

# OHA - DWS

## Membrane Filter Monthly Operating Report

County: **Linn**

System Name: **Lebanon, City of**

Month/Year: **Mar-2024**

PWS ID#: 41 - **00473**

Minimum test pressure applied: **18.3** psi

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

Minimum test pressure req'd: **18.3** 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

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	PDR <sub>Max</sub> [psi/min]	LRC [log removal]	DIT Daily
				0.100	4.00	
				Highest PDR of day [psi/min]	Lowest LRV <sub>ambient</sub> of day [log removal]	[Y/N] or "off"
1	0.000	0	0.081	0.00	5.30	Y
2	0.000	0	0.040	0.00	5.30	Y
3	0.000	0	0.000	0.00	5.30	OFF
4	0.000	0	0.080	0.00	5.30	Y
5	0.000	0	0.037	0.00	5.30	Y
6	0.000	0	0.022	0.00	5.30	Y
7	0.000	0	0.017	0.00	5.30	Y
8	0.000	0	0.037	0.00	5.30	Y
9	0.000	0	0.021	0.00	5.30	Y
10	0.000	0	0.000	0.00	5.30	OFF
11	0.000	0	0.073	0.01	5.30	Y
12	0.000	0	0.038	0.01	5.30	Y
13	0.000	0	0.032	0.00	5.30	Y
14	0.000	0	0.018	0.00	5.30	Y
15	0.000	0	0.065	0.00	5.30	Y
16	0.000	0	0.046	0.00	5.30	Y
17	0.000	0	0.042	0.00	5.30	Y
18	0.000	0	0.024	0.00	5.30	Y
19	0.000	0	0.038	0.00	5.30	Y
20	0.000	0	0.063	0.01	5.30	Y
21	0.000	0	0.034	0.01	5.30	Y
22	0.000	0	0.020	0.00	5.30	Y
23	0.000	0	0.021	0.00	5.30	Y
24	0.000	0	0.000	0.00	5.30	OFF
25	0.000	0	0.065	0.00	5.30	Y
26	0.000	0	0.047	0.00	5.30	Y
27	0.000	0	0.033	0.00	5.30	Y
28	0.000	0	0.070	0.00	5.30	Y
29	0.000	0	0.052	0.00	5.30	Y
30	0.000	0	0.031	0.00	5.30	Y
31	0.000	0	0.044	0.00	5.30	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 <sub>Max</sub> , LRV ≥ LRC)	DIT Daily?
Yes	Yes	Yes	Yes	Yes
CT's met daily? (p. 2)	All Cl <sub>2</sub> residual at EP ≥ 0.2 mg/L?	PDR ≤ PDR <sub>Max</sub> ?	LRV <sub>ambient</sub> ≥ LRC?	
Yes	Yes	Yes	Yes	

PRINTED NAME: **Tyson Keene**

SIGNATURE: 

Notes:

DATE: **4-3-24**

WT CERT #: **T09109**

PHONE #: **541-990-1254**

# OHA-DWS

## Disinfection Monthly Operating Report

System Name: **Lebanon, City of**

PWS ID#: 41 - **00473**

Plant ID : WTP - **WTP-B**

**0.5**

↳ Log  
Inactivation  
Required via  
Disinfection

Day	Minimum Cl <sub>2</sub> Residual at 1 <sup>st</sup> 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	0.713	70.8064	50.5	9.2	7.78	25.9	YES	3,287	
2	1.030	69.3609	71.4	8.0	7.78	29.1	YES	3,153	
3	1.000	14396.1	14396.1	8.7	7.86	28.6	YES	(1)	PLANT OFF
4	0.819	65.1927	53.4	9.6	7.84	26.0	YES	3,109	
5	0.953	72.0882	68.7	8.8	7.95	29.1	YES	3,224	
6	0.986	64.9117	64.0	9.2	7.89	27.9	YES	3,222	
7	1.129	67.4724	76.2	8.1	7.86	30.2	YES	3,223	
8	0.934	73.7288	68.9	9.0	7.71	26.3	YES	3,224	
9	0.997	68.822	68.6	8.8	7.82	27.9	YES	3,201	
10	1.000	14396.1	14396.1	9.4	8.01	28.7	YES	(1)	PLANT OFF
11	0.835	70.9896	59.3	9.8	7.99	27.3	YES	3,420	
12	0.825	68.981	56.9	9.2	7.82	26.6	YES	3,256	
13	0.826	61.6309	50.9	10.0	8.15	28.5	YES	3,230	
14	0.987	74.0239	73.1	9.3	7.99	28.7	YES	2,786	
15	0.887	71.2466	63.2	9.6	7.69	24.9	YES	3,307	
16	0.873	62.7509	54.8	9.5	7.84	26.4	YES	3,211	
17	0.783	108.166	84.7	10.8	8.06	25.9	YES	1,891	
18	0.737	63.4386	46.7	10.7	8.08	26.2	YES	3,207	
19	0.883	70.5949	62.4	10.4	7.93	25.8	YES	3,151	
20	0.758	70.1544	53.2	10.7	8.13	26.7	YES	3,235	
21	0.880	65.805	57.9	10.4	8.07	27.2	YES	3,336	
22	0.822	73.0452	60.1	10.6	8.07	26.4	YES	3,220	
23	0.984	66.802	65.7	10.1	7.91	26.4	YES	3,277	
24	1.000	14396.1	14396.1	10.8	8.37	29.8	YES	(1)	PLANT OFF
25	0.764	69.0479	52.7	11.0	8.36	28.5	YES	3,313	
26	0.889	69.3361	61.7	10.2	8.13	28.1	YES	3,268	
27	0.890	82.0231	73.0	9.7	8.09	28.6	YES	2,827	
28	0.919	70.7146	65.0	10.3	7.67	23.7	YES	2,885	
29	0.651	81.9309	53.3	10.2	8.07	26.7	YES	2,867	
30	1.030	77.3146	79.6	9.7	7.97	27.9	YES	2,916	
31	1.115	137.445	153.3	10.3	8.03	27.6	YES	1,466	

