OHA - DWS

Membrane Filter Monthly Operating Report

System Name: **Newport, City of**
PWS ID#: 41 - **00566**
Plant ID: WTP - **A** *(e.g., "A")*

County: **Lincoln**
Month/Year: **Apr-2025**
Minimum test pressure **applied**: **25** psi
Minimum test pressure **req'd**: **20** 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]
0.060	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]	DIT Daily [Y/N] or "off"
1	0.027	0.082	0.029	0.05	4.79	Y
2	0.032	0.058	0.020	0.04	4.79	Y
3	0.024	0.039	0.037	0.05	4.78	Y
4	0.032	0.084	0.045	0.04	4.78	Y
5	0.023	0.042	0.032	0.05	4.85	Y
6	0.070	0.074	0.022	0.05	4.83	Y
7	0.024	0.025	0.029	0.05	4.82	Y
8	0.022	0.053	0.023	0.04	4.83	Y
9	0.032	0.052	0.022	0.05	4.77	Y
10	0.024	0.055	0.021	0.05	4.78	Y
11	0.077	0.108	0.020	0.05	4.81	Y
12	0.042	0.043	0.027	0.05	4.80	Y
13	0.028	0.037	0.020	0.05	4.83	Y
14	0.036	0.069	0.031	0.05	4.75	Y
15	0.027	0.055	0.022	0.05	4.75	Y
16	0.023	0.030	0.030	0.05	4.79	Y
17	0.022	0.070	0.026	0.05	4.81	Y
18	0.050	0.051	0.052	0.05	4.80	Y
19	0.023	0.029	0.022	0.05	4.82	Y
20	0.033	0.054	0.026	0.04	4.80	Y
21	0.028	0.044	0.027	0.05	4.79	Y
22	0.030	0.062	0.043	0.05	4.77	Y
23	0.028	0.059	0.041	0.05	4.81	Y
24	0.021	0.042	0.049	0.05	4.79	Y
25	0.030	0.031	0.041	0.05	4.77	Y
26	0.022	0.031	0.025	0.05	4.77	Y
27	0.021	0.038	0.023	0.05	4.79	Y
28	0.022	0.045	0.030	0.05	4.76	Y
29	0.022	0.033	0.024	0.05	4.79	Y
30	0.019	0.029	0.029	0.05	4.77	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: Steve Stewart
SIGNATURE:
Notes:

DATE: 5/5/2025
WT CERT #: 2445
PHONE #: 541-265-7421

♠ *Used for optimization purposes only*

OHA-DWS

Disinfection Monthly Operating Report

System Name: **Newport, City of**

PWS ID#: 41 - **00566**

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	0.9	86	80	11	7.9	25	YES	2,613	
2	1.0	91	88	11	7.9	25	YES	2,520	
3	0.8	85	67	11	7.9	24	YES	2,620	
4	0.8	87	73	11	7.9	25	YES	2,623	
5	1.0	88	84	11	7.9	24	YES	2,605	
6	0.9	93	84	11	7.8	23	YES	2,618	
7	0.8	85	70	11	7.7	23	YES	2,632	
8	0.8	89	75	12	7.7	22	YES	2,556	
9	1.0	87	85	12	7.8	23	YES	2,627	
10	0.8	86	70	12	7.8	23	YES	2,619	
11	1.0	86	82	12	7.8	22	YES	2,632	
12	0.8	90	73	12	7.8	22	YES	2,613	
13	0.8	87	73	11	7.8	23	YES	2,602	
14	1.1	89	96	12	7.7	22	YES	2,597	
15	1.0	87	90	12	7.8	22	YES	2,560	
16	1.1	88	94	12	7.7	22	YES	2,615	
17	1.0	85	87	12	7.8	22	YES	2,619	
18	0.9	87	76	12	7.8	21	YES	2,616	
19	1.0	87	86	13	7.8	21	YES	2,603	
20	1.0	93	90	13	7.8	21	YES	2,607	
21	1.0	90	86	13	7.9	21	YES	2,554	
22	0.9	86	82	13	7.9	21	YES	2,623	
23	0.9	84	77	13	7.9	22	YES	2,624	
24	0.8	88	73	13	7.8	20	YES	2,621	
25	1.0	88	89	14	7.9	20	YES	2,597	
26	1.0	87	91	14	7.8	20	YES	2,613	
27	1.1	87	95	14	7.8	20	YES	2,548	
28	1.0	87	91	14	7.8	20	YES	2,613	
29	1.0	86	84	14	7.8	20	YES	2,613	
30	0.8	89	73	14	7.8	19	YES	2,613	

♦ 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

Revised 7/31/2023