

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Lincoln**

System Name: **Boulder Creek**

Month/Year: **Mar-2026**

PWS ID#: 41 - **00482**

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

Plant ID: WTP - _____

Minimum test pressure **req'd**: **22** 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] (>15 minutes)	PDR _{Max} [^{psi} / _{min}]		DIT Daily
				LRC [log removal]		
				4.00		
				Highest PDR of day [^{psi} / _{min}]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.008		0.008	<0.145		Y
2	0.008		0.008	<0.145		Y
3	0.008		0.008	<0.145		Y
4	0.008		0.008	<0.145		Y
5	0.008		0.008	<0.145		Y
6	0.008		0.008	<0.145		Y
7	0.008		0.008	<0.145		Y
8	0.008		0.008	<0.145		Y
9	0.008		0.008	<0.145		Y
10	0.008		0.008	<0.145		Y
11	0.008		0.008	<0.145		Y
12	0.006		0.006	<0.145		Y
13	0.008		0.008	<0.145		Y
14	0.008		0.008	<0.145		Y
15	0.006		0.006	<0.145		Y
16	0.008		0.008	<0.145		Y
17	0.008		0.008	<0.145		Y
18	0.008		0.008	<0.145		Y
19	0.008		0.008	<0.145		Y
20	0.008		0.008	<0.145		Y
21	0.008		0.008	<0.145		Y
22	0.008		0.008	<0.145		Y
23	0.008		0.008	<0.145		Y
24	0.008		0.008	<0.145		Y
25	0.008		0.008	<0.145		Y
26	0.008		0.008	<0.145		Y
27	0.006		0.006	<0.145		Y
28	0.008		0.008	<0.145		Y
29	0.008		0.008	<0.145		Y
30	0.008		0.008	<0.145		Y
31	0.008		0.008	<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 **DATE:** 04/06/2026
SIGNATURE: *Curtis Olson* **WT CERT #:** 216644
Notes: **PHONE #:** 503-554-8333

* Used for optimization purposes only.

OHA-DWS

Disinfection Monthly Operating Report

System Name: **Boulder Creek**

PWS ID#: 41 - **00482**

Plant ID : WTP - _____

0.5

↔ Log
Inactivation
Required via
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	1.446	53	76.6	6.4	7.14	27.1	YES	35	
2	1.947	53	103.2	7.4	7.19	27.3	YES	35	
3	0.748	53	39.6	7.8	6.96	21.4	YES	35	
4	0.885	53	46.9	7.7	7.05	22.6	YES	35	
5	1.103	53	58.5	6.9	7.01	24.0	YES	35	
6	1.215	53	64.4	6.8	7.03	24.7	YES	35	
7	1.076	53	57.0	7.3	7.15	24.5	YES	35	
8	1.012	53	53.6	7.6	7.07	23.2	YES	35	
9	1.721	53	91.2	7.6	7.11	25.5	YES	35	
10	1.542	53	81.7	6.5	7.09	26.6	YES	35	
11	1.317	53	69.8	6.7	7.16	26.2	YES	35	
12	1.359	53	72.0	7.3	6.75	22.0	YES	35	
13	1.251	53	66.3	7.8	6.85	21.8	YES	35	
14	1.403	53	74.4	7.2	6.74	22.2	YES	35	
15	1.066	53	56.5	7.5	6.91	22.2	YES	35	
16	1.047	53	55.5	8.0	6.97	21.9	YES	35	
17	0.825	53	43.7	7.7	6.97	21.8	YES	35	
18	0.904	53	47.9	9.5	6.99	19.6	YES	35	
19	0.741	53	39.3	8.0	6.99	21.3	YES	35	
20	0.808	53	42.8	8.5	7.06	21.2	YES	35	
21	0.966	53	51.2	8.4	7.08	22.0	YES	35	
22	1.045	53	55.4	8.2	7.05	22.2	YES	35	
23	1.163	53	61.6	8.0	7.12	23.3	YES	35	
24	1.180	53	62.5	8.3	7.67	28.0	YES	35	
25	0.781	53	41.4	8.1	7.56	26.0	YES	35	
26	0.920	53	48.8	7.7	7.59	27.5	YES	35	
27	1.099	53	58.2	6.9	7.70	30.7	YES	35	
28	1.367	53	72.5	7.3	7.67	30.6	YES	35	
29	1.324	53	70.2	7.8	7.66	29.3	YES	35	
30	1.309	53	69.4	6.8	7.73	32.2	YES	35	
31	1.313	53	69.6	7.0	7.69	31.2	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

email: dwp.dmce@odhsoha.oregon.gov

fax: 971-673-0458

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