OHA - DWS

Membrane Filter Monthly Operating Report

System Name: **City of Gates**
PWS ID#: 41 - **00317**
Plant ID: WTP - **A** *(e.g., "A")*

County: **Marion**
Month/Year: **Jul-2025**
Minimum test pressure **applied**: **10.59** psi
Minimum test pressure **req'd**: **10.5** 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]
0.230	4.00

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]	DIT Daily [Y/N] or "off"
1	0.032				4.77	Y
2	0.032				4.77	Y
3	0.030				4.77	Y
4	0.030				4.77	Y
5	0.032				4.77	Y
6	0.032				4.77	Y
7	0.032				4.77	Y
8	0.033				4.77	Y
9						off
10	0.030				4.77	Y
11	0.032				4.77	Y
12	0.032				4.77	Y
13						off
14	0.033				4.77	Y
15	0.034				4.77	Y
16	0.035				4.77	Y
17	0.033				4.77	Y
18	0.040				4.77	Y
19	0.034				4.77	Y
20	0.035				4.77	Y
21	0.035				4.77	Y
22	0.050				4.77	Y
23	0.039				4.77	Y
24	0.040				4.77	Y
25	0.038				4.77	Y
26	0.039				4.77	Y
27	0.038				4.77	Y
28	0.040				4.77	Y
29	0.038				4.77	Y
30	0.039				4.77	Y
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	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

PRINTED NAME: Gregory R Benthin
SIGNATURE: Gregory R Benthin
Notes:

DATE: 8/4/2025
WT CERT #: 5244
PHONE #: 5038972669

♣ *Used for optimization purposes only.*

Revised 10/1/2024

OHA-DWS

Disinfection Monthly Operating Report

System Name: **City of Gates**

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	1.090	120	130.8	22.7	7.62	10.3	YES	210	2:00 PM
2	1.000	120	120.0	23.5	7.60	9.6	YES	210	4:30 PM
3	0.860	120	103.2	5.0	7.63	33.2	YES	210	3:00 AM
4	1.420	120	170.4	20.0	7.65	13.0	YES	210	1:15 PM
5	1.050	120	126.0	19.8	7.65	12.6	YES	210	10:30 AM
6	1.040	120	124.8	22.0	7.60	10.7	YES	210	11:00 AM
7	0.970	120	116.4	20.5	7.79	12.6	YES	210	11:00 AM
8	0.950	120	114.0	21.0	7.69	11.7	YES	210	1:35 PM
9									Plant off
10	0.890	120	106.8	21.6	8.10	13.0	YES	210	1:50 PM
11	1.340	120	160.8	5.0	7.84	37.9	YES	210	3:00 AM
12	1.120	120	134.4	23.1	8.06	11.9	YES	210	1:15 PM
13									Plant off
14	1.630	120	195.6	22.1	7.64	11.5	YES	210	4:00 PM
15	1.000	120	120.0	21.8	7.91	12.1	YES	210	4:55 PM
16	0.740	120	88.8	26.5	8.12	9.3	YES	210	4:20 PM
17	0.980	120	117.6	21.8	7.71	11.2	YES	210	1:20 PM
18	0.860	120	103.2	23.0	7.78	10.5	YES	210	1:00 AM
19	1.000	120	120.0	21.4	7.98	12.8	YES	210	1:15 PM
20	0.930	120	111.6	20.1	8.17	14.8	YES	210	1:30 PM
21	1.800	120	216.0	18.8	7.88	16.0	YES	210	1:50 PM
22	1.090	120	130.8	21.8	7.97	12.5	YES	210	1:20 PM
23	0.980	120	117.6	23.3	8.02	11.4	YES	210	1:20 PM
24	1.540	120	184.8	20.5	7.89	14.0	YES	210	1:00 AM
25	0.830	120	99.6	23.3	8.04	11.3	YES	210	2:15 PM
26	0.760	120	91.2	21.3	8.17	13.4	YES	210	1:15PM
27	1.850	120	222.0	19.0	7.72	15.0	YES	210	1:15 PM
28	1.250	120	150.0	20.2	7.69	12.8	YES	210	2:00 AM
29	0.690	120	82.8	22.2	7.83	11.0	YES	210	1:50 PM
30	1.250	120	150.0	23.1	8.10	12.3	YES	210	4:30 PM
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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