

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Polk**

System Name: **Buell Red Prairie Water Dist.**

Month/Year: **November, 2025**

PWS ID#: 41 - **01174**

Minimum test pressure **applied**: **18.5** psi

Plant ID: WTP - **A**

Minimum test pressure **req'd**: **18.23** 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

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

LRC [log removal]

0.040

4.00

**DIT
Daily**

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	Highest PDR of day [^{psi} /min]	Lowest LRV _{ambient} of day [log removal]	[Y/N] or "off"
1	0.024	0.052	0.052	0.03	4.40	Y
2	0.024	0.058	0.058	0.03	4.39	Y
3	0.023	0.062	0.062	0.03	4.44	Y
4	0.023	0.066	0.066	0.02	4.49	Y
5	0.025	0.057	0.057	0.02	4.51	Y
6	0.023	0.063	0.063	0.02	4.50	Y
7	0.025	0.067	0.067	0.03	4.40	Y
8	0.025	0.071	0.071	0.03	4.47	Y
9	0.024	0.072	0.072	0.03	4.46	Y
10	0.023	0.075	0.075	0.03	4.47	Y
11	0.025	0.076	0.076	0.03	4.43	Y
12	0.026	0.078	0.078	0.02	4.56	Y
13	0.028	0.078	0.078	0.03	4.46	Y
14	0.027	0.079	0.079	0.03	4.45	Y
15	0.028	0.081	0.081	0.03	4.54	Y
16	0.027	0.057	0.057	0.03	4.45	Y
17	0.027	0.055	0.055	0.03	4.44	Y
18	0.027	0.058	0.058	0.03	4.43	Y
19	0.025	0.057	0.057	0.03	4.38	Y
20	0.027	0.059	0.059	0.03	4.49	Y
21	0.027	0.062	0.062	0.03	4.51	Y
22	0.026	0.068	0.068	0.03	4.52	Y
23	0.026	0.073	0.073	0.02	4.52	Y
24	0.024	0.078	0.078	0.03	4.67	Y
25	0.025	0.085	0.085	0.03	4.52	Y
26	0.025	0.061	0.061	0.02	4.38	Y
27	0.024	0.066	0.066	0.02	4.59	Y
28	0.024	0.065	0.065	0.02	4.58	Y
29	0.025	0.069	0.069	0.02	4.58	Y
30	0.024	0.074	0.074	0.02	4.48	Y

Y

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:	Darrel Lockard	DATE:	12/3/2025
SIGNATURE:	<i>Darrel Lockard</i>	WT CERT #: 2853	
Notes:		PHONE #:	(541) 222-9997

Disinfection Monthly Operating ReportSystem Name: **Buell Red Prairie Water Dist.**PWS ID#: 41 - **01174**Plant ID : WTP - **A****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	2.000	60	120.0	15.6	7.65	18.7	YES	120	
2	2.160	60	129.6	12.9	7.55	21.9	YES	120	
3	2.100	60	126.0	11.5	7.46	23.2	YES	120	
4	1.940	60	116.4	16.1	7.54	17.2	YES	120	
5	2.060	60	123.6	12.2	7.58	23.0	YES	120	
6	1.940	60	116.4	17.0	7.64	16.8	YES	120	
7	2.190	60	131.4	16.1	7.65	18.4	YES	120	
8	1.880	60	112.8	18.0	7.45	14.6	YES	120	
9	1.920	60	115.2	14.1	7.54	19.6	YES	120	
10	1.980	60	118.8	17.9	7.52	15.2	YES	120	
11	1.940	60	116.4	18.1	7.50	14.8	YES	120	
12	1.840	60	110.4	13.3	7.42	19.6	YES	120	
13	1.860	60	111.6	12.9	7.40	20.0	YES	120	
14	1.860	60	111.6	12.5	7.37	20.3	YES	120	
15	1.680	60	100.8	12.5	7.37	19.9	YES	120	
16	1.740	60	104.4	12.9	7.28	18.9	YES	120	
17	1.700	60	102.0	16.3	7.28	15.0	YES	120	
18	1.270	60	76.2	16.6	7.45	14.9	YES	120	
19	1.660	60	99.6	11.4	7.35	21.4	YES	120	
20	1.420	60	85.2	16.3	7.32	14.8	YES	120	
21	1.560	60	93.6	16.9	7.28	14.2	YES	120	
22	1.660	60	99.6	16.2	7.23	14.8	YES	120	
23	1.700	60	102.0	16.3	7.32	15.2	YES	120	
24	1.760	60	105.6	16.1	7.28	15.3	YES	120	
25	1.820	60	109.2	16.5	7.22	14.7	YES	120	
26	1.680	60	100.8	16.2	7.26	15.0	YES	120	
27	1.670	60	100.2	14.4	7.37	17.5	YES	120	
28	1.350	60	81.0	15.1	7.48	16.8	YES	120	
29	1.390	60	83.4	13.7	7.32	17.5	YES	120	
30	1.380	60	82.8	13.9	7.42	17.9	YES	120	
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* 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 bymail: Drinking Water Services
PO Box 14350
Portland, OR 97293-0350email: dwp.dmce@odhsoha.oregon.gov

fax: 971-673-0458

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