OHA - DWS

Membrane Filter Monthly Operating Report

System Name: **ROW RIVER WTP**
PWS ID#: 41 - **00236**
Plant ID: WTP - **B** *(e.g., "A")*

County: **LANE**
Month/Year: **Apr-2025**
Minimum test pressure **applied || req'd**: 27.44 psi || 27.0 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
				0.170	4.00	
Day	CFE Daily Turbidity [NTU]	Highest CFE♣ [NTU]	Highest IFE [NTU] (>15 min duration)	Highest PDR of day [$^{psi}/_{min}$]	Lowest $LRV_{ambient}$ of day [log removal]	[Y/N] or "off"
1	0.015		0.015	0.03	5.08	Y
2	0.020		0.020	0.03	5.13	Y
3	0.013		0.013	0.03	5.10	Y
4	0.013		0.013	0.03	5.11	Y
5	0.015		0.015	0.04	5.09	Y
6	0.013		0.013	0.04	5.08	Y
7	0.015		0.015	0.04	5.10	Y
8	0.016		0.016	0.02	5.22	Y
9	0.014		0.014	0.04	5.08	Y
10	0.014		0.014	0.04	5.10	Y
11	0.015		0.015	0.04	5.11	Y
12	0.013		0.013	0.04	5.09	Y
13	0.016		0.016	0.04	5.12	Y
14	0.013		0.013	0.04	5.09	Y
15	0.014		0.014	0.04	5.09	Y
16	0.018		0.018	0.04	5.12	Y
17	0.013		0.013	0.04	5.08	Y
18	0.013		0.013	0.03	5.07	Y
19	0.015		0.015	0.04	5.12	Y
20	0.014		0.014	0.04	5.12	Y
21	0.014		0.014	0.04	5.13	Y
22	0.014		0.014	0.04	5.13	Y
23	0.016		0.016	0.04	5.07	Y
24	0.015		0.015	0.04	5.12	Y
25	0.014		0.014	0.04	5.10	Y
26	0.014		0.014	0.04	5.12	Y
27	0.014		0.014	0.04	5.10	Y
28	0.013		0.013	0.04	5.15	Y
29	0.014		0.014	0.04	5.13	Y
30	0.014		0.014	0.03	5.08	Y
31						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 ≤ PDR_{Max}, LRV ≥ LRC)	DIT Daily?
Yes	Yes	Yes	Yes	Yes
CT's met daily? (p. 2)	All Cl_2 residual at EP ≥ 0.2 $^{mg}/_{L}$?	PDR ≤ PDR_{Max}?	$LRV_{ambient}$ ≥ LRC?	
Yes	Yes	Yes	Yes	

PRINTED NAME: Ryan Kimball
SIGNATURE:
Notes:

DATE: 5/6/2025
WT CERT #: T-882889
PHONE #: 541-942-7094

♣ *Used for optimization purposes only.*

OHA-DWS

Disinfection Monthly Operating Report

System Name: **ROW RIVER WTP**

PWS ID#: 41 - **00236**

Plant ID : WTP - **B**

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 [GPM]	Notes (e.g. "Plant Off")
1	0.760	140	106.4	10.2	7.95	25.9	YES	902	
2	0.760	140	106.4	10.3	7.92	25.5	YES	893	
3	0.770	140	107.8	10.3	7.91	25.5	YES	857	
4	0.760	140	106.4	10.4	7.89	25.1	YES	979	
5	0.770	140	107.8	10.5	7.87	24.6	YES	1,060	
6	0.770	140	107.8	10.8	7.87	24.3	YES	994	
7	0.770	140	107.8	10.8	7.81	23.6	YES	872	
8	0.770	140	107.8	10.8	7.82	23.7	YES	861	
9	0.770	140	107.8	11.1	7.85	23.6	YES	963	
10	0.760	140	106.4	11.2	7.80	22.9	YES	887	
11	0.760	140	106.4	11.3	7.80	22.8	YES	1,573	
12	0.760	140	106.4	10.9	7.84	23.7	YES	1,085	
13	0.800	140	112.0	10.9	7.90	24.4	YES	1,011	
14	0.800	140	112.0	11.0	7.91	24.3	YES	1,203	
15	0.790	140	110.6	11.8	7.95	23.4	YES	904	
16	0.790	140	110.6	12.0	8.00	23.5	YES	900	
17	0.780	140	109.2	12.3	8.07	23.6	YES	904	
18	0.770	140	107.8	12.4	8.06	23.3	YES	1,115	
19	0.770	140	107.8	12.6	8.01	22.6	YES	1,013	
20	0.770	140	107.8	12.6	8.01	22.7	YES	1,050	
21	0.760	140	106.4	12.7	8.00	22.3	YES	928	
22	0.760	140	106.4	12.7	8.02	22.5	YES	905	
23	0.760	140	106.4	12.9	8.04	22.4	YES	963	
24	0.750	140	105.0	13.0	8.04	22.1	YES	956	
25	0.760	140	106.4	13.1	8.03	22.0	YES	1,013	
26	0.760	140	106.4	12.9	8.01	22.1	YES	948	
27	0.750	140	105.0	12.8	8.03	22.4	YES	1,067	
28	0.750	140	105.0	12.9	8.02	22.2	YES	1,096	
29	0.750	140	105.0	13.1	8.05	22.2	YES	1,067	
30	0.740	140	103.6	13.2	8.04	21.9	YES	1,116	
31		140							

♦ 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: Drinking Water Services
PO Box 14350
Portland, OR 97293-0350

email: dwp.dmce@odhsoha.oregon.gov

fax: 971-673-0458