OHA - DWS

Membrane Filter Monthly Operating Report

County: **Wasco**

System Name: **Young Life**

Month/Year: **Apr-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} [$^{psi}/_{min}$]	LRC [log removal]	DIT Daily
0.098	4.00	

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			0.016	0.019	4.726	Y
2			0.016	0.020	4.681	Y
3			0.016	0.020	4.684	Y
4			0.016	0.020	4.669	Y
5			0.016	0.023	4.601	Y
6			0.016	0.023	4.611	Y
7			0.016	0.019	4.693	Y
8			0.016	0.019	4.694	Y
9			0.016	0.022	4.646	Y
10			0.016	0.021	4.662	Y
11			0.016	0.021	4.673	Y
12			0.016	0.021	4.665	Y
13			0.017	0.021	4.673	Y
14			0.016	0.021	4.674	Y
15			0.016	0.021	4.673	Y
16			0.016	0.021	4.664	Y
17			0.016	0.021	4.680	Y
18			0.016	0.020	4.691	Y
19			0.015	0.020	4.701	Y
20			0.015	0.020	4.700	Y
21			0.016	0.020	4.700	Y
22			0.016	0.022	4.639	Y
23			0.016	0.023	4.626	Y
24			0.016	0.023	4.635	Y
25			0.015	0.022	4.634	Y
26			0.016	0.024	4.607	Y
27			0.015	0.023	4.639	Y
28			0.016	0.023	4.634	Y
29			0.016	0.024	4.625	Y
30			0.018	0.022	4.642	Y
31						

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 Gastineau

SIGNATURE: [signature]

Notes:

DATE: 5/5/25

WT CERT #: T-08855

PHONE #: 541-489-3100

Revised 7/31/2023

♣ *Used for optimization purposes only.*

Disinfection Monthly Operating Report

System Name: **Young Life**

PWS ID#: 41 - **01246**

Plant ID : WTP - **A**

Month/Year: **Apr-2025**

4.0 ⇦ Log Inactivation Required via Disinfection

Day	Minimum Cl_2 Residual at 1st 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	0.7	162	113.4	12.3	7.7	5.2	Y	115	
2	0.6	162	97.2	12.2	7.6	5.2	Y	107	
3	0.5	162	81	12.2	7.7	5.2	Y	112	
4	0.4	162	64.8	12.2	7.6	5.2	Y	115	
5	0.6	162	97.2	12.3	7.7	5.2	Y	114	
6	0.9	162	145.8	12.4	7.6	5.2	Y	135	
7	1.0	162	162	12.8	7.6	5.2	Y	124	
8	1.0	162	162	12.4	7.6	5.2	Y	110	
9	1.1	162	178.2	13.1	7.7	4.8	Y	114	
10	1.0	162	162	12.9	7.6	5.2	Y	109	
11	1.0	162	162	13.2	7.6	4.8	Y	113	
12	0.9	162	145.8	13.3	7.6	4.8	Y	113	
13	0.9	162	145.8	13.5	7.6	4.8	Y	118	
14	0.8	162	129.6	13.4	7.6	4.8	Y	118	
15	0.8	162	129.6	13.6	7.6	4.8	Y	110	
16	0.8	162	129.6	13.7	7.6	4.8	Y	117	
17	0.7	162	113.4	13.9	7.6	4.8	Y	112	
18	0.8	162	129.6	14.2	7.6	4.4	Y	150	
19	0.7	162	113.4	14.2	7.6	4.4	Y	108	
20	0.8	162	129.6	14.3	7.7	4.4	Y	105	
21	0.7	162	113.4	14.3	7.7	4.4	Y	106	
22	0.8	162	129.6	14.7	7.7	4.4	Y	138	
23	0.7	162	113.4	14.2	7.6	4.4	Y	141	
24	0.8	162	129.6	14.5	7.7	4.4	Y	120	
25	0.8	162	129.6	14.6	7.6	4.4	Y	159	
26	0.8	162	129.6	14.8	7.6	4.4	Y	157	
27	0.8	162	129.6	14.9	7.6	4.4	Y	147	
28	0.8	162	129.6	15.1	7.6	4.0	Y	146	
29	0.7	162	113.4	15.3	7.6	4.0	Y	125	
30	0.8	162	129.6	15.4	7.6	4.0	Y	127	
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

OHA - Drinking Water Services - Surface Water (UVT)

System Name: Young Life **PWS ID#: 41-01246** **County: Wasco** **Month/Year: April 2025**

Minimum UVT [%] during month: 86.8 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]	[$^{mJ}/_{cm2}$]	[Y or N]	[gal]		[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100[%]
1	77	46	Y	86,240	86,240	0	0.0000%
2	77	46	Y	40,090	126,330	0	0.0000%
3	72	44	Y	64,520	190,850	0	0.0000%
4	77	43	Y	31,220	222,070	0	0.0000%
5	70	47	Y	71,660	293,730	0	0.0000%
6	72	49	Y	49,580	343,310	0	0.0000%
7	74	48	Y	76,220	419,530	0	0.0000%
8	70	49	Y	52,970	472,500	0	0.0000%
9	74	48	Y	81,650	554,150	0	0.0000%
10	71	50	Y	35,300	589,450	0	0.0000%
11	77	44	Y	50,320	639,770	0	0.0000%
12	75	47	Y	66,890	706,660	0	0.0000%
13	72	49	Y	75,600	782,260	0	0.0000%
14	75	50	Y	51,460	833,720	0	0.0000%
15	75	49	Y	73,770	907,490	0	0.0000%
16	77	49	Y	55,660	963,150	0	0.0000%
17	77	48	Y	44,990	1,008,140	0	0.0000%
18	74	52	Y	70,990	1,079,130	0	0.0000%
19	77	53	Y	93,090	1,172,220	0	0.0000%
20	67	57	Y	34,170	1,206,390	0	0.0000%
21	71	53	Y	58,540	1,264,930	0	0.0000%
22	78	55	Y	73,100	1,338,030	0	0.0000%
23	75	52	Y	76,700	1,414,730	0	0.0000%
24	75	54	Y	66,770	1,481,500	0	0.0000%
25	74	54	Y	66,080	1,547,580	0	0.0000%
26	72	56	Y	68,490	1,616,070	0	0.0000%
27	71	56	Y	83,160	1,699,230	0	0.0000%
28	75	55	Y	64,180	1,763,410	0	0.0000%
29	75	53	Y	54,010	1,817,420	0	0.0000%
30	72	54	Y	76,470	1,893,890	0	0.0000%
31							
Monthly Cumulative % Off-Spec Water Produced							

Signature _____ Op. Cert.#: T08855 D08856 Date: 5/5/25