

OHA - DWS

Membrane Filter Monthly Operating Report

System Name: **Detroit Water System**

County: **Marion**

PWS ID#: 41 - **00257**

Month/Year: **Jul-2025**

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

Minimum test pressure applied: **17.48** psi

Minimum test pressure req'd: **17.48** 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]
0.080

LRC [log removal]
4.00

DIT
Daily

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 minutes)	Highest PDR of day [^{psi} /min]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.045		0.045	0.029	4.43	
2	0.050		0.050	0.029	4.48	
3	0.055		0.055	0.034	4.44	
4	0.061		0.061	0.032	4.50	
5	0.068		0.068	0.036	4.48	
6	0.078		0.078	0.034	4.49	
7	0.087		0.087	0.033	4.50	
8	0.099		0.099	0.033	4.44	
9	0.104		0.104	0.033	4.48	
10	0.019		0.019	0.028	4.61	
11	0.020		0.020	0.024	4.59	
12	0.022		0.022	0.024	4.60	
13	0.024		0.024	0.032	4.50	
14	0.027		0.027	0.033	4.42	
15	0.031		0.031	0.033	4.55	
16	0.037		0.037	0.030	4.49	
17	0.047		0.047	0.032	4.50	
18	0.057		0.057	0.032	4.47	
19	0.068		0.068	0.032	4.49	
20	0.084		0.084	0.024	4.54	
21	0.096		0.096	0.035	4.46	
22	0.102		0.102	0.035	4.51	
23	0.023		0.023	0.030	4.52	
24	0.025		0.025	0.030	4.57	
25	0.028		0.028	0.032	4.55	
26	0.031		0.031	0.036	4.44	
27	0.035		0.035	0.036	4.46	
28	0.041		0.041	0.028	4.54	
29	0.049		0.049	0.034	4.48	
30	0.058		0.058	0.034	4.48	
31	0.072		0.072	0.031	4.48	

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	
CT's met daily? (p. 2)	All Cl ₂ residual at EP ≥ 0.2 mg/L?	PDR ≤ PDR _{Max} ?	LRV _{ambient} ≥ LRC?	
		Yes	Yes	

PRINTED NAME: **Robert Bruce**
SIGNATURE: *Robert Bruce*
Notes:

DATE: **8-4-2025**
WT CERT #: **7136**
PHONE #: **503-854-3496**

OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: Madison
Month/Year: July/2025

System Name:	ID#: 41						WTP: TP -
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day ¹ [NTU]
1	0.01	0.01	0.01	0.01		0.01	0.01
2		0.01	0.01	0.01	0.01	0.01	0.01
3	0.01	0.01	0.01	0.01	0.01	0.01	0.01
4	0.01		0.01	0.01	0.01	0.01	0.01
5	0.01		0.01	0.01	0.01	0.01	0.01
6	0.01	0.01	0.01	0.01	0.01	0.01	0.01
7	0.01	0.01	0.01	0.01	0.01	0.01	0.01
8			0.01	0.01	0.01	0.01	0.01
9		0.01	0.01				0.01
10			0.01	0.01	0.01	0.01	0.01
11			0.01	0.01	0.01	0.01	0.01
12		0.01	0.01	0.01			0.01
13	0.01		0.01	0.01	0.01	0.01	0.01
14			0.01	0.01		0.01	0.01
15			0.01	0.01			0.01
16			0.01	0.01		0.01	0.01
17			0.01	0.01	0.01	0.01	0.01
18	0.01	0.01	0.01		0.01	0.01	0.01
19			0.01	0.01		0.01	0.01
20	0.01	0.01	0.01	0.01	0.01		0.01
21	0.01	0.01	0.01	0.01	0.01	0.01	0.01
22		0.01	0.01				0.01
23		0.01	0.01	0.01	0.01	0.01	0.01
24			0.01	0.01		0.01	0.01
25				0.01	0.01	0.01	0.01
26	0.01		0.01	0.01	0.01	0.01	0.01
27	0.01	0.01	0.01	0.01	0.01	0.01	0.01
28	0.01		0.01	0.01		0.01	0.01
29		0.01	0.01	0.01	0.01	0.01	0.01
30			0.01	0.01	0.01		0.01
31		0.01	0.01	0.01	0.01	0.01	0.01

Slow Sand/Membrane/DE Filtration/Unfiltered 95% of daily turbidity readings ≤ 1 NTU? ² <u>Yes</u> / No All daily turbidity readings ≤ 5 NTU? <u>Yes</u> / No		Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <u>Yes</u> / No All Cl2 residual at entry point ≥ 0.2 mg/l? <u>Yes</u> / No	
Notes:		PRINTED NAME: <u>Robert Bruce</u> SIGNATURE: <u>Robert Bruce</u> DATE: <u>8-4-2025</u> PHONE #: <u>(503) 854-3496</u> CERT #: <u>7136</u>	

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form
Slow Sand, Membrane, Diatomaceous Earth Filtration, or Unfiltered Systems

