

OHA - DWS

Membrane Filter Monthly Operating Report

County: Wasco

System Name: Young Life

Month/Year: Apr-2023 2024

PWS ID#: 41 - 01246

Minimum test pressure applied: 20 psi

Plant ID: WTP - A
(e.g., "A")

Minimum test pressure req'd: 18.21 psi

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]

0.098

LRC [log removal]

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			0.013	0.017		Y
2			0.013	0.020		Y
3			0.012	0.018		Y
4			0.013	0.020		Y
5			0.013	0.020		Y
6			0.012	0.020		Y
7			0.013	0.017		Y
8			0.012	0.020		Y
9			0.013	0.019		Y
10			0.012	0.031		Y
11			0.012	0.019		Y
12			0.012	0.017		Y
13			0.013	0.019		Y
14			0.012	0.019		Y
15			0.012	0.017		Y
16			0.012	0.018		Y
17			0.013	0.019		Y
18			0.012	0.021		Y
19			0.012	0.022		Y
20			0.012	0.018		Y
21			0.013	0.017		Y
22			0.012	0.017		Y
23			0.013	0.016		Y
24			0.013	0.016		Y
25			0.013	0.020		Y
26			0.013	0.019		Y
27			0.012	0.019		Y
28			0.014	0.016		Y
29			0.013	0.017		Y
30			0.013	0.021		Y
31						

Compliance summary (operator to complete any blank fields)

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

PRINTED NAME: *Johny Gastineau*
SIGNATURE: *[Signature]*
Notes:

DATE: *5/4/24*
WT CERT #: *T-08855*
PHONE #: *541-489-3100*

OHA-DWS

Disinfection Monthly Operating Report

System Name: Young Life

PWS ID#: 41 - 01246

4.0

↳ Log
Inactivation
Required via
Disinfection

Plant ID : WTP - A

Month/Year: Apr-2024

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	0.8	162	129.6	11.5	7.6	5.6	Yes	102	
2	0.7	162	113.4	11.5	7.6	5.6	Yes	101	
3	0.7	162	113.4	11.7	7.6	5.6	Yes	165	
4	0.9	162	145.8	12.0	7.6	5.2	Yes	103	
5	0.8	162	129.6	12.1	7.6	5.2	Yes	107	
6	0.8	162	129.6	12.0	7.6	5.2	Yes	106	
7	0.9	162	145.8	11.8	7.6	5.6	Yes	106	
8	0.8	162	129.6	11.7	7.6	5.6	Yes	142	
9	0.8	162	129.6	12.0	7.5	5.2	Yes	105	
10	0.9	162	145.8	12.1	7.6	5.2	Yes	101	
11	0.8	162	129.6	12.3	7.5	5.2	Yes	100	
12	0.8	162	129.6	12.5	7.5	5.2	Yes	149	
13	0.8	162	129.6	12.7	7.5	5.2	Yes	107	
14	0.8	162	129.6	12.5	7.5	5.2	Yes	107	
15	0.8	162	129.6	12.5	7.5	5.2	Yes	110	
16	0.8	162	129.6	12.7	7.5	5.2	Yes	238	
17	0.7	162	113.4	13.3	7.5	4.8	Yes	20	
18	0.7	162	113.4	13.3	7.6	4.8	Yes	17	
19	0.8	162	129.6	13.5	7.5	4.8	Yes	FO	
20	1.0	162	162	13.7	7.6	4.8	Yes	177	
21	1.0	162	162	13.8	7.5	4.8	Yes	126	
22	1.0	162	162	13.7	7.5	4.8	Yes	165	
23	1.0	162	162	13.8	7.5	4.8	Yes	103	
24	1.1	162	178.2	14.0	7.5	4.4	Yes	105	
25	0.9	162	145.8	14.2	7.5	4.4	Yes	104	
26	0.9	162	145.8	14.4	7.6	4.4	Yes	98	
27	0.9	162	145.8	14.3	7.6	4.4	Yes	112	
28	0.9	162	145.8	14.3	7.6	4.4	Yes	109	
29	0.9	162	145.8	14.3	7.6	4.4	Yes	112	
30	0.9	162	145.8	14.3	7.6	4.4	Yes	106	
31		162							

* 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

Portland, OR 97293-0350

email: dwp.dmce@odhsoha.oregon.gov

fax: 971-673-0458

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OHA - Drinking Water Services - Surface Water (UVT)

System Name: Young Life

PWS ID#: 41-01246

County: Wasco

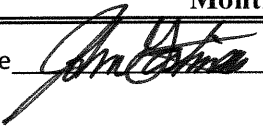
Month/Year: April 2024

Minimum UVT [%] during month: 93.4

Duty sensor variation from reference sensor: 0.92

Minimum Validated UVT: 79.9%

Date	Peak Hourly Flow	Minimum Dosage	All Lamps On?	Daily Water Produced {A}	Cumulative Water Produced	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	84	69	Y	54,840	54,840	0	0.0000%
2	81	74	Y	56,100	110,940	0	0.0000%
3	77	75	Y	73,960	184,900	0	0.0000%
4	80	73	Y	54,940	239,840	0	0.0000%
5	78	74	Y	44,450	284,290	0	0.0000%
6	78	73	Y	92,670	376,960	0	0.0000%
7	71	75	Y	74,580	451,540	0	0.0000%
8	81	73	Y	55,240	506,780	0	0.0000%
9	80	74	Y	52,720	559,500	0	0.0000%
10	78	72	Y	23,250	582,750	0	0.0000%
11	81	72	Y	82,860	665,610	0	0.0000%
12	82	73	Y	106,880	772,490	0	0.0000%
13	77	74	Y	49,760	822,250	0	0.0000%
14	81	72	Y	42,330	864,580	0	0.0000%
15	78	72	Y	57,650	922,230	0	0.0000%
16	78	74	Y	48,630	970,860	0	0.0000%
17	75	72	Y	6,460	977,320	0	0.0000%
18	82	69	Y	22,250	999,570	0	0.0000%
19	81	70	Y	49,530	1,049,100	0	0.0000%
20	77	81	Y	96,210	1,145,310	0	0.0000%
21	77	76	Y	83,610	1,228,920	0	0.0000%
22	78	78	Y	97,560	1,326,480	0	0.0000%
23	77	75	Y	36,590	1,363,070	0	0.0000%
24	77	72	Y	65,320	1,428,390	0	0.0000%
25	75	75	Y	56,990	1,485,380	0	0.0000%
26	78	74	Y	50,470	1,535,850	0	0.0000%
27	78	78	Y	85,530	1,621,380	0	0.0000%
28	82	71	Y	66,660	1,688,040	0	0.0000%
29	77	74	Y	35,440	1,723,480	0	0.0000%
30	81	73	Y	49,970	1,773,450	0	0.0000%
31							
Monthly Cumulative % Off-Spec Water Produced							0.0000%

Signature 

Op. Cert.#: T08855 D08856

Date: 5/4/24