OHA - DWS

Membrane Filter Monthly Operating Report

County: **Lincoln Co**

System Name: **Boulder Creek - Hiland**

Month/Year: **Oct-2025**

PWS ID#: 41 - **00722**

Minimum test pressure **applied**: **22.76** psi

Plant ID: WTP - _____ *(e.g., "A")*

Minimum test pressure **req'd**: **22** 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]	DIT Daily
					4.00	
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]	[Y/N] or "off"
1	0.025		0.025	>0.145		Y
2	0.033		0.033	>0.145		Y
3	0.025		0.025	>0.145		Y
4	0.042		0.042	>0.145		Y
5	0.062		0.062	>0.145		Y
6	0.048		0.048	>0.145		Y
7	0.023		0.023	>0.145		Y
8	0.037		0.037	>0.145		Y
9	0.035		0.035	>0.145		Y
10	0.033		0.033	>0.145		Y
11	0.033		0.033	>0.145		Y
12	0.035		0.035	>0.145		Y
13	0.025		0.025	>0.145		Y
14	0.025		0.025	>0.145		Y
15	0.037		0.037	>0.145		Y
16	0.033		0.033	>0.145		Y
17	0.025		0.025	>0.145		Y
18	0.033		0.033	>0.145		Y
19	0.048		0.048	>0.145		Y
20	0.033		0.033	>0.145		Y
21	0.025		0.025	>0.145		Y
22	0.128		0.128	>0.145		Y
23	0.022		0.022	>0.145		Y
24	0.075		0.075	>0.145		Y
25	0.077		0.077	>0.145		Y
26	0.035		0.035	>0.145		Y
27	0.033		0.033	>0.145		Y
28	0.037		0.037	>0.145		Y
29	0.037		0.037	>0.145		Y
30	0.046		0.046	>0.145		Y
31	0.077		0.077	>0.145		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**	

PRINTED NAME: Curtis Olson

SIGNATURE: *Curtis Olson*

Notes:

DATE: 11/10/2025

WT CERT #: 216644

PHONE #: 503-554-8333

Revised 10/1/2024

♣ *Used for optimization purposes only.*

OHA-DWS

Disinfection Monthly Operating Report

System Name: **Boulder Creek - Hiland**

PWS ID#: 41 - **00722**

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	1.234	53	65.4	11.6	7.11	18.5	YES	35	
2	0.529	53	28.0	11.3	7.14	17.6	YES	35	
3	1.103	53	58.5	11.3	7.19	19.1	YES	35	
4	0.943	53	50.0	11.5	7.13	18.2	YES	35	
5	1.284	53	68.1	10.7	7.16	20.1	YES	35	
6	1.452	53	77.0	10.8	7.24	20.9	YES	35	
7	1.060	53	56.2	11.0	7.15	19.2	YES	35	
8	1.267	53	67.2	10.8	7.21	20.4	YES	35	
9	1.176	53	62.3	9.9	7.24	21.5	YES	35	
10	1.176	53	62.3	10.9	7.33	20.8	YES	35	
11	1.012	53	53.6	10.2	7.18	20.3	YES	35	
12	0.808	53	42.8	10.6	7.33	20.4	YES	35	
13	0.949	53	50.3	9.0	7.15	21.7	YES	35	
14	1.617	53	85.7	9.3	7.28	24.0	YES	35	
15	0.625	53	33.1	9.3	7.23	21.1	YES	35	
16	0.604	53	32.0	8.7	7.20	21.5	YES	35	
17	0.561	53	29.7	9.2	7.30	21.5	YES	35	
18	0.525	53	27.8	9.5	7.27	20.8	YES	35	
19	0.671	53	35.6	9.1	7.21	21.3	YES	35	
20	0.461	53	24.4	9.8	7.08	18.9	YES	35	
21	0.608	53	32.2	9.6	7.12	19.8	YES	35	
22	1.282	53	67.9	9.9	7.03	20.3	YES	35	
23	1.263	53	66.9	10.2	7.03	19.8	YES	35	
24	1.342	53	71.1	10.3	7.07	20.2	YES	35	
25	1.650	53	87.5	9.7	6.82	19.9	YES	35	
26	1.613	53	85.5	9.6	6.81	19.8	YES	35	
27	0.598	53	31.7	8.9	6.86	18.9	YES	35	
28	0.762	53	40.4	9.8	6.87	18.2	YES	35	
29	1.421	53	75.3	9.5	6.81	19.6	YES	35	
30	1.556	53	82.5	8.5	7.00	22.6	YES	35	
31	1.573	53	83.4	8.2	7.05	23.6	YES	35	

♦ 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

Revised 7/31/2023