

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Polk**

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

Month/Year: **Jan-2026**

PWS ID#: 41 - **01174**

Minimum test pressure applied: **20** 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	0.017	0.017	0.017	0.04	4.31	Y
2	0.025	0.025	0.025	0.03	4.45	Y
3	0.024	0.024	0.024	0.03	4.35	Y
4	0.025	0.025	0.025	0.03	4.13	Y
5	0.025	0.025	0.025	0.04	4.18	Y
6	0.025	0.025	0.025	0.03	4.43	Y
7	0.025	0.025	0.025	0.04	4.36	Y
8	0.025	0.025	0.025	0.03	4.36	Y
9	0.025	0.025	0.025	0.03	4.37	Y
10	0.025	0.025	0.025	0.03	4.38	Y
11	0.025	0.025	0.025	0.03	4.40	Y
12	0.025	0.025	0.025	0.03	4.38	Y
13	0.025	0.025	0.025	0.03	4.40	Y
14	0.025	0.025	0.025	0.03	4.48	Y
15	0.025	0.025	0.025	0.03	4.50	Y
16	0.025	0.025	0.025	0.03	4.39	Y
17	0.024	0.024	0.024	0.03	4.40	Y
18	0.024	0.024	0.024	0.03	4.37	Y
19	0.024	0.024	0.024	0.03	4.40	Y
20	0.024	0.024	0.024	0.03	4.37	Y
21	0.024	0.024	0.024	0.03	4.38	Y
22	0.024	0.024	0.024	0.03	4.36	Y
23	0.024	0.024	0.024	0.03	4.36	Y
24	0.024	0.024	0.024	0.03	4.50	Y
25	0.024	0.024	0.024	0.03	4.36	Y
26	0.024	0.024	0.024	0.03	4.40	Y
27	0.024	0.024	0.024	0.03	4.50	Y
28	0.025	0.025	0.025	0.03	4.48	Y
29	0.025	0.025	0.025	0.03	4.36	Y
30	0.025	0.025	0.025	0.03	4.40	Y
31	0.025	0.025	0.025	0.03	4.50	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:** 2/10/2026
SIGNATURE: *Darrel Lockard* **WT CERT #: 2853**
Notes: LRV Equation Issues - Qp figure is causing issues **PHONE #:** (541) 222-9997

* Used for optimization purposes only.

OHA-DWS

Disinfection Monthly Operating Report

System 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]	Peak Hourly Demand Flow [GPM]	Notes (e.g. "Plant Off")
1	1.990	60	119.4	11.7	7.45	22.6	YES	120	
2	1.330	60	79.8	14.6	7.47	17.3	YES	120	
3	1.470	60	88.2	10.2	7.49	23.8	YES	120	
4	1.620	60	97.2	13.3	7.38	18.8	YES	120	
5	1.530	60	91.8	13.8	7.46	18.6	YES	120	
6	1.810	60	108.6	13.3	7.55	20.5	YES	120	
7	2.140	60	128.4	13.7	7.56	20.8	YES	120	
8	2.100	60	126.0	16.4	7.63	17.8	YES	120	
9	1.980	60	118.8	15.4	7.48	17.7	YES	120	
10	2.030	60	121.8	17.8	7.45	15.0	YES	120	
11	1.900	60	114.0	15.4	7.44	17.3	YES	120	
12	1.940	60	116.4	15.1	7.46	17.9	YES	120	
13	1.780	60	106.8	15.3	7.61	18.3	YES	120	
14	1.910	60	114.6	13.6	7.60	20.7	YES	120	
15	1.860	60	111.6	13.7	7.60	20.4	YES	120	
16	1.920	60	115.2	15.3	7.37	17.0	YES	120	
17	1.860	60	111.6	15.3	7.53	17.9	YES	120	
18	1.950	60	117.0	14.8	7.66	19.6	YES	120	
19	1.880	60	112.8	16.8	7.70	17.3	YES	120	
20	2.010	60	120.6	14.4	7.83	21.6	YES	120	
21	1.980	60	118.8	17.5	7.73	16.9	YES	120	
22	2.020	60	121.2	15.1	7.49	18.2	YES	120	
23	2.110	60	126.6	15.4	7.75	19.9	YES	120	
24	2.320	60	139.2	13.3	7.43	20.8	YES	120	
25	2.080	60	124.8	12.0	7.47	22.5	YES	120	
26	1.950	60	117.0	14.0	7.31	18.2	YES	120	
27	1.430	60	85.8	14.4	7.11	15.5	YES	120	
28	1.280	60	76.8	13.6	7.08	15.9	YES	120	
29	1.160	60	69.6	12.8	7.23	17.5	YES	120	
30	1.720	60	103.2	14.6	7.68	19.5	YES	120	
31	1.880	60	112.8	13.7	7.43	19.2	YES	120	

* 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