# OHA - DWS

## Membrane Filter Monthly Operating Report

System Name: Riverbend
PWS ID#: 41 - 00601
Plant ID: WTP - (e.g., "A")

County: Lincoln
Month/Year: Sept 2025
Minimum test pressure **applied**: 22.77 psi
Minimum test pressure **req'd**: 21.76 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] (>15 minutes) | Highest PDR of day [psi/min] | Lowest $LRV_{ambient}$ of day [log removal] | DIT Daily [Y/N] or "off" |
|---|---|---|---|---|---|---|
| | | | | **$PDR_{Max}$ [psi/min]** | **LRC [log removal]** | **DIT Daily** |
| | | | | | **4.00** | |
| 1 | 0.052 | | | NA | 4.12 | Y |
| 2 | 0.052 | | | NA | 5.12 | Y |
| 3 | 0.052 | | | NA | 6.12 | Y |
| 4 | 0.052 | | | NA | 7.12 | Y |
| 5 | 0.052 | | | NA | 8.12 | Y |
| 6 | 0.052 | | | NA | 9.12 | Y |
| 7 | 0.052 | | | NA | 10.12 | Y |
| 8 | 0.052 | | | NA | 11.12 | Y |
| 9 | 0.052 | | | NA | 12.12 | Y |
| 10 | 0.052 | | | NA | 13.12 | Y |
| 11 | 0.052 | | | NA | 14.12 | Y |
| 12 | 0.073 | | | NA | 15.12 | Y |
| 13 | 0.052 | | | NA | 16.12 | Y |
| 14 | 0.052 | | | NA | 17.12 | Y |
| 15 | 0.052 | | | NA | 18.12 | Y |
| 16 | 0.052 | | | NA | 19.12 | Y |
| 17 | 0.052 | | | NA | 20.12 | Y |
| 18 | 0.052 | | | NA | 21.12 | Y |
| 19 | 0.063 | | | NA | 22.12 | Y |
| 20 | 0.052 | | | NA | 23.12 | Y |
| 21 | 0.052 | | | NA | 24.12 | Y |
| 22 | 0.063 | | | NA | 25.12 | Y |
| 23 | 0.073 | | | NA | 26.12 | Y |
| 24 | 0.063 | | | NA | 27.12 | Y |
| 25 | 0.021 | | | NA | 28.12 | Y |
| 26 | 0.031 | | | NA | 29.12 | Y |
| 27 | 0.021 | | | NA | 30.12 | Y |
| 28 | 0.021 | | | NA | 31.12 | Y |
| 29 | 0.021 | | | NA | 32.12 | Y |
| 30 | 0.021 | | | NA | 33.12 | Y |
| 31 | | | | | | |

**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** | **Yes** |

**PRINTED NAME:** Curtis Olson
**SIGNATURE:** Curtis Olson
**Notes:**

**DATE:** 10/10/2025
**WT CERT #:** 216644
**PHONE #:** 503-554-8333



Revised 10/1/2024

♣ *Used for optimization purposes only.*

# OHA-DWS

## Disinfection Monthly Operating Report

System Name: Riverbend

PWS ID#: 41 - 00601

Plant ID : WTP -

**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 | 1.826 | 53 | 96.8 | 12.6 | 6.84 | 16.6 | YES | 35 | |
| 2 | 1.675 | 53 | 88.8 | 14.0 | 6.90 | 15.2 | YES | 35 | |
| 3 | 1.446 | 53 | 76.6 | 12.5 | 6.85 | 16.0 | YES | 35 | |
| 4 | 1.356 | 53 | 71.9 | 12.8 | 6.94 | 16.0 | YES | 35 | |
| 5 | 1.286 | 53 | 68.2 | 13.3 | 6.88 | 15.1 | YES | 35 | |
| 6 | 1.558 | 53 | 82.6 | 12.5 | 6.87 | 16.3 | YES | 35 | |
| 7 | 1.474 | 53 | 78.1 | 12.5 | 6.87 | 16.2 | YES | 35 | |
| 8 | 1.699 | 53 | 90.0 | 12.2 | 6.82 | 17.0 | YES | 35 | |
| 9 | 1.158 | 53 | 61.4 | 12.3 | 6.83 | 15.9 | YES | 35 | |
| 10 | 1.503 | 53 | 79.7 | 13.6 | 6.94 | 15.5 | YES | 35 | |
| 11 | 0.866 | 53 | 45.9 | 12.5 | 6.87 | 15.5 | YES | 35 | |
| 12 | 1.122 | 53 | 59.5 | 13.4 | 6.96 | 15.1 | YES | 35 | |
| 13 | 1.029 | 53 | 54.5 | 12.6 | 6.86 | 15.2 | YES | 35 | |
| 14 | 0.953 | 53 | 50.5 | 12.8 | 6.83 | 14.7 | YES | 35 | |
| 15 | 0.935 | 53 | 49.6 | 12.8 | 6.82 | 14.6 | YES | 35 | |
| 16 | 1.027 | 53 | 54.4 | 13.8 | 6.93 | 14.5 | YES | 35 | |
| 17 | 1.083 | 53 | 57.4 | 13.5 | 6.86 | 14.4 | YES | 35 | |
| 18 | 0.858 | 53 | 45.5 | 13.1 | 6.82 | 14.2 | YES | 35 | |
| 19 | 1.089 | 53 | 57.7 | 13.4 | 6.72 | 13.8 | YES | 35 | |
| 20 | 0.975 | 53 | 51.7 | 12.8 | 6.65 | 13.8 | YES | 35 | |
| 21 | 1.068 | 53 | 56.6 | 13.5 | 6.72 | 13.7 | YES | 35 | |
| 22 | 0.907 | 53 | 48.1 | 13.0 | 6.64 | 13.5 | YES | 35 | |
| 23 | 1.027 | 53 | 54.4 | 13.1 | 6.67 | 13.7 | YES | 35 | |
| 24 | 0.908 | 53 | 48.1 | 12.8 | 6.67 | 13.7 | YES | 35 | |
| 25 | 0.871 | 53 | 46.2 | 12.7 | 6.68 | 13.9 | YES | 35 | |
| 26 | 0.726 | 53 | 38.5 | 12.7 | 6.67 | 13.6 | YES | 35 | |
| 27 | 0.818 | 53 | 43.4 | 12.7 | 6.69 | 13.9 | YES | 35 | |
| 28 | 0.953 | 53 | 50.5 | 13.3 | 6.79 | 14.0 | YES | 35 | |
| 29 | 0.946 | 53 | 50.1 | 13.2 | 6.78 | 14.0 | YES | 35 | |
| 30 | 0.963 | 53 | 51.0 | 12.8 | 6.69 | 14.0 | YES | 35 | |
| 31 | | | | | | | | | |

♦ 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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