

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Douglas**

System Name: **Green Area Water & Sanitary Authority**

Month/Year: **Nov 2025**

PWS ID#: 41 - **00717**

Minimum test pressure applied || req'd:

12.5 psi || 11.4 psi

Plant ID: WTP - **A** (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] (>15 min duration)	PDR _{Max} [psi/min]	LRC [log removal]	DIT Daily [Y/N] or "off"
				1.500	4.00	
1	0.039	0.0408	0.041	1.40	4.05	Y
2	0.040	0.04	0.040	1.29	4.05	Y
3	0.040	0.0403	0.040	1.41	4.04	Y
4	0.043	0.0426	0.043	1.42	4.06	Y
5	0.040	0.0405	0.040	1.40	4.05	Y
6	0.040	0.0408	0.040	1.41	4.05	Y
7	0.041	0.0419	0.041	1.40	4.01	Y
8	0.042	0.0421	0.042	1.39	4.05	Y
9	0.041	0.0415	0.041	1.38	4.01	Y
10	0.041	0.0423	0.045	1.41	4.08	Y
11	0.041	0.0416	0.041	1.35	4.04	Y
12	0.041	0.0415	0.041	1.46	4.05	Y
13	0.040	0.0414	0.041	1.46	4.04	Y
14	0.040	0.0525	0.052	1.34	4.08	Y
15	0.041	0.0406	0.041	1.41	4.08	Y
16	0.041	0.0415	0.041	1.40	4.07	Y
17	0.042	0.065	0.065	1.42	4.04	Y
18	0.042	0.042	0.042	1.38	4.03	Y
19	0.042	0.045	0.045	1.37	4.03	Y
20	0.023	0.042	0.042	1.38	4.03	Y
21	0.024	0.0497	0.049	1.41	4.05	Y
22	0.023	0.0234	0.023	1.40	4.05	Y
23	0.023	0.0232	0.023	1.40	4.01	Y
24	0.023	0.025	0.025	1.41	4.05	Y
25	0.023	0.0236	0.023	1.45	4.08	Y
26	0.023	0.0264	0.026	1.40	4.08	Y
27	0.023	0.0239	0.023	1.41	4.08	Y
28	0.023	0.0231	0.023	1.42	4.07	Y
29	0.023	0.024	0.024	1.40	4.07	Y
30	0.023	0.023	0.023	1.46	4.08	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	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: **Jeremy Wolford**

DATE: 12/2/25

SIGNATURE: 

WT CERT #: T-7231

Notes:

ONE #:541-679-6321

Disinfection Monthly Operating ReportSystem Name: **Green Area Water & Sanitary Authority****Nov 2025**PWS ID#: 41 - **00717****0.5**Log
Inactivation
Required via
DisinfectionPlant ID : WTP - **A**

