

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Wasco**

System Name: **Young Life**

Month/Year: **Oct-2024**

PWS ID#: 41 - **01246**

Minimum test pressure applied: **20** psi

Plant ID: WTP - **A**

Minimum test pressure req'd: **18.21** 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]
0.098	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			0.062	0.017	4.751	Y
2			0.043	0.020	4.700	Y
3			0.049	0.015	4.824	Y
4			0.016	0.017	4.750	Y
5			0.036	0.016	4.786	Y
6			0.028	0.016	4.785	Y
7			0.048	0.017	4.747	Y
8			0.016	0.017	4.752	Y
9			0.022	0.016	4.781	Y
10			0.016	0.013	4.718	Y
11			0.016	0.015	4.795	Y
12			0.048	0.017	4.762	Y
13			0.055	0.017	4.761	Y
14			0.041	0.017	4.762	Y
15			0.016	0.019	4.713	Y
16			0.031	0.017	4.763	Y
17			0.016	0.017	4.749	Y
18			0.016	0.017	4.749	Y
19			0.017	0.015	4.748	Y
20			0.046	0.015	4.815	Y
21			0.016	0.015	4.816	Y
22			0.016	0.015	4.820	Y
23			0.017	0.018	4.741	Y
24			0.017	0.014	4.828	Y
25			0.017	0.016	4.779	Y
26			0.016	0.016	4.775	Y
27			0.015	0.018	4.776	Y
28			0.015	0.020	4.689	Y
29			0.015	0.017	4.690	Y
30			0.014	0.013	4.722	Y
31			0.015	0.017	4.764	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: **John Gostineau**
 SIGNATURE: *John Gostineau*
 Notes:

DATE: **11/2/24**
 WT CERT #: **T-08855**
 PHONE #: **541-489-300**

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: Oct-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	0.6	162	97.2	19.1	7.6	3.2	Yes	113	
2	0.6	162	97.2	19.2	7.6	3.2	Yes	116	
3	0.7	162	113.4	19.3	7.5	3.2	Yes	119	
4	0.6	162	97.2	19.1	7.5	3.2	Yes	111	
5	0.6	162	97.2	18.6	7.6	3.4	Yes	119	
6	0.7	162	113.4	18.0	7.5	3.4	Yes	140	
7	0.7	162	113.4	17.7	7.5	3.6	Yes	131	
8	0.7	162	113.4	17.7	7.5	3.6	Yes	120	
9	0.7	162	113.4	17.8	7.6	3.6	Yes	119	
10	0.7	162	113.4	17.8	7.5	3.6	Yes	121	
11	0.8	162	129.6	17.6	7.5	3.6	Yes	117	
12	0.8	162	129.6	17.4	7.6	3.6	Yes	131	
13	0.7	162	113.4	17.3	7.5	3.6	Yes	118	
14	0.6	162	97.2	17.1	7.6	3.6	Yes	121	
15	0.7	162	113.4	17.3	7.6	3.6	Yes	156	
16	0.7	162	113.4	17.5	7.6	3.6	Yes	121	
17	0.6	162	97.2	17.4	7.6	3.6	Yes	112	
18	0.6	162	97.2	16.6	7.6	3.8	Yes	117	
19	0.6	162	97.2	16.4	7.6	3.8	Yes	128	
20	0.6	162	97.2	16.4	7.5	3.8	Yes	131	
21	0.6	162	97.2	16.5	7.6	3.8	Yes	135	
22	0.6	162	97.2	16.3	7.6	3.8	Yes	110	
23	0.6	162	97.2	16.2	7.6	3.8	Yes	179	
24	0.6	162	97.2	16.0	7.6	3.8	Yes	112	
25	0.6	162	97.2	15.4	7.6	4.0	Yes	112	
26	0.6	162	97.2	15.3	7.6	4.0	Yes	130	
27	0.7	162	113.4	15.4	7.5	4.0	Yes	136	
28	0.6	162	97.2	15.4	7.6	4.0	Yes	131	
29	0.7	162	113.4	15.2	7.5	4.0	Yes	214	
30	0.7	162	113.4	14.9	7.6	4.4	Yes	130	
31	0.8	162	129.6	14.7	7.6	4.4	Yes	133	

* 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: October 2024

Minimum UVT [%] during month: 91.4

Duty sensor variation from reference sensor: 0.89

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]	[^m J/cm ²]	[Y or N]	[gal]		[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100[%]
1	75	52	Y	59,840	59,840	0	0.0000%
2	81	49	Y	62,640	122,480	0	0.0000%
3	74	50	Y	85,080	207,560	0	0.0000%
4	80	46	Y	55,660	263,220	0	0.0000%
5	77	53	Y	80,360	343,580	0	0.0000%
6	75	50	Y	95,040	438,620	0	0.0000%
7	77	47	Y	86,440	525,060	0	0.0000%
8	78	49	Y	67,830	592,890	0	0.0000%
9	82	44	Y	76,640	669,530	0	0.0000%
10	78	48	Y	66,430	735,960	0	0.0000%
11	74	50	Y	64,340	800,300	0	0.0000%
12	75	53	Y	90,410	890,710	0	0.0000%
13	82	50	Y	85,580	976,290	0	0.0000%
14	82	45	Y	76,400	1,052,690	0	0.0000%
15	81	51	Y	85,270	1,137,960	0	0.0000%
16	75	47	Y	101,710	1,239,670	0	0.0000%
17	72	48	Y	74,690	1,314,360	0	0.0000%
18	77	49	Y	53,760	1,368,120	0	0.0000%
19	72	50	Y	75,210	1,443,330	0	0.0000%
20	78	51	Y	93,300	1,536,630	0	0.0000%
21	78	52	Y	84,260	1,620,890	0	0.0000%
22	74	53	Y	82,680	1,703,570	0	0.0000%
23	78	52	Y	71,950	1,775,520	0	0.0000%
24	84	44	Y	67,610	1,843,130	0	0.0000%
25	81	50	Y	51,990	1,895,120	0	0.0000%
26	84	46	Y	57,580	1,952,700	0	0.0000%
27	82	51	Y	104,680	2,057,380	0	0.0000%
28	80	46	Y	89,400	2,146,780	0	0.0000%
29	82	50	Y	89,650	2,236,430	0	0.0000%
30	72	58	Y	53,970	2,290,400	0	0.0000%
31	77	47	Y	81,650	2,372,050	0	0.0000%
Monthly Cumulative % Off-Spec Water Produced							0.0000%

Signature 

Op. Cert.#: T08855 D08856

Date: 11/2/24