

OHA - DWS

Membrane Filter Monthly Operating Report

System Name: TIMBER WATER ASSOCIATION

County: WASHINGTON

Month/Year: OCTOBER - 2025

PWS ID#: 41 - 00898

Minimum test pressure applied || req'd: 20 psi || 17.8 psi

Plant ID: WTP - _____ (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} [$\frac{\text{psi}}{\text{min}}$]

LRC [log removal]

DIT
Daily

114

4.00

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 min duration)	Highest PDR of day [$\frac{\text{psi}}{\text{min}}$]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	.046		N/A	.045		Yes
2	.044		N/A	.048		Yes
3	.048		N/A	.056		Yes
4	.050		N/A	.060		Yes
5	.057		N/A	.083		Yes
6	.050		N/A	.080		Yes
7	.053		N/A	.083		Yes
8	.060		N/A	.083		Yes
9	.050		N/A	.048		Yes
10	.052		N/A	.043		Yes
11	.058		N/A	.045		Yes
12	.060		N/A	.045		Yes
13	.057		N/A	.048		Yes
14	.068		N/A	.046		Yes
15	.070		N/A	.051		Yes
16	.072		N/A	.050		Yes
17	.068		N/A	.048		Yes
18	.074		N/A	.048		Yes
19	.055		N/A	.041		Yes
20	.056		N/A	.040		Yes
21	.058		N/A	.041		Yes
22	.054		N/A	.041		Yes
23	.063		N/A	.046		Yes
24	.060		N/A	.046		Yes
25	POWER OUTAGE					OFF
26	POWER OUTAGE					OFF
27	.151		N/A	.079		Yes
28	.146		N/A	.084		Yes
29	.029		N/A	.048		Yes
30	.029		N/A	.045		Yes
31	.033		N/A	.045		Yes

Compliance summary (operator to complete any blank fields)

95% of daily turbidity readings ≤ 1 NTU? [Y/N] Y	All turbidity readings ≤ 5 NTU? [Y/N] Y	All IFE turbidity readings ≤ 0.15 NTU? [Y/N] N/A	Performance std met? [Y/N] (PDR ≤ PDR _{max} , LRV ≥ LRC) Y N/A	DIT Daily?
CT's met daily? (p. 2) Y	All Cl ₂ residual at EP ≥ 0.2 mg/L? Y	PDR ≤ PDR _{max} ? Y	LRV _{ambient} ≥ LRC? Unknown	

PRINTED NAME: Chris Richardson

SIGNATURE: CR

Notes:

DATE: 11-10-25

WT CERT #: 888483

PHONE #: 503-778-0252

OHA-DWS

Disinfection Monthly Operating Report

System Name TIMBER WATER ASSOCIATIONPWS ID# 41 - 00898

Plant ID WTP - _____

☐ Log
 Inactivation
 Required via
 Disinfection

Day	Minimum Cl ₂ Residual at 1" 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	.84	72	60.48	15.1	7.80	18	Yes	15	IN PRODUCTION
2	.86		61.92	14.8	7.80	26	Yes	15	IN PRODUCTION
3	.82		59.04	14.6	7.80	26	Yes	15	IN PRODUCTION
4	.83		59.76	14.6	7.80	26	Yes	15	IN PRODUCTION
5	.79		56.88	14.4	7.80	26	Yes	15	IN PRODUCTION
6	.80		57.6	14.2	7.80	26	Yes	12	IN PRODUCTION
7	.82		59.04	14.5	7.80	26	Yes	12	IN PRODUCTION
8	.85		61.2	14.2	7.80	26	Yes	12	IN PRODUCTION
9	.73		50.56	14.0	7.80	26	Yes	12	IN PRODUCTION
10	.78		56.16	14.3	7.80	26	Yes	12	IN PRODUCTION
11	.80		57.6	14.0	7.80	26	Yes	12	IN PRODUCTION
12	.83		59.76	14.1	7.80	26	Yes	12	IN PRODUCTION
13	1.00		72	14.1	7.80	27	Yes	12	IN PRODUCTION
14	.98		70.56	14.2	7.80	27	Yes	12	IN PRODUCTION
15	.96		69.12	14.2	7.80	27	Yes	12	IN PRODUCTION
16	.93		66.96	14.3	7.80	26	Yes	12	IN PRODUCTION
17	.90		64.8	14.3	7.80	26	Yes	12	IN PRODUCTION
18	.91		65.52	14.4	7.80	26	Yes	12	IN PRODUCTION
19	.88		63.36	14.4	7.80	26	Yes	12	IN PRODUCTION
20	.90		64.8	14.6	7.80	26	Yes	12	IN PRODUCTION
21	.87		62.4	14.1	7.80	26	Yes	12	IN PRODUCTION
22	.89		64.08	14.4	7.80	26	Yes	12	IN PRODUCTION
23	.82		59.04	14.0	7.80	26	Yes	12	IN PRODUCTION
24	.85		61.2	14.2	7.80	26	Yes	12	IN PRODUCTION
25	outage							12	OFF
26	outage							12	OFF
27	.70		50.4	13.7	7.80	26	Yes	12	IN PRODUCTION
28	.73		52.56	12.8	7.80	26	Yes	12	IN PRODUCTION
29	.99		71.28	12.8	7.80	27	Yes	12	IN PRODUCTION
30	.97		69.84	13.0	7.80	27	Yes	12	IN PRODUCTION
31	.94		67.68	13.0	7.80	26	Yes	12	IN PRODUCTION

* 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: dws@dmshs.oregon.gov

fax: 971-673-0458