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	1.657	14.5808	24.2	17.1	7.70	16.6	YES	1,156	14:00
2	1.699	14.7885	25.1	16.9	7.62	16.4	YES	1,139	1:00
3	1.484	14.5808	21.6	13.2	7.71	21.1	YES	1,156	20:00
4	1.629	13.9914	22.8	13.6	7.32	18.1	YES	1,204	13:00
5	1.647	14.5808	24.0	14.8	7.69	19.1	YES	1,156	15:00
6	1.630	14.3789	23.4	12.3	7.73	23.0	YES	1,172	4:00
7	1.522	15.0022	22.8	13.9	7.63	19.6	YES	1,123	11:00
8	1.447	14.3789	20.8	22.7	7.58	10.6	YES	1,172	14:00
9	1.668	14.5808	24.3	18.4	7.66	15.0	YES	1,156	16:00
10	1.544	14.3789	22.2	16.0	7.73	17.8	YES	1,172	5:00
11	1.699	14.7885	25.1	16.9	7.62	16.4	YES	1,139	13:00
12	1.712	15.2221	26.1	12.4	7.72	22.9	YES	1,107	0:00
13	1.809	14.5808	26.4	13.8	7.66	20.7	YES	1,156	12:00
14	1.725	14.5808	25.2	18.2	7.64	15.1	YES	1,156	17:00
15	1.532	14.3789	22.0	15.0	7.73	19.0	YES	1,172	5:00
16	1.602	14.1825	22.7	16.0	7.74	17.9	YES	1,188	14:00
17	1.685	15.0022	25.3	11.6	7.60	23.1	YES	1,123	11:00
18	1.461	14.3789	21.0	15.0	7.77	19.1	YES	1,172	11:00
19	2.073	14.1825	29.4	13.1	7.88	24.2	YES	1,188	17:00
20	1.787	15.2221	27.2	15.0	7.95	21.1	YES	1,107	20:00
21	1.403	14.7885	20.7	14.0	7.50	18.3	YES	1,139	6:00
22	1.618	14.5808	23.6	15.0	7.60	18.2	YES	1,156	23:00
23	1.544	1.56489	22.2	16.0	7.73	17.8	YES	1,172	14:00
24	1.531	17.8381	27.3	17.0	8.12	19.1	YES	944	8:00
25	1.559	14.7885	23.1	14.0	7.84	21.2	YES	1,139	19:00
26	1.977	14.5808	28.8	10.5	7.83	27.9	YES	1,156	21:00
27	1.644	14.5808	24.0	15.5	7.89	19.7	YES	1,156	5:00
28	1.618	14.1825	23.0	14.8	7.90	20.6	YES	1,188	9:00
29	1.484	14.5808	21.6	13.2	7.71	21.1	YES	1,136	15:00
30	1.816	18.1501	33.0	9.1	7.97	31.7	YES	928	9:00
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

p. 2 of 2

Oregon DHS - Drinking Water Program – Surface Water Quality Data

System Name: GAWSA

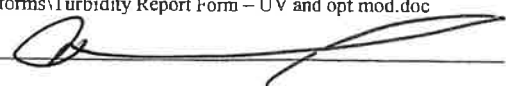
PWS ID#: 41 00717 Month/Year: 11/2025

Minimum UVT [%] during month: 99.9%

Duty sensor variation from reference sensor: 5.9%

Minimum Validated UVT: 99.8% {Insert Req'd Value}

Date	Peak Hourly Demand Flow	Minimum Intensity	All Lamps On?	Daily Water Produced {A}	Water outside Validated Conditions {B}	Cumulative % Off-Spec Water Produced
	[gpm]	[mW/cm ²]	[Y or N]	[gal]	[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100 [%]
1	2900	13.1	Y	988,872	0	0
2	2900	12.9	Y	1,069,201	0	0
3	2900	13.0	Y	1,221,247	0	0
4	2900	13.3	Y	971,394	0	0
5	2900	14.1	Y	1,056,272	0	0
6	2900	17.2	Y	1,186,409	0	0
7	2900	17.0	Y	1,063,895	0	0
8	2900	12.0	Y	966,243	0	0
9	2900	17.4	Y	1,122,309	0	0
10	2900	16.5	Y	1,130,187	0	0
11	2900	16.0	Y	1,047,122	0	0
12	2900	17.1	Y	1,209,503	0	0
13	2900	12.6	Y	930,062	0	0
14	2900	12.8	Y	1,109,661	0	0
15	2900	17.1	Y	1,053,729	0	0
16	2900	14.2	Y	1,162,730	0	0
17	2900	17.5	Y	1,066,570	0	0
18	2900	17.4	Y	1,024,705	0	0
19	2900	18.8	Y	1,156,379	0	0
20	2900	13.9	Y	1,095,971	0	0
21	2900	14.1	Y	1,101,440	0	0
22	2900	13.4	Y	996,945	0	0
23	2900	13.5	Y	1,247,524	0	0
24	2900	18.5	Y	993,323	0	0
25	2900	17.8	Y	1,278,123	0	0
26	2900	19.2	Y	1,113,015	0	0
27	2900	14.5	Y	1,091,882	0	0
28	2900	14.8	Y	949,468	0	0
29	2900	15.2	Y	887,309	0	0
30	2900	14.9	Y	1,229,616	0	0
31						
Monthly Cumulative % Off-Spec Water Produced						0

Signature: 

Op Cert #: T-7231

Date: 12/2/25