFE Daily Turbidity [NTU]	Highest CFE [NTU]	Highest IFE [NTU] (>15 min duration)	Highest PDR of day [psi/min]	Lowest LRVambient of day [log removal]	[Y/N] or "off"
1	0.0148	0.0155	0.013	0.0436		Y
2	0.0147	0.0151	0.0129	0.0442		Y
3	0.0147	0.0151	0.0128	0.0448		Y
4	0.0148	0.0154	0.0135	0.0424		Y
5	0.0148	0.0149	0.0128	0.044		Y
6	0.0148	0.0168	0.0128	0.0448		Y
7	0.0148	0.0158	0.013	0.0434		Y
8	0.0148	0.015	0.0128	0.0396		Y
9	0.015	0.0151	0.0128	0.0436		Y
10	0.015	0.0152	0.0128	0.0464		Y
11	0.015	0.0156	0.0128	0.0428		Y
12	0.0153	0.0182	0.0131	0.0402		Y
13	0.0152	0.0177	0.0293	0.044		Y
14	0.0152	0.0163	0.0135	0.043		Y
15	0.0152	0.0153	0.0157	0.0428		Y
16	0.0151	0.0152	0.0171	0.0424		Y
17	0.0151	0.0152	0.017	0.0424		Y
18	0.0151	0.0163	0.0153	0.0452		Y
19	0.0151	0.0152	0.017	0.046		Y
20	0.0151	0.0183	0.0169	0.043		Y
21	0.015	0.0166	0.0154	0.0474		Y
22	0.015	0.0151	0.0162	0.0464		Y
23	0.015	0.015	0.0161	0.043		Y
24	0.015	0.0151	0.0138	0.0454		Y
25	0.015	0.0163	0.0162	0.0406		Y
26	0.015	0.0152	0.0163	0.0442		Y
27	0.015	0.0181	0.016	0.0396		Y
28	0.015	0.0183	0.0144	0.0446		Y
29	0.015	0.016	0.0158	0.0454		Y
30	0.015	0.0153	0.0153	0.0466		Y
31	0.015	0.0152	0.0145	0.0448		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 ≤ PDRMax, LRV ≥ LRC)	DIT Daily?
Y	Y	Y		Y
CT's met daily? (p. 2)	All Cl2 residual at EP ≥ 0.2 mg/L?	PDR < PDRMax?	LRVambient > LRC?	
Y	Y	Y		

PRINTED NAME:

Rod Minaus

SIGNATURE:



Notes:

DATE: 04/05/24

WT CERT #: T-08557

PHONE #: 541-693-2180

Disinfection Monthly Operating Report

System Name: **Bend Water Department**

PWS ID#: 41 - **00100**

Plant ID : WTP - **A**

0.5

Log
Inactivation
Required via
Disinfection

Day	Minimum Cl ₂ Residual at 1st 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 CT [GPM]	Peak Hourly Demand Flow OB1 [GPM]
1	0.97	787	764	4.33	7.38	32	Y	3,106	3,421
2	1.01	746	753	3.74	7.39	34	Y	3,204	3,542
3	1.01	649	655	3.63	7.35	33	Y	3,538	4,082
4	1.02	711	725	3.59	7.4	34	Y	3,466	3,542
5	1.03	650	670	3.61	7.33	33	Y	3,735	3,882
6	1.08	705	762	3.55	7.37	34	Y	3,591	3,540
7	1.07	653	699	3.73	7.37	34	Y	3,906	3,780
8	1.05	671	704	3.86	7.37	33	Y	3,778	3,679
9	1.05	667	700	3.83	7.38	34	Y	3,724	3,850
10	1	655	655	4.43	7.41	32	Y	3,819	3,809
11	1	707	707	4.23	7.38	32	Y	3,569	3,513
12	1.08	632	682	4.45	7.38	32	Y	3,947	3,952
13	1.05	640	672	4.28	7.36	32	Y	3,806	3,927
14	1.07	648	693	4.49	7.57	34	Y	3,918	3,795
15	1.12	704	788	4.01	7.49	35	Y	3,653	3,525
16	1.12	664	743	4.39	7.47	34	Y	3,857	3,688
17	1.04	630	655	4.91	7.43	32	Y	4,011	3,920
18	1.06	612	649	4.9	7.43	32	Y	4,152	4,030
19	1.08	609	658	4.96	7.5	33	Y	4,072	4,084
20	1.07	580	621	5.35	7.47	31	Y	4,184	4,370
21	1.15	611	703	5.4	7.49	32	Y	4,068	4,059
22	1.1	601	661	5.43	7.51	32	Y	4,015	4,185
23	1.1	695	765	5.12	7.51	32	Y	3,657	3,646
24	1.11	572	635	5.21	7.48	32	Y	4,174	4,462
25	1.14	621	708	4.78	7.48	33	Y	3,990	4,030
26	1.08	631	681	4.98	7.43	32	Y	4,069	3,889
27	1.1	604	664	5.1	7.41	31	Y	3,984	4,184
28	1.13	625	706	4.83	7.42	32	Y	4,044	3,945
29	1.12	654	733	4.99	7.44	32	Y	3,785	3,817
30	1.12	641	718	4.75	7.45	33	Y	4,023	3,832
31	1.14	654	745	5.34	7.4	31	Y	3,825	3,796

♦ 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: PO Box 14350
Portland, OR 97293-0350
email: dwp.dmce@odhsoha.oregon.gov
fax: 971-673-0458