

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Wasco**

System Name: **Young Life**

Month/Year: **Mar-2025**

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			0.018	0.020	4.618	Y
2			0.019	0.020	4.594	Y
3			0.017	0.022	4.597	Y
4			0.017	0.020	4.622	Y
5			0.017	0.018	4.661	Y
6			0.017	0.018	4.682	Y
7			0.017	0.020	4.644	Y
8			0.017	0.020	4.645	Y
9			0.016	0.020	4.668	Y
10			0.017	0.020	4.665	Y
11			0.017	0.020	4.653	Y
12			0.016	0.021	4.574	Y
13			0.017	0.020	4.659	Y
14			0.016	0.019	4.647	Y
15			0.017	0.019	4.663	Y
16			0.017	0.019	4.663	Y
17			0.017	0.019	4.675	Y
18			0.017	0.022	4.628	Y
19			0.017	0.022	4.613	Y
20			0.017	0.021	4.644	Y
21			0.021	0.020	4.649	Y
22			0.017	0.020	4.641	Y
23			0.022	0.019	4.688	Y
24			0.016	0.019	4.682	Y
25			0.016	0.022	4.641	Y
26			0.016	0.020	4.690	Y
27			0.016	0.020	4.689	Y
28			0.016	0.022	4.660	Y
29			0.016	0.021	4.676	Y
30			0.016	0.021	4.683	Y
31			0.015	0.022	4.659	Y

Compliance summary (operator to complete any blank fields)

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

PRINTED NAME: **John Castineau** DATE: **4/5/25**
 SIGNATURE: *[Signature]* WT CERT #: **T-08855**
 Notes: *[Signature]* PHONE #: **541-489-3100**

* Used for optimization purposes only.

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: Mar-2025

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	10.9	7.7	6.0	Yes	111	
2	0.8	162	129.6	11.1	7.7	5.6	Yes	114	
3	0.7	162	113.4	11.1	7.7	5.6	Yes	116	
4	0.6	162	97.2	11.2	7.7	5.6	Yes	113	
5	0.7	162	113.4	11.1	7.7	5.6	Yes	199	
6	0.6	162	97.2	10.7	7.7	6.0	Yes	121	
7	0.6	162	97.2	10.9	7.6	6.0	Yes	152	
8	0.7	162	113.4	11.1	7.6	5.6	Yes	132	
9	0.7	162	113.4	11.1	7.6	5.6	Yes	145	
10	0.7	162	113.4	11.2	7.7	5.6	Yes	114	
11	0.8	162	129.6	11.4	7.7	5.6	Yes	121	
12	0.8	162	129.6	11.4	7.7	5.6	Yes	127	
13	0.7	162	113.4	11.3	7.6	5.6	Yes	108	
14	0.7	162	113.4	11.1	7.7	5.6	Yes	106	
15	0.7	162	113.4	11.0	7.7	5.6	Yes	114	
16	0.8	162	129.6	11.0	7.6	5.6	Yes	119	
17	0.8	162	129.6	10.9	7.7	6.0	Yes	118	
18	0.8	162	129.6	10.8	7.7	6.0	Yes	110	
19	0.8	162	129.6	11.0	7.8	5.6	Yes	109	
20	0.7	162	113.4	10.7	7.8	6.0	Yes	104	
21	0.6	162	97.2	10.9	7.7	6.0	Yes	122	
22	0.6	162	97.2	10.9	7.6	6.0	Yes	107	
23	0.7	162	113.4	10.7	7.6	6.0	Yes	108	
24	0.7	162	113.4	11.0	7.7	5.6	Yes	119	
25	0.7	162	113.4	11.1	7.6	5.6	Yes	122	
26	0.9	162	145.8	11.8	7.7	5.6	Yes	123	
27	0.9	162	145.8	11.4	7.6	5.6	Yes	117	
28	0.9	162	145.8	12.2	7.6	5.2	Yes	111	
29	0.8	162	129.6	12.6	7.7	5.2	Yes	124	
30	0.8	162	129.6	12.6	7.6	5.2	Yes	125	
31	0.7	162	113.4	12.4	7.6	5.2	Yes	128	

* 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

OHA - Drinking Water Services - Surface Water (UVT)

System Name: Young Life

PWS ID#: 41-01246

County: Wasco

Month/Year: March 2025

Minimum UVT [%] during month: 80.3

Duty sensor variation from reference sensor: 0.9

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	55	36	Y	91,390	91,390	0	0.0000%
2	58	37	Y	53,290	144,680	0	0.0000%
3	57	37	Y	56,900	201,580	0	0.0000%
4	55	38	Y	47,150	248,730	0	0.0000%
5	58	37	Y	58,450	307,180	0	0.0000%
6	60	41	Y	57,250	364,430	0	0.0000%
7	54	43	Y	53,640	418,070	0	0.0000%
8	70	37	Y	59,080	477,150	0	0.0000%
9	58	43	Y	75,540	552,690	0	0.0000%
10	60	42	Y	49,410	602,100	0	0.0000%
11	64	41	Y	67,790	669,890	0	0.0000%
12	70	40	Y	45,690	715,580	0	0.0000%
13	68	43	Y	53,670	769,250	0	0.0000%
14	64	46	Y	40,740	809,990	0	0.0000%
15	62	43	Y	51,400	861,390	0	0.0000%
16	60	45	Y	59,270	920,660	0	0.0000%
17	60	45	Y	43,530	964,190	0	0.0000%
18	65	40	Y	64,280	1,028,470	0	0.0000%
19	60	43	Y	51,810	1,080,280	0	0.0000%
20	64	40	Y	30,370	1,110,650	0	0.0000%
21	58	46	Y	56,960	1,167,610	0	0.0000%
22	61	46	Y	35,800	1,203,410	0	0.0000%
23	64	40	Y	53,130	1,256,540	0	0.0000%
24	64	40	Y	54,220	1,310,760	0	0.0000%
25	75	38	Y	47,650	1,358,410	0	0.0000%
26	72	39	Y	76,020	1,434,430	0	0.0000%
27	81	36	Y	105,790	1,540,220	0	0.0000%
28	77	40	Y	100,210	1,640,430	0	0.0000%
29	75	41	Y	73,100	1,713,530	0	0.0000%
30	77	42	Y	128,020	1,841,550	0	0.0000%
31	82	43	Y	127,170	1,968,720	0	0.0000%
Monthly Cumulative % Off-Spec Water Produced							0.0000%

Signature _____



Op. Cert.#: T08855 D08856

Date: _____

4/5/25