

OHA - DWS

Membrane Filter Monthly Operating Report

System Name: **City of Pendleton**

County: **Umatilla**

PWS ID#: 41 - **000613**

Month/Year: **Jul-2025**

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

PDR _{Max} [psi/min]	LRC [log removal]	DIT Daily
0.154	4.00	

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	Highest PDR of day [psi/min]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.058	0.066	N/A	0.08	4.03	Y
2	0.060	0.064	N/A	0.08	4.09	Y
3	0.062	0.067	N/A	0.08	4.05	Y
4	0.056	0.072	N/A	0.08	4.06	Y
5	0.056	0.064	N/A	0.08	4.05	Y
6	0.056	0.064	N/A	0.08	4.05	Y
7	0.056	0.068	N/A	0.08	4.07	Y
8	0.056	0.066	N/A	0.08	4.06	Y
9	0.056	0.064	N/A	0.07	4.04	Y
10	0.055	0.064	N/A	0.07	4.03	Y
11	0.056	0.072	N/A	0.07	4.04	Y
12	0.063	0.067	N/A	0.07	4.03	Y
13	0.060	0.066	N/A	0.07	4.05	Y
14	0.068	0.063	N/A	0.07	4.06	Y
15	0.061	0.071	N/A	0.07	4.06	Y
16	0.056	0.069	N/A	0.07	4.05	Y
17	0.056	0.066	N/A	0.07	4.04	Y
18	0.056	0.067	N/A	0.07	4.08	Y
19	0.056	0.075	N/A	0.07	4.05	Y
20	0.056	0.068	N/A	0.07	4.06	Y
21	0.056	0.067	N/A	0.07	4.06	Y
22	0.056	0.067	N/A	0.07	4.04	Y
23	0.055	0.065	N/A	0.06	4.05	Y
24	0.056	0.067	N/A	0.07	4.04	Y
25	0.056	0.067	N/A	0.07	4.06	Y
26	0.055	0.066	N/A	0.07	4.05	Y
27	0.055	0.088	N/A	0.07	4.05	Y
28	0.055	0.065	N/A	0.07	4.04	Y
29	0.055	0.062	N/A	0.07	4.06	Y
30	0.055	0.063	N/A	0.06	4.05	Y
31	0.055	0.067	N/A	0.06	4.07	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: **Tim Smith**

SIGNATURE: **Tim Smith**

Notes:

DATE: **8/1/25**

WT CERT #: **7052**

PHONE #: **541-379-1195**

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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 ₂ Residual at 1 st 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	0.512	108	55.3	21.0	7.85	12	YES	1,568	
2	0.531	97	51.5	21.7	7.84	11	YES	1,987	
3	0.522	105	54.8	22.4	7.85	11	YES	1,626	
4	0.559	103	57.5	23.2	7.92	11	YES	1,671	
5	0.580	103	59.7	21.2	7.97	12	YES	1,646	
6	0.522	103	53.8	21.2	7.97	12	YES	1,646	
7	0.578	105	60.7	19.8	7.92	13	YES	1,602	
8	0.637	101	64.3	21.0	7.94	12	YES	1,686	
9	0.578	93	53.8	22.7	7.94	11	YES	1,913	
10	0.578	93	53.8	22.7	7.94	11	YES	1,913	
11	0.568	102	58.0	22.7	7.92	11	YES	1,645	
12	0.568	102	58.0	22.7	7.95	11	YES	1,645	
13	0.519	106	55.0	23.0	7.99	11	YES	1,617	
14	0.560	107	59.9	23.1	7.95	11	YES	1,596	
15	0.560	108	60.5	24.0	7.98	10	YES	1,574	
16	0.611	106	64.8	23.6	7.86	10	YES	1,620	
17	0.613	106	65.0	23.6	7.88	10	YES	1,620	
18	0.539	104	56.0	22.9	7.90	11	YES	1,644	
19	0.620	105	65.1	23.1	7.97	11	YES	1,623	
20	0.620	105	65.1	23.1	7.97	11	YES	1,623	
21	0.608	104	63.3	22.4	7.85	11	YES	1,642	
22	0.598	105	62.8	21.6	7.89	12	YES	1,586	
23	0.598	105	62.8	21.2	7.98	12	YES	1,591	
24	0.587	105	61.7	21.6	7.96	12	YES	1,599	
25	0.608	99	60.2	22.4	7.93	11	YES	1,678	
26	0.628	107	67.2	23.0	7.94	11	YES	1,592	
27	0.638	107	68.3	23.0	7.98	11	YES	1,592	
28	0.679	101	68.6	22.6	7.87	11	YES	1,710	
29	0.638	106	67.6	22.8	7.91	11	YES	1,610	
30	0.817	101	82.5	23.4	7.89	11	YES	1,705	
31	0.817	101	82.5	23.4	7.85	10	YES	1,705	

* 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: dpw_dmce@odhsoha.oregon.gov
 fax: 971-673-0458