Membrane Filter Monthly Operating Report

System Name: **City of Bend** | County: **Deschutes**

PWS ID#: 41 - **00100** | Month/Year: **October 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 | **PDR Max[psi/min]** | **LRC [log removal]**

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]	DIT Daily [Y/N] or "off"
1	0.0137	0.0147	0.0129	0.0428		Y
2	0.0137	0.0144	0.0142	0.0424		Y
3	0.0137	0.0138	0.0128	0.0406		Y
4	0.0137	0.0137	0.0131	0.0458		Y
5	0.0137	0.0138	0.0129	0.0446		Y
6	0.0137	0.014	0.0131	0.0446		Y
7	0.0137	0.0138	0.0129	0.0454		Y
8	0.0137	0.0147	0.0132	0.044		Y
9	0.0137	0.0142	0.0129	0.046		Y
10	0.0137	0.0138	0.0128	0.044		Y
11	0.0137	0.0138	0.0133	0.0486		Y
12	0.0137	0.0138	0.013	0.0446		Y
13	0.0137	0.0141	0.0162	0.043		Y
14	0.0138	0.0138	0.0129	0.0434		Y
15	0.0138	0.0144	0.0129	0.0464		Y
16	0.0138	0.0143	0.0169	0.0448		Y
17	0.0137	0.0138	0.0181	0.0418		Y
18	0.0137	0.0138	0.0129	0.0448		Y
19	0.0138	0.0139	0.0129	0.0422		Y
20	0.0138	0.0142	0.013	0.0504		Y
21	0.0137	0.0138	0.0131	0.0492		Y
22	0.0137	0.0143	0.013	0.046		Y
23	0.0137	0.0143	0.013	0.0474		Y
24	0.0137	0.0138	0.0134	0.0506		Y
25	0.0138	0.0138	0.013	0.0488		Y
26	0.0138	0.0139	0.0129	0.0416		Y
27	0.0138	0.0141	0.027	0.0446		Y
28	n/a	n/a	n/a	n/a		OFF
29	0.0141	0.0471	0.0275	0.0452		Y
30	0.0138	0.0227	0.0147	0.0416		Y
31	0.0138	0.0155	0.0129	0.043		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 Mingus **DATE:** 11/04/25

SIGNATURE:  **WT CERT #:** T-08557

Notes: **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 Cl2 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	0.94	266	250	8.53	7.41	24	Y	7,590	8,224
2	0.95	267	254	8.46	7.38	24	Y	7,469	8,170
3	0.99	265	262	8.16	7.36	25	Y	7,672	8,219
4	1	265	265	7.8	7.37	25	Y	7,698	8,207
5	1	266	266	7.65	7.35	25	Y	7,553	8,216
6	0.98	265	260	8.04	7.43	25	Y	7,629	8,221
7	1.05	268	281	7.27	7.36	26	Y	7,497	8,203
8	1.02	264	270	7.93	7.37	25	Y	7,635	8,256
9	1.03	268	276	7.98	7.33	25	Y	7,558	8,160
10	1	268	268	7.94	7.37	25	Y	7,530	8,162
11	0.96	273	262	7.57	7.37	26	Y	7,411	8,023
12	1.01	272	275	7.33	7.42	27	Y	7,382	8,036
13	1.03	277	286	7.04	7.46	28	Y	7,172	8,027
14	1.04	271	282	6.86	7.36	27	Y	7,352	8,075
15	1	292	292	6.41	7.38	28	Y	6,869	7,668
16	1	286	286	6.62	7.39	28	Y	7,027	7,759
17	1.05	288	302	6.93	7.34	27	Y	6,994	7,689
18	1.08	300	324	6.64	7.38	28	Y	6,630	7,491
19	1.08	296	319	6.89	7.39	27	Y	6,843	7,459
20	1	315	315	6.86	7.33	27	Y	6,322	8,023
21	1.07	185	198	6.38	7.38	28	Y	0	7,571
22	1.05	198	208	6.96	7.34	27	Y	0	7,253
23	1.04	220	229	7.17	7.34	26	Y	0	6,383
24	1.04	279	290	7.02	7.42	27	Y	0	5,077
25	1	278	278	6.77	7.45	28	Y	0	5,116
26	0.97	279	270	6.83	7.4	27	Y	0	5,061
27	0.97	339	329	5.87	7.46	30	Y	0	4,170
28	n/a	0	n/a	n/a	n/a	n/a	n/a	0	0
29	0.89	312	278	6.21	7.39	28	Y	0	4,498
30	0.9	230	207	6.69	7.2	25	Y	0	6,160
31	1.04	293	305	6.08	7.38	29	Y	0	4,930

- ♦ 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