

OHA - DWS

Membrane Filter Monthly Operating Report


 County: LANE

 Month/Year: Sep-2024

 System Name: ROW RIVER WTP

 PWS ID#: 41 - 00236

 Minimum test pressure applied || req'd: 27.550 psi || 27.0 ps

 Plant ID: WTP - B (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]

LRC = Log Removal Credit

0.170

4.00

 DIT
Daily

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	0.014		0.014	0.03	5.13	Y
2	0.015		0.015	0.04	5.15	Y
3	0.015		0.015	0.04	5.12	Y
4	0.015		0.015	0.03	5.07	Y
5	0.014		0.014	0.04	5.04	Y
6	0.014		0.014	0.04	5.03	Y
7	0.014		0.014	0.03	5.09	Y
8	0.014		0.014	0.04	5.10	Y
9	0.014		0.014	0.04	4.99	Y
10	0.015		0.015	0.04	5.14	Y
11	0.014		0.014	0.04	5.08	Y
12	0.014		0.014	0.04	5.03	Y
13	0.014		0.014	0.04	5.02	Y
14	0.014		0.014	0.04	5.03	Y
15	0.016		0.016	0.04	5.00	Y
16	0.014		0.014	0.04	5.03	Y
17	0.016		0.016	0.04	5.04	Y
18	0.015		0.015	0.04	5.12	Y
19	0.014		0.014	0.04	5.05	Y
20	0.017		0.017	0.04	5.09	Y
21	0.016		0.016	0.04	5.00	Y
22	0.014		0.014	0.04	5.01	Y
23	0.015		0.015	0.04	5.03	Y
24	0.015		0.015	0.03	4.89	Y
25	0.014		0.014	0.03	5.05	Y
26	0.015		0.015	0.04	5.00	Y
27	0.015		0.015	0.03	5.03	Y
28	0.019		0.019	0.04	5.04	Y
29	0.015		0.015	0.04	5.11	Y
30	0.014		0.014	0.04	5.06	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: <u>Ryan Kimball</u>	DATE: <u>10/3/2024</u>
SIGNATURE:	WT CERT #: <u>T-882889</u>
Notes:	PHONE #: <u>541-942-7094</u>

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 1 st 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	17.2	7.75	15.2	YES	2,063	
2	0.770	140	107.8	16.9	7.78	15.6	YES	1,917	
3	0.780	140	109.2	16.6	7.79	16.0	YES	2,018	
4	0.790	140	110.6	16.7	7.80	16.0	YES	2,032	
5	0.780	140	109.2	17.0	7.81	15.7	YES	2,109	
6	0.760	140	106.4	17.3	7.82	15.4	YES	2,271	
7	0.760	140	106.4	17.1	7.85	15.7	YES	2,003	
8	0.730	140	102.2	17.0	7.89	16.1	YES	1,952	
9	0.720	140	100.8	17.1	7.89	15.9	YES	2,337	
10	0.720	140	100.8	17.0	7.88	16.0	YES	2,064	
11	0.710	140	99.4	16.6	7.87	16.4	YES	1,779	
12	0.700	140	98.0	16.3	7.91	16.9	YES	1,481	
13	0.670	140	93.8	16.1	7.90	17.0	YES	1,629	
14	0.690	140	96.6	16.1	7.89	17.0	YES	1,378	
15	0.730	140	102.2	16.2	7.78	16.2	YES	1,377	
16	0.760	140	106.4	16.1	7.75	16.3	YES	1,654	
17	0.780	140	109.2	15.9	7.74	16.4	YES	1,595	
18	0.790	140	110.6	15.9	7.71	16.3	YES	1,443	
19	0.780	140	109.2	16.0	7.98	17.9	YES	1,435	
20	0.760	140	106.4	16.1	8.01	17.9	YES	1,584	
21	0.770	140	107.8	15.7	8.04	18.6	YES	1,463	
22	0.770	140	107.8	16.1	7.99	17.8	YES	1,363	
23	0.750	140	105.0	16.6	7.96	17.0	YES	1,603	
24	0.760	140	106.4	17.1	7.91	16.1	YES	1,634	
25	0.760	140	106.4	17.5	7.84	15.3	YES	1,596	
26	0.740	140	103.6	17.3	7.88	15.7	YES	1,310	
27	0.720	140	100.8	17.6	7.91	15.5	YES	1,438	
28	0.690	140	96.6	18.0	8.01	15.6	YES	1,308	
29	0.660	140	92.4	18.3	8.10	15.8	YES	1,150	
30	0.670	140	93.8	18.1	8.15	16.3	YES	1,493	
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