

# OHA - DWS

## Membrane Filter Monthly Operating Report

System Name: **City of Pendleton**

County: **Umatilla**

PWS ID#: 41 - **000613**

Month/Year: **Jun-2024**

Plant ID: WTP - **A**

Minimum test pressure applied: **10.5** psi

Minimum test pressure req'd: **10.07** psi

(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

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	PDR <sub>Max</sub> [psi/min]	LRC [log removal]	DIT Daily
				0.154	4.00	
				Highest PDR of day [psi/min]	Lowest LRV <sub>ambient</sub> of day [log removal]	[Y/N] or "off"
1	0.048	0.098	N/A	0.08	4.06	Y
2	0.043	0.093	N/A	0.08	4.05	Y
3	0.050	0.085	N/A	0.08	4.08	Y
4	0.043	0.087	N/A	0.07	4.09	Y
5	0.047	0.065	N/A	0.08	4.06	Y
6	0.050	0.091	N/A	0.07	4.08	Y
7	0.045	0.081	N/A	0.07	4.06	Y
8	0.065	0.071	N/A	0.07	4.08	Y
9	0.046	0.084	N/A	0.07	4.08	Y
10	0.057	0.072	N/A	0.07	4.05	Y
11	0.044	0.074	N/A	0.07	4.06	Y
12	0.044	0.096	N/A	0.07	4.06	Y
13	0.047	0.080	N/A	0.06	4.10	Y
14	0.069	0.092	N/A	0.08	4.12	Y
15	0.045	0.086	N/A	0.08	4.04	Y
16	0.055	0.083	N/A	0.08	4.15	Y
17	0.048	0.083	N/A	0.07	4.11	Y
18	0.048	0.085	N/A	0.08	4.06	Y
19	0.049	0.067	N/A	0.07	4.10	Y
20	0.047	0.073	N/A	0.08	4.10	Y
21	0.047	0.057	N/A	0.07	4.01	Y
22	0.046	0.066	N/A	0.07	4.12	Y
23	0.046	0.074	N/A	0.08	4.08	Y
24	0.045	0.076	N/A	0.07	4.10	Y
25	0.046	0.078	N/A	0.08	4.11	Y
26	0.046	0.073	N/A	0.07	4.06	Y
27	0.044	0.081	N/A	0.07	4.08	Y
28	0.044	0.079	N/A	0.08	4.06	Y
29	0.045	0.062	N/A	0.08	4.08	Y
30	0.044	0.058	N/A	0.08	4.07	Y

**Compliance summary (operator to complete any blank fields)**

95% of daily turbidity readings ≤ 1 NTU? [Y/N] <b>Yes</b>	All turbidity readings ≤ 5 NTU? [Y/N] <b>Yes</b>	All IFE turbidity readings ≤ 0.15 NTU? [Y/N]	Performance std met? [Y/N] (PDR ≤ PDR <sub>Max</sub> , LRV ≥ LRC) <b>Yes</b>	DIT Daily? <b>Yes</b>
CT's met daily? (p. 2)	All Cl <sub>2</sub> residual at EP ≥ 0.2 mg/L?	PDR < PDR <sub>Max</sub> ? <b>Yes</b>	LRV <sub>ambient</sub> ≥ LRC? <b>Yes</b>	

PRINTED NAME: *Tim Smith*  
SIGNATURE: *Tim Smith*  
Notes:

DATE: 7-2-2024  
WT CERT #: 7052  
PHONE #: 541-379-1195

\* Used for optimization purposes only.

OHA-DWS

Disinfection Monthly Operating Report

System Name: City of Pendleton

PWS ID#: 41 - 613

Plant ID : WTP - A

**0.5**

Log  
Inactivation  
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	0.558	85	47.4	13.9	7.19	15	YES	1,429	
2	0.586	107	62.7	15.1	7.21	14	YES	1,452	
3	0.785	136	106.7	15.9	7.23	14	YES	1,516	
4	0.805	115	92.6	16.3	7.26	14	YES	1,468	
5	0.815	104	84.8	16.0	7.24	14	YES	1,612	
6	0.765	102	78.1	15.1	7.22	14	YES	1,478	
7	0.668	83	55.4	15.4	7.25	14	YES	2,317	
8	0.597	114	68.1	16.6	7.51	14	YES	1,832	
9	0.697	124	86.4	17.4	7.60	14	YES	1,687	
10	0.637	110	70.1	18.2	7.65	13	YES	1,878	
11	0.637	110	70.1	18.2	7.65	13	YES	1,878	
12	0.627	115	72.1	17.6	7.67	14	YES	1,780	
13	0.607	113	68.6	18.3	7.68	13	YES	1,846	
14	0.597	108	64.5	18.1	7.70	14	YES	1,923	
15	0.607	120	72.8	18.1	7.71	14	YES	1,712	
16	0.637	112	71.3	18.3	7.73	14	YES	1,761	
17	0.597	115	68.6	17.5	7.75	15	YES	1,659	
18	0.597	109	65.0	16.3	7.74	16	YES	1,762	
19	0.656	107	70.2	15.7	7.73	16	YES	1,772	
20	0.806	101	81.4	15.5	7.70	17	YES	1,898	
21	0.756	117	88.5	17.2	7.69	15	YES	1,632	
22	0.687	106	72.8	18.3	7.71	14	YES	1,924	
23	0.687	127	87.2	18.9	7.72	13	YES	1,674	
24	0.698	128	89.3	19.9	7.74	13	YES	1,690	
25	0.668	135	90.1	20.5	7.78	12	YES	1,707	
26	0.658	116	76.3	19.9	7.81	13	YES	1,758	
27	0.648	132	85.6	20.1	7.81	13	YES	1,645	
28	0.578	112	64.7	19.5	7.87	13	YES	1,733	
29	0.578	112	64.7	19.5	7.87	13	YES	1,733	
30	0.548	116	63.6	19.8	7.90	13	YES	1,672	

\* 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