

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Wasco**

System Name: **Young Life**

Month/Year: **Aug-2025**

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}]

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			0.032	0.024	4.673	Y
2			0.041	0.023	4.694	Y
3			0.037	0.023	4.658	Y
4			0.041	0.026	4.662	Y
5			0.032	0.025	4.685	Y
6			0.031	0.023	4.715	Y
7			0.047	0.026	4.662	Y
8			0.047	0.023	4.661	Y
9			0.034	0.020	4.721	Y
10			0.040	0.023	4.714	Y
11			0.038	0.023	4.707	Y
12			0.032	0.026	4.654	Y
13			0.043	0.023	4.714	Y
14			0.047	0.021	4.742	Y
15			0.042	0.021	4.737	Y
16			0.035	0.021	4.741	Y
17			0.038	0.023	4.711	Y
18			0.035	0.020	4.763	Y
19			0.025	0.018	4.814	Y
20			0.037	0.020	4.768	Y
21			0.039	0.021	4.744	Y
22			0.039	0.021	4.747	Y
23			0.032	0.021	4.735	Y
24			0.036	0.022	4.694	Y
25			0.036	0.022	4.694	Y
26			0.032	0.020	4.705	Y
27			0.030	0.020	4.730	Y
28			0.031	0.022	4.689	Y
29			0.018	0.021	4.688	Y
30			0.018	0.022	4.704	Y
31			0.025	0.022	4.691	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? Yes
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 Gastineau**

SIGNATURE: *John Gastineau*

Notes:

DATE: **9/7/25**

WT CERT #: **T-08855**

PHONE #: **541-489-3100**

OHA-DWS

Disinfection Monthly Operating ReportSystem Name: Young LifePWS ID#: 41 - 01246**4.0**Log
Inactivation
Required via
DisinfectionPlant ID : WTP - AMonth/Year: Aug-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	0.5	162	81	24.7	7.6	2.2	Yes	177	
2	0.6	162	97.2	24.9	7.6	2.2	Yes	172	
3	0.6	162	97.2	24.9	7.7	2.2	Yes	209	
4	0.6	162	97.2	24.9	7.6	2.2	Yes	182	
5	0.6	162	97.2	24.6	7.7	2.2	Yes	153	
6	0.5	162	81	24.8	7.7	2.2	Yes	128	
7	0.5	162	81	24.7	7.6	2.2	Yes	171	
8	0.6	162	97.2	24.4	7.6	2.2	Yes	191	
9	0.6	162	97.2	24.7	7.6	2.2	Yes	172	
10	0.5	162	81	24.6	7.7	2.2	Yes	151	
11	0.5	162	81	24.5	7.7	2.2	Yes	180	
12	0.5	162	81	24.7	7.6	2.2	Yes	136	
13	0.6	162	97.2	25.0	7.6	2.0	Yes	172	
14	0.7	162	113.4	25.2	7.6	2.0	Yes	184	
15	0.8	162	129.6	24.7	7.6	2.2	Yes	177	
16	0.8	162	129.6	25.2	7.6	2.0	Yes	145	
17	0.8	162	129.6	24.9	7.7	2.2	Yes	208	
18	0.8	162	129.6	25.1	7.7	2.0	Yes	151	
19	0.8	162	129.6	24.7	7.7	2.2	Yes	173	
20	0.8	162	129.6	24.5	7.6	2.2	Yes	168	
21	0.8	162	129.6	24.4	7.6	2.2	Yes	194	
22	0.8	162	129.6	24.2	7.6	2.2	Yes	184	
23	0.8	162	129.6	24.1	7.6	2.2	Yes	145	
24	0.8	162	129.6	24.2	7.7	2.2	Yes	159	
25	0.8	162	129.6	23.9	7.6	2.4	Yes	194	
26	0.8	162	129.6	23.6	7.6	2.4	Yes	173	
27	0.8	162	129.6	23.6	7.6	2.4	Yes	122	
28	0.8	162	129.6	23.7	7.6	2.4	Yes	165	
29	0.7	162	113.4	23.6	7.6	2.4	Yes	119	
30	0.7	162	113.4	23.9	7.6	2.4	Yes	128	
31	0.7	162	113.4	24.0	7.6	2.2	Yes	142	

* 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

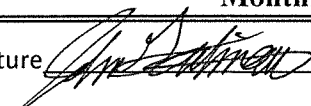
Month/Year: August 2025

Minimum UVT [%] during month: 94.3

Duty sensor variation from reference sensor: 0.8

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^3/cm^2]	[Y or N]	[gal]		[gal]	(Mo. Sum {B}) ÷ (Mo. Sum {A}) * 100[%]
1	117	54	Y	172,720	172,720	0	0.0000%
2	115	55	Y	146,210	318,930	0	0.0000%
3	120	53	Y	156,190	475,120	0	0.0000%
4	120	50	Y	168,680	643,800	0	0.0000%
5	110	55	Y	130,410	774,210	0	0.0000%
6	110	53	Y	104,340	878,550	0	0.0000%
7	112	54	Y	117,480	996,030	0	0.0000%
8	117	53	Y	186,070	1,182,100	0	0.0000%
9	115	55	Y	123,890	1,305,990	0	0.0000%
10	105	55	Y	139,380	1,445,370	0	0.0000%
11	115	47	Y	114,850	1,560,220	0	0.0000%
12	110	53	Y	120,170	1,680,390	0	0.0000%
13	111	52	Y	131,820	1,812,210	0	0.0000%
14	120	50	Y	142,660	1,954,870	0	0.0000%
15	118	50	Y	137,640	2,092,510	0	0.0000%
16	110	51	Y	107,770	2,200,280	0	0.0000%
17	112	50	Y	138,870	2,339,150	0	0.0000%
18	110	51	Y	151,360	2,490,510	0	0.0000%
19	110	52	Y	138,790	2,629,300	0	0.0000%
20	120	50	Y	107,980	2,737,280	0	0.0000%
21	111	52	Y	144,690	2,881,970	0	0.0000%
22	112	51	Y	121,640	3,003,610	0	0.0000%
23	105	54	Y	68,860	3,072,470	0	0.0000%
24	97	56	Y	141,650	3,214,120	0	0.0000%
25	100	53	Y	135,140	3,349,260	0	0.0000%
26	104	46	Y	124,720	3,473,980	0	0.0000%
27	98	59	Y	65,110	3,539,090	0	0.0000%
28	100	53	Y	117,020	3,656,110	0	0.0000%
29	100	50	Y	77,160	3,733,270	0	0.0000%
30	95	57	Y	71,320	3,804,590	0	0.0000%
31	90	57	Y	136,650	3,941,240	0	0.0000%
Monthly Cumulative % Off-Spec Water Produced							0.0000%

Signature 

Op. Cert.#: T08855 D08856

Date: 9/7/25