

Membrane Filter Monthly Operating Report

County: Deschutes

System Name: City of Bend

Month/Year: March 2026

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	0.0135	0.0144	0.0132	0.0428		Y
2	0.0135	0.015	0.0131	0.0418		Y
3	0.0136	0.0138	0.0143	0.0418		Y
4	0.0136	0.0138	0.0143	0.0434		Y
5	0.0136	0.0166	0.0176	0.0454		Y
6	0.0136	0.0137	0.0179	0.0416		Y
7	0.0135	0.0139	0.0131	0.0412		Y
8	0.0135	0.0136	0.0131	0.0418		Y
9	0.0137	0.0145	0.0135	0.0388		Y
10	n/a	n/a	n/a	n/a		OFF
11	n/a	n/a	n/a	n/a		OFF
12	0.0141	0.0375	0.0187	0.0446		Y
13	0.0136	0.0151	0.0131	0.0434		Y
14	0.0136	0.0139	0.0131	0.0402		Y
15	0.0136	0.0137	0.0133	0.0434		Y
16	0.0136	0.0158	0.0132	0.043		Y
17	0.0136	0.0138	0.0137	0.0446		Y
18	0.0135	0.0159	0.0131	0.0464		Y
19	0.0135	0.0144	0.013	0.0436		Y
20	0.0135	0.0138	0.0138	0.043		Y
21	0.0135	0.0136	0.013	0.0466		Y
22	0.0135	0.0136	0.013	0.0416		Y
23	0.0136	0.0141	0.0129	0.046		Y
24	0.0135	0.0136	0.0131	0.0506		Y
25	0.0136	0.0293	0.0135	0.0434		Y
26	0.0136	0.0173	0.0131	0.0428		Y
27	0.0136	0.0144	0.0131	0.048		Y
28	0.0135	0.0137	0.0132	0.0428		Y
29	0.0135	0.0136	0.0129	0.0516		Y
30	0.0136	0.0152	0.0133	0.0454		Y
31	0.0135	0.0151	0.0135	0.0516		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: 04/06/26

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	521	521	5.32	7.38	30	Y	4,310	4,687
2	1.02	456	465	5.29	7.4	30	Y	4,597	5,352
3	1.01	467	472	5.28	7.4	30	Y	4,558	5,081
4	0.96	479	460	5.36	7.42	30	Y	4,477	5,056
5	0.96	475	456	5.3	7.4	30	Y	4,491	4,970
6	1	489	489	4.83	7.43	32	Y	4,492	5,047
7	1.15	485	558	4.87	7.46	33	Y	4,455	4,913
8	0.93	473	440	5.64	7.37	29	Y	4,572	5,148
9	0.99	479	475	5.45	7.4	30	Y	4,444	4,840
10	n/a	0	n/a	n/a	n/a	n/a	n/a	0	0
11	n/a	0	n/a	n/a	n/a	n/a	n/a	0	0
12	1.07	433	463	5.49	7.51	31	Y	4,836	5,284
13	1.13	446	504	5.3	7.58	33	Y	4,751	5,092
14	1.01	483	488	5.82	7.49	30	Y	4,435	5,004
15	0.94	462	434	5.38	7.44	30	Y	4,550	5,096
16	1.13	429	485	5.7	7.5	31	Y	4,885	5,326
17	1.09	439	478	6.04	7.51	30	Y	4,866	5,213
18	1.33	383	509	5.98	7.74	34	Y	5,434	5,922
19	1.41	399	562	5.85	7.8	36	Y	5,299	5,679
20	1.09	371	405	6.29	7.79	33	Y	5,560	6,139
21	1.12	440	493	6.14	7.81	34	Y	4,958	5,091
22	1.09	397	433	5.48	7.8	35	Y	5,194	5,777
23	1.05	432	454	5.33	7.82	36	Y	4,916	5,232
24	0.99	381	377	6.28	7.65	31	Y	5,425	6,032
25	1.05	423	444	6.83	7.62	30	Y	5,038	5,370
26	1.04	367	382	5.34	7.41	31	Y	5,537	6,163
27	1.03	404	416	5.16	7.44	31	Y	5,359	5,575
28	1	361	361	5.97	7.59	31	Y	5,626	6,366
29	0.92	391	360	5.81	7.63	32	Y	5,532	5,698
30	1.05	366	384	6.17	7.63	31	Y	5,558	6,223
31	1.06	382	405	5.83	7.65	32	Y	5,277	6,085

♦ 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