County: Marian
Month/Year: July 2025

System Name: Detroit ID#: 41 WTP: TP -

Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day ¹ [NTU]
1	0.01	0.01	0.01	0.01	0.01	0.01	0.01
2	0.01	0.01	0.01	0.01	0.01	0.01	0.01
3	0.01	0.01	0.01	0.01	0.01	0.01	0.01
4	0.01	0.01	0.01	0.01	0.01	0.01	0.01
5	0.01	0.01	0.01	0.01	0.01	0.01	0.01
6	0.01	0.01	0.01	0.01	0.01	0.01	0.01
7	0.01	0.01	0.01	0.01	0.01	0.01	0.01
8	0.01		0.01	0.01	0.01	0.01	0.01
9	0.01	0.01	0.01	0.01	0.01	0.01	0.01
10	0.01	0.01	0.01	0.01	0.01	0.01	0.01
11	0.01	0.01	0.01	0.01	0.01	0.01	0.01
12	0.01	0.01	0.01	0.01	0.01	0.01	0.01
13	0.01	0.01	0.01	0.01	0.01	0.01	0.01
14	0.01	0.01	0.01	0.01	0.01	0.01	0.01
15	0.01	0.01	0.01	0.01	0.01	0.01	0.01
16	0.01	0.01	0.01	0.01	0.01	0.01	0.01
17			0.01	0.01	0.01	0.01	0.01
18	0.01	0.01	0.01	0.01	0.01	0.01	0.01
19	0.01	0.01	0.01	0.01	0.01	0.01	0.01
20	0.01		0.01	0.01	0.01	0.01	0.01
21	0.01	0.01	0.01	0.01	0.01	0.01	0.01
22	0.01	0.01	0.01	0.01	0.01	0.01	0.01
23	0.01		0.01	0.01	0.01	0.01	0.01
24	0.01	0.01	0.01	0.01	0.01	0.01	0.01
25	0.01			0.01	0.01	0.01	0.01
26	0.01	0.01	0.01	0.01	0.01	0.01	0.01
27	0.01	0.01	0.01	0.01	0.01	0.01	0.01
28	0.01		0.01	0.01	0.01	0.01	0.01
29	0.01		0.01	0.01	0.01	0.01	0.01
30	0.01		0.01	0.01	0.01	0.01	0.01
31	0.01		0.01	0.01	0.01	0.01	0.01

Slow Sand/Membrane/DE Filtration/Unfiltered 95% of daily turbidity readings ≤ 1 NTU? ² <u>Yes</u> /No All daily turbidity readings ≤ 5 NTU? <u>Yes</u> /No	Monthly Summary (Answer Yes or No) CT's met everyday? (see back) <u>Yes</u> /No All Cl ₂ residual at entry point ≥ 0.2 mg/l? <u>Yes</u> /No
Notes:	PRINTED NAME: <u>Robert Bruce</u> SIGNATURE: <u>Robert Bruce</u> DATE: <u>8-4-2025</u> PHONE #: <u>(503) 854-3496</u> CERT #: <u>7136</u>

¹ Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM through 8 PM may not correspond to continuous readings' maximum. ² Filtered systems only.

OHA - Drinking Water Services - Surface Water Quality Data Form

WTP- :

System Name: Detroit

ID#: 41

Month/Year: July 2025Disinfection *Giardia* Log

Inactiv:

0.5

Date / Time	Cl ₂ Residual at 1st User (C) ³	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? ³	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
1	.8	66	52	18.0	7.6	18	yes	340
2	.8	66	52	17.3	7.6	18	yes	340
3	.8	66	52	18.0	7.7	18	yes	340
4	.8	66	52	17.0	7.7	18	yes	355
5	.8	66	52	16.1	7.8	18	yes	385
6	.7	66	46	15.9	7.8	17	yes	400+
7	.7	66	46	17.8	7.8	17	yes	400+
8	.7	66	46	17.8	7.8	17	yes	350
9	.7	66	46	18.4	7.6	17	yes	350
10	.8	66	52	19.1	7.6	18	yes	365
11	.8	66	52	19.1	7.6	18	yes	400+
12	.8	66	52	18.0	7.5	18	yes	400+
13	.8	66	52	18.4	7.4	18	yes	375
14	.8	66	52	20.5	7.4	13	yes	375
15	.8	66	52	20.7	7.5	18	yes	360
16	.8	66	52	20.1	7.3	13	yes	360
17	.8	66	52	20.1	7.3	13	yes	340
18	.7	66	46	18.5	7.5	18	yes	380
19	.7	66	46	18.4	7.6	18	yes	400+
20	.7	66	46	19.5	7.8	18	yes	380
21	.7	66	46	17.7	7.8	18	yes	400
22	.7	66	46	18.1	7.9	18	yes	350
23	.7	66	46	18.0	7.8	18	yes	365
24	.7	66	46	18.2	7.7	18	yes	355
25	.7	66	46	19.9	7.7	18	yes	380
26	.8	66	52	18.8	7.8	18	yes	400+
27	.7	66	46	17.8	7.8	18	yes	370
28	.7	66	46	17.5	7.9	18	yes	400
29	.7	66	46	18.2	7.9	18	yes	360
30	.7	66	46	19.1	7.8	18	yes	400
31	.7	66	46	19.6	7.9	18	yes	340

³ If Cl₂ at entry point < 0.2 mg/l or CT not met, notify DWS within 24 hours.

Revised November 2022

Return by 10th of following month by email, fax, or mail to:

dwp.dmce@oha.oregon.gov; 971-673-0694; or Drinking Water Services, PO Box 14350, Portland, OR 97293-0350

PAGE 2 of 2