Membrane Filter Monthly Operating Report

County: **Marion**

System Name: **Gates, City Of**

Month/Year: **Jan-2025**

PWS ID#: 41 - **00317**

Minimum test pressure **applied || req'd**: 10.58 psi / 10.50 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

LRC = Log Removal Credit

PDR_{Max} [$^{psi}/_{min}$]	LRC [log removal]	DIT Daily
	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						Off
2	0.030					Yes
3						Off
4						Off
5	0.030					Yes
6						Off
7						Off
8	0.030					Yes
9						Off
10						Off
11	0.030					Yes
12						Off
13						Off
14	0.030					Yes
15						Off
16						Off
17	0.045					Yes
18						Off
19						Off
20	0.031					Yes
21						Off
22						Off
23	0.031					Yes
24	0.031					Yes
25						Off
26	0.032					Yes
27	0.030					Yes
28						Off
29	0.030					Yes
30						Off
31						Off

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

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: Gregory R Benthin **DATE:** 2/5/2025

SIGNATURE: Gregory R Benthin **WT CERT #:** 5244

Notes: **PHONE #:** 503-897-2669

Revised 7/31/2023

♣ *Used for optimization purposes only.*

OHA-DWS

Disinfection Monthly Operating Report

System Name: **Gates, City Of**

PWS ID#: 41 - **00317**

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 [GPM]	Notes (e.g. "Plant Off")
1									Plant Off
2	1.450	120	174.0	14.4	7.67	19.1	YES	210	4:50 PM
3									Plant Off
4									Plant Off
5	0.992	120	119.0	13.7	7.80	19.9	YES	210	1:15 PM
6									Plant Off
7									Plant Off
8	0.810	120	97.2	14.5	7.73	18.1	YES	210	1:05 PM
9									Plant Off
10									Plant Off
11	0.880	120	105.6	12.5	7.81	21.4	YES	210	1:10 PM
12									Plant Off
13									Plant Off
14	1.060	120	127.2	14.2	7.82	19.6	YES	210	1:35 PM
15									Plant Off
16									Plant Off
17	1.060	120	127.2	14.8	7.87	19.2	YES	210	1:20 PM
18									Plant Off
19									Plant Off
20	1.400	120	168.0	13.9	7.98	22.0	YES	210	1:30 PM
21									Plant Off
22									Plant Off
23	1.000	120	120.0	14.5	7.99	20.3	YES	210	11:15 AM
24	1.300	120	156.0	5.0	7.64	35.1	YES	210	1:00 AM
25									Plant Off
26	0.860	120	103.2	12.5	7.95	22.5	YES	210	2:20 PM
27	1.170	120	140.4	5.0	7.83	37.0	YES	210	1:00 AM
28									Plant Off
29	1.020	120	122.4	14.3	8.04	21.0	YES	210	1:15 PM
30									Plant Off
31									Plant Off

♦ 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

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