\* 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 10<sup>th</sup> of following month by**

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

email: [dwp.dmce@odhsoha.oregon.gov](mailto:dwp.dmce@odhsoha.oregon.gov)

fax: 971-673-0458

**Turbidity-Triggered Direct Integrity Test (DIT) Reporting Form**

OHA - Drinking Water Services

To be used when IFE exceeds 0.15 NTU, and submitted to OHA-DWS \*

Water System Name: Lebanon, City of

Water System ID: 00473 [00473 Water System Profile on DataOnline](#)

Treatment Plant ID: WTP- WTP-B PDR<sub>Max</sub> = maximum allowed pressure decay rate for a passing DIT

County: Linn LRC = Log Removal Credit granted for filtration, LRV<sub>ambient</sub> must be ≥ LRC.

Month - Year: Mar-24


Date/Time and membrane unit(s) affected		Pressure Decay Rate (PDR) [ <sup>psi</sup> / <sub>min</sub> ]: <b>0.10</b>			LRC: <b>4.00</b>	
Date/Time	Membrane unit/skid/cell ID#	Turbidity level > 0.15 NTU resulting in DIT [NTU]	Corrective action	DIT Re-test Results [ <sup>psi</sup> / <sub>min</sub> ]	Return-to-service turbidity [NTU]	Return-to-service LRV <sub>ambient</sub> [log]

**Monthly Summary**

All return to service turbidity readings ≤ 0.15 NTU? (Enter Yes or No) ⇒

All membrane units removed from service until a DIT passes? (Enter Yes or No) ⇒

All return to service LRV<sub>ambient</sub> ≥ LRC? (Enter Yes or No) ⇒

Name: Tyson Keene  
 Signature:   
 Phone #: 541-990-1254

Date: 4-3-24  
 WT Cert #: T-09109

\* OAR 333-061-0036(5)(d)(C)(iv) states that if indirect integrity monitoring includes turbidity and the filtrate turbidity readings are above 0.15 NTU for a period greater than 15 minutes (i.e., two consecutive 15-minute readings above 0.15 NTU), direct integrity testing in accordance with subparagraphs (5)(d)(B)(i) through (v) of this rule must immediately be performed on the associated membrane unit.

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

County: **Linn**  
 Month/Year: **3/2024**

System Name:	Lebanon, City of			ID#: 41-00473			Membrane
Day	12 AM [NTU]	4 AM [NTU]	8 AM [NTU]	NOON [NTU]	4 PM [NTU]	8 PM [NTU]	Highest Reading of the day <sup>1</sup> [NTU]
1	OFF	OFF	OFF	OFF	0.014	0.014	0.081
2	0.012	0.014	0.014	0.014	0.014	0.014	0.040
3	OFF	OFF	OFF	OFF	OFF	OFF	0.000
4	OFF	OFF	0.014	0.014	0.014	OFF	0.080
5	OFF	OFF	0.014	0.014	0.014	OFF	0.037
6	OFF	OFF	0.014	0.014	0.014	0.014	0.022
7	0.014	0.014	OFF	OFF	OFF	OFF	0.017
8	OFF	OFF	OFF	OFF	0.014	0.013	0.037
9	0.014	0.014	0.014	0.014	0.014	0.012	0.021
10	OFF	OFF	OFF	OFF	OFF	OFF	0.000
11	OFF	OFF	0.016	0.014	0.013	OFF	0.073
12	OFF	OFF	0.014	0.014	0.016	OFF	0.038
13	OFF	OFF	0.017	0.016	0.016	0.016	0.032
14	0.016	0.015	OFF	OFF	OFF	OFF	0.018
15	OFF	OFF	OFF	0.012	0.034	0.016	0.065
16	0.016	0.014	0.017	0.017	0.016	OFF	0.046
17	OFF	OFF	OFF	OFF	OFF	0.018	0.042
18	0.016	0.018	0.017	0.018	0.018	OFF	0.024
19	OFF	OFF	0.018	0.014	0.014	OFF	0.038
20	OFF	OFF	0.018	0.018	0.018	OFF	0.063
21	OFF	OFF	0.012	0.018	0.018	OFF	0.034
22	OFF	OFF	OFF	OFF	0.018	0.018	0.020
23	0.014	0.018	0.014	0.018	0.018	0.018	0.021
24	OFF	OFF	OFF	OFF	OFF	OFF	0.000
25	OFF	OFF	0.018	0.014	0.018	OFF	0.065
26	OFF	OFF	0.018	0.014	0.018	0.014	0.047
27	0.018	0.018	0.016	0.018	0.018	OFF	0.033
28	OFF	OFF	0.017	0.018	OFF	OFF	0.070
29	OFF	OFF	OFF	OFF	0.021	0.016	0.052
30	0.018	0.017	0.017	0.016	0.018	0.019	0.031
31	0.018	0.025	0.031	0.038	0.040	0.044	0.044

