

Membrane Filter Monthly Operating Report

County: Deschutes

System Name: City of Bend

Month/Year: September 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	0.0151	0.0152	0.0145	0.0436		Y
2	0.0151	0.0156	0.0145	0.0512		Y
3	0.0151	0.0153	0.0145	0.054		Y
4	0.0151	0.0162	0.0148	0.054		Y
5	0.0151	0.0161	0.0146	0.051		Y
6	0.0151	0.0154	0.0144	0.0448		Y
7	0.0151	0.0153	0.0145	0.0442		Y
8	0.0152	0.0153	0.0144	0.0422		Y
9	0.0151	0.0157	0.0168	0.0416		Y
10	0.0151	0.0154	0.0144	0.0454		Y
11	0.0151	0.0165	0.0145	0.0448		Y
12	0.015	0.0159	0.0144	0.0452		Y
13	0.0149	0.0153	0.0146	0.0454		Y
14	0.0152	0.0155	0.0145	0.0442		Y
15	0.0151	0.0155	0.0145	0.0532		Y
16	0.0151	0.0155	0.0145	0.0464		Y
17	0.0151	0.0154	0.0168	0.0422		Y
18	0.0152	0.0161	0.0147	0.0504		Y
19	0.0151	0.0159	0.0144	0.0466		Y
20	0.015	0.0153	0.0146	0.0518		Y
21	0.015	0.0153	0.0146	0.0466		Y
22	0.0151	0.0153	0.0146	0.0422		Y
23	0.0152	0.0168	0.0145	0.0452		Y
24	0.0152	0.0169	0.0146	0.0492		Y
25	0.0152	0.0153	0.0144	0.0476		Y
26	0.0152	0.0156	0.0146	0.0498		Y
27	0.0287	0.1657	0.0146	0.046		Y
28	0.0392	0.2129	0.0146	0.0486		Y
29	0.0353	0.2283	0.0147	0.047		Y
30	0.0194	0.1869	0.0146	0.0512		Y
31						

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: 10/07/24

WT CERT #: T-08557

PHONE #: 541-693-2180

9/30/2024 The combined filtrate Turbidity meter had a bad calibration and the meter gave some erroneous readings 9/27/2024 to 9/30/2024. We were able to re calibrate the meter and it started to operate correctly.

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	1.02	274	280	9.79	7.46	23	Y	7,505	8,041
2	1.02	274	280	10.48	7.5	22	Y	7,549	8,029
3	1	274	274	9.87	7.52	23	Y	7,570	8,039
4	1	273	273	10.16	7.5	23	Y	7,554	8,032
5	1	274	274	10.33	7.44	22	Y	7,597	8,034
6	1	272	272	10.46	7.49	22	Y	7,609	8,062
7	1.01	274	277	10.38	7.5	22	Y	7,555	8,042
8	1	274	274	10.12	7.47	23	Y	7,595	8,026
9	1	273	273	10.24	7.47	22	Y	7,578	8,067
10	0.99	274	272	10.07	7.49	23	Y	7,533	8,041
11	1.07	274	294	9.73	8.11	29	Y	7,562	8,044
12	0.97	274	266	9.24	7.63	25	Y	7,515	8,039
13	1	273	273	8.91	7.6	26	Y	7,536	8,089
14	1.01	273	276	8.54	7.59	26	Y	7,518	8,053
15	1	274	274	8.99	7.61	26	Y	7,553	8,075
16	1.05	274	288	8.81	7.57	26	Y	7,482	8,046
17	1.04	273	284	8.67	7.58	26	Y	7,525	8,048
18	1.03	274	282	9.09	7.58	25	Y	7,511	8,064
19	1.02	275	280	8.79	7.63	26	Y	7,494	8,078
20	1.01	275	278	8.98	7.64	26	Y	7,506	8,031
21	1.02	290	296	8.22	7.59	27	Y	7,563	8,072
22	1.02	276	282	8.02	7.63	28	Y	7,460	8,064
23	1.01	274	277	8.3	7.59	27	Y	7,503	8,046
24	1.02	273	279	8.74	7.64	26	Y	7,527	8,050
25	0.99	272	269	9.68	7.57	24	Y	7,593	8,044
26	1.02	273	278	9.79	7.62	24	Y	7,620	8,041
27	1.08	274	296	8.74	7.57	26	Y	7,553	8,047
28	1.06	273	289	8.97	7.63	26	Y	7,563	8,071
29	1.09	283	309	8.65	7.61	26	Y	7,619	8,070
30	1.11	274	304	8.34	7.63	27	Y	7,541	8,033
31									

♦ 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