

OHA - DWS

Membrane Filter Monthly Operating Report

County: Douglas

System Name: Winston Dillard Water District

Month/Year: September-24

PWS ID#: 41 - 00957

Minimum test pressure **applied** || req'd: 28.3 psi || 27.0 psi

Plant ID: WTP - 4100957

DIT = Direct Integrity Test on filter(s) [Yes, No, or "off" if all filters are offline] ⇔

PDR = Pressure Decay Rate

LRC = Log Removal Credit

**DIT
Daily**

PDR_{Max} [^{psi}/_{min}]

LRC [log removal]

0.09

4.00

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU] (>15 min duration)	Highest PDR of day [^{psi} / _{min}]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.015	0.015	0.026	0.02	4.860	y
2	0.018	0.018	0.034	0.03	4.658	y
3	0.026	0.026	0.030	0.02	4.892	y
4	0.018	0.018	0.030	0.02	4.833	y
5	0.026	0.026	0.028	0.03	4.659	y
6	0.016	0.016	0.026	0.02	4.844	y
7	0.015	0.015	0.028	0.02	4.851	y
8	0.027	0.027	0.031	0.02	4.823	y
9	0.027	0.027	0.029	0.02	4.817	y
10	0.031	0.031	0.030	0.03	4.670	y
11	0.024	0.024	0.031	0.02	4.867	y
12	0.034	0.034	0.029	0.02	4.819	y
13	0.024	0.024	0.034	0.02	4.877	y
14	0.016	0.016	0.028	0.02	4.665	y
15	0.017	0.017	0.026	0.02	4.829	y
16	0.019	0.019	0.026	0.02	4.814	y
17	0.017	0.017	0.027	0.02	4.839	y
18	0.026	0.026	0.029	0.02	4.827	y
19	0.019	0.019	0.025	0.02	4.838	y
20	0.017	0.017	0.025	0.02	4.883	y
21	0.018	0.018	0.028	0.03	4.641	y
22	0.021	0.021	0.026	0.02	4.838	y
23	0.019	0.019	0.027	0.02	4.887	y
24	0.025	0.025	0.027	0.02	4.835	y
25	0.020	0.020	0.028	0.02	4.820	y
26	0.023	0.023	0.027	0.02	4.829	y
27	0.017	0.017	0.025	0.02	4.830	y
28	0.017	0.017	0.025	0.02	4.827	y
29	0.017	0.017	0.029	0.02	4.891	y
30	0.021	0.021	0.027	0.02	4.810	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: <u>Derek Osterman</u>	DATE: <u>10/1/2024</u>
SIGNATURE: <u>Derek Osterman</u>	WT CERT #: <u>T-08919</u>
	PHONE #: <u>(541)679-8467</u>

♣ Used for optimization purposes only.

Oregon DHS - Drinking Water Services – Surface Water Quality Data

System Name: **Winston Dillard Water Dist.**

ID# **41 00957**

Month/Year: **Sep / 2024**

Minimum UVT [%] during month: 90.0%

Duty sensor variation from reference sensor %: 15.5%

Minimum Validated UVT : 70% {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/unit]	[^{mj} /cm ²]	[Y or N]	[gal]	[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100 [%]
1	1,503	8.2	Y	874,107	None	
2	1,532	8.1	Y	887,569	None	
3	1,529	9.3	Y	869,390	None	
4	1,537	8.1	Y	767,508	None	
5	1,518	9.3	Y	937,026	None	
6	1,530	8.4	Y	1,061,519	None	
7	1,535	8.3	Y	863,055	None	
8	1,535	7.9	Y	858,911	None	
9	1,527	7.9	Y	646,538	None	
10	1,548	7.3	Y	921,986	None	
11	1,531	9.3	Y	730,096	None	
12	1,530	8.3	Y	524,894	None	
13	1,541	8.3	Y	855,651	None	
14	1,524	9.1	Y	692,156	None	
15	1,524	9.0	Y	602,646	None	
16	1,531	8.9	Y	735,544	None	
17	1,520	8.6	Y	739,873	None	
18	1,530	9.2	Y	560,020	None	
19	1,533	8.6	Y	753,987	None	
20	1,529	8.2	Y	839,931	None	
21	1,534	8.8	Y	603,300	None	
22	1,542	8.4	Y	892,728	None	
23	1,541	8.6	Y	824,433	None	
24	1,517	9.2	Y	573,971	None	
25	1,545	8.9	Y	765,453	None	
26	1,517	9.5	Y	725,533	None	
27	1,525	9.9	Y	742,808	None	
28	1,522	9.2	Y	635,451	None	
29	1,522	7.5	Y	847,254	None	
30	1,522	8.0	Y	863,823	None	
Monthly Cumulative % Off-Spec Water Produced						None

Signature: *Derek Osterman*

Op Cert #: T 08919

Date: 10/1/2024

OHA-DWS

Disinfection Monthly Operating Report

System Name: Winston Dillard Water District

PWS ID#: 41 - 00957

Plant ID : WTP - 4100957

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	1.55	48.5	75.2	24.3	8.07	11.6	YES	1,503	
2	1.59	47.5	75.5	23.5	8.07	12.3	YES	1,532	
3	1.42	47.6	67.6	23.1	8.08	12.4	YES	1,529	
4	1.64	47.4	77.7	22.0	7.76	12.2	YES	1,537	
5	1.70	48.0	81.6	22.4	7.80	12.1	YES	1,518	
6	1.64	47.0	77.1	26.1	8.21	10.9	YES	1,530	
7	1.63	47.0	76.6	25.0	8.04	11.0	YES	1,535	
8	1.49	47.4	70.6	24.2	8.15	11.9	YES	1,535	
9	1.54	47.7	73.5	22.8	7.81	11.6	YES	1,527	
10	1.46	47.1	68.8	22.5	7.84	11.9	YES	1,548	
11	1.55	47.6	73.8	20.9	7.72	12.8	YES	1,531	
12	1.40	47.6	66.6	20.4	7.83	13.5	YES	1,530	
13	1.66	47.1	78.2	19.9	7.89	14.7	YES	1,541	
14	1.60	47.8	76.5	22.9	8.04	12.7	YES	1,524	
15	1.67	47.8	79.8	21.5	7.76	12.6	YES	1,524	
16	1.63	47.6	77.6	19.5	7.79	14.6	YES	1,531	
17	1.80	47.9	86.2	18.2	7.70	15.6	YES	1,520	
18	1.48	47.6	70.4	18.3	7.76	15.3	YES	1,530	
19	1.51	47.5	71.7	18.4	7.63	14.5	YES	1,533	
20	1.76	47.6	83.8	18.5	7.73	15.4	YES	1,529	
21	1.63	47.5	77.4	18.1	7.74	15.7	YES	1,534	
22	1.57	47.2	74.1	19.6	7.81	14.4	YES	1,542	
23	1.53	47.3	72.4	19.2	7.85	15.0	YES	1,541	
24	1.49	48.0	71.5	19.5	7.88	14.8	YES	1,517	
25	1.48	47.1	69.7	19.6	7.57	13.1	YES	1,545	
26	1.46	48.0	70.1	18.7	7.69	14.5	YES	1,517	
27	1.64	47.8	78.4	18.4	7.63	14.7	YES	1,525	
28	1.27	47.9	60.8	18.2	7.77	15.1	YES	1,522	
29	1.29	47.9	61.8	18.1	7.81	15.5	YES	1,522	
30	1.52	47.9	72.8	16.9	7.84	17.4	YES	1,522	

♦ 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