

Membrane Filter Monthly Operating Report

System Name: **City of Bend**

County: **Deschutes**

PWS ID#: 41 - **00100**

Month/Year: **January 2025**

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

Minimum test pressure applied || req'd: 32 psi || 27 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

PDR Max[psi/min]

LRC [log removal]

DIT Daily

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	0.0127	0.0129	0.0134	0.0538		Y
2	0.0127	0.0173	0.0141	0.0524		Y
3	0.0127	0.0129	0.0136	0.0516		Y
4	0.0127	0.0127	0.0132	0.0524		Y
5	0.0127	0.013	0.0134	0.0524		Y
6	0.0127	0.0142	0.0133	0.0504		Y
7	0.0127	0.0129	0.0133	0.0506		Y
8	0.0128	0.0159	0.0135	0.0442		Y
9	0.0128	0.016	0.0137	0.0518		Y
10	0.0128	0.0133	0.0135	0.0498		Y
11	0.0128	0.0131	0.0138	0.0494		Y
12	0.0128	0.0129	0.0136	0.0482		Y
13	0.0128	0.0132	0.0139	0.046		Y
14	0.0128	0.0139	0.0138	0.05		Y
15	0.0128	0.0148	0.0139	0.0474		Y
16	0.0128	0.0131	0.0144	0.048		Y
17	0.0128	0.013	0.0135	0.0474		Y
18	0.0128	0.013	0.0136	0.0512		Y
19	0.0128	0.013	0.0135	0.051		Y
20	0.0129	0.0138	0.0135	0.0498		Y
21	0.0128	0.013	0.0137	0.0524		Y
22	0.0128	0.0129	0.0137	0.0512		Y
23	0.0129	0.0156	0.0137	0.0518		Y
24	0.0128	0.0129	0.0134	0.0512		Y
25	0.0128	0.013	0.0138	0.0522		Y
26	0.0128	0.0129	0.0135	0.0704		Y
27	0.0129	0.0167	0.015	0.0544		Y
28	0.0146	0.016	0.0136	0.054		Y
29	0.0153	0.0169	0.0174	0.0506		Y
30	0.0152	0.0155	0.0134	0.0524		Y
31	0.0152	0.0154	0.0136	0.0506		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:

Rod Minaus

Notes:

DATE: 02/05/25

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	1.13	510	576	3.54	7.68	39	Y	4,209	5,336
2	1.11	411	456	4.17	7.67	37	Y	4,914	6,142
3	1	413	413	4.36	7.6	35	Y	4,954	6,094
4	1	484	484	4.16	7.59	35	Y	4,434	5,322
5	1.15	393	452	4.27	7.62	36	Y	5,118	6,336
6	1.09	537	585	4.39	7.62	35	Y	4,211	4,579
7	0.99	445	441	4.46	7.66	35	Y	4,818	5,704
8	1.07	444	475	4.01	7.65	37	Y	4,507	5,955
9	1.07	448	479	4.45	7.65	36	Y	4,845	5,634
10	1.1	398	437	4.39	7.64	36	Y	4,861	6,637
11	1.1	465	511	4.48	7.66	36	Y	4,487	5,411
12	1.12	480	538	3.99	7.67	37	Y	4,462	5,306
13	1.08	458	494	4.18	7.66	36	Y	4,578	5,487
14	1.08	494	534	4.03	7.65	37	Y	4,369	5,213
15	1.08	416	449	4.32	7.64	36	Y	5,065	5,997
16	1.07	499	534	4.59	7.65	35	Y	4,325	5,235
17	1.08	428	462	4.42	7.66	36	Y	4,820	5,879
18	1.09	502	547	3.96	7.66	37	Y	4,304	5,170
19	1.15	515	592	3.31	7.66	39	Y	4,162	5,206
20	1.14	425	485	3.58	7.66	38	Y	4,902	6,031
21	1.12	495	554	3.3	7.66	39	Y	4,383	5,232
22	1.1	480	528	4.08	7.66	37	Y	4,517	5,210
23	1.13	460	520	3.86	7.68	38	Y	4,653	5,355
24	1.13	489	553	4.19	7.66	37	Y	4,382	5,255
25	1.15	427	491	3.75	7.67	38	Y	4,688	6,071
26	1.17	470	550	3.31	7.66	39	Y	4,578	5,363
27	1.19	480	571	3.37	7.62	38	Y	4,393	5,236
28	1.19	428	509	3.24	7.62	39	Y	4,806	6,030
29	1.24	444	551	4.01	7.57	36	Y	4,824	5,502
30	1.2	404	485	4.24	7.6	36	Y	5,068	6,113
31	1.19	490	583	4.29	7.6	36	Y	4,318	5,173

- ♦ 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

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fax: 971-673-0458