Slow Sand/Membrane/DE Filtration/Unfiltered	Monthly Summary (Answer Yes or No)	
95% of daily turbidity readings $\leq$ 1 NTU? <sup>2</sup> <input checked="" type="radio"/> Yes <input type="radio"/> No	CT's met everyday? <input checked="" type="radio"/> Yes <input type="radio"/> No	All Cl2 residual at entry point $\geq$ 0.2 mg/l? <input checked="" type="radio"/> Yes <input type="radio"/> No
All daily turbidity readings $\leq$ 5 NTU? <input checked="" type="radio"/> Yes <input type="radio"/> No		

Notes: OFF = PLANT OFF

PRINTED NAME: Tyson Keene

SIGNATURE: [Signature] DATE: 4-3-24

PHONE #: 541-990-1254 CERT #: 100

<sup>1</sup> Including continuous NTU data, if applicable, for optimization recording purposes. Compliance values in columns 12 AM correspond to continuous readings' maximum. <sup>2</sup> Filtered systems only.

T-09109

OHA - Drinking Water Program - Surface Water Quality Data Form

WTP: WTP-B

System Name: Lebanon, CITY OF

ID#: 41-00473

Month/Year: 3/2024

Disinfection  
Giardia Log  
Inactive: 0.5

Date / Time	Minimum Cl <sub>2</sub> Residual at 1st User ( C ) <sup>3</sup>	Contact Time (T)	Actual CT	Temp	pH	Required CT	CT Met? <sup>3</sup>	Peak Hourly Demand Flow
	[ppm or mg/L]	[minutes]	C X T	[° C]		formula	Yes / No	[GPM]
3/1/2024 15:17	0.7	71	51	9	7.8	26	Yes	3287
3/2/2024 21:02	1.0	69	71	8	7.8	29	Yes	3153
3/3/2024 0:00	1.0	14396	14396	9	7.9	29	Yes	-1
3/4/2024 6:25	0.8	65	53	10	7.8	26	Yes	3109
3/5/2024 11:04	1.0	72	69	9	7.9	29	Yes	3224
3/6/2024 7:42	1.0	65	64	9	7.9	28	Yes	3222
3/7/2024 6:19	1.1	67	76	8	7.9	30	Yes	3223
3/8/2024 18:32	0.9	74	69	9	7.7	26	Yes	3224
3/9/2024 2:19	1.0	69	69	9	7.8	28	Yes	3201
3/10/2024 0:00	1.0	14396	14396	9	8.0	29	Yes	-1
3/11/2024 6:39	0.8	71	59	10	8.0	27	Yes	3420
3/12/2024 9:12	0.8	69	57	9	7.8	27	Yes	3256
3/13/2024 7:49	0.8	62	51	10	8.2	28	Yes	3230
3/14/2024 1:52	1.0	74	73	9	8.0	29	Yes	2786
3/15/2024 16:59	0.9	71	63	10	7.7	25	Yes	3307
3/16/2024 16:24	0.9	63	55	10	7.8	26	Yes	3211
3/17/2024 23:22	0.8	108	85	11	8.1	26	Yes	1891
3/18/2024 3:07	0.7	63	47	11	8.1	26	Yes	3207
3/19/2024 7:09	0.9	71	62	10	7.9	26	Yes	3151
3/20/2024 8:34	0.8	70	53	11	8.1	27	Yes	3235
3/21/2024 7:29	0.9	66	58	10	8.1	27	Yes	3336
3/22/2024 16:44	0.8	73	60	11	8.1	26	Yes	3220
3/23/2024 16:29	1.0	67	66	10	7.9	26	Yes	3277
3/24/2024 0:00	1.0	14396	14396	11	8.4	30	Yes	-1
3/25/2024 6:42	0.8	69	53	11	8.4	29	Yes	3313
3/26/2024 11:22	0.9	69	62	10	8.1	28	Yes	3268
3/27/2024 1:14	0.9	82	73	10	8.1	29	Yes	2827
3/28/2024 14:14	0.9	71	65	10	7.7	24	Yes	2885
3/29/2024 16:24	0.7	82	53	10	8.1	27	Yes	2867
3/30/2024 2:49	1.0	77	80	10	8.0	28	Yes	2916
3/31/2024 4:39	1.1	137	153	10	8.0	28	Yes	1466

<sup>3</sup> If Cl<sub>2</sub> at entry point < 0.2 mg/l or CT not met, DWP to be notified by end of next business day.









