

OHA - DWS

Membrane Filter Monthly Operating Report

County: **Wasco**

System Name: **Young Life**

Month/Year: **Feb-2026**

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

Day	CFE Daily Turbidity [NTU]	Highest CFE* [NTU]	Highest IFE [NTU]	Highest PDR of day [^{psi} /min]	Lowest LRV _{ambient} of day [log removal]	DIT Daily
						[Y/N] or "off"
				0.098	4.00	
1			0.020	0.023	4.583	Y
2			0.020	0.022	4.628	Y
3			0.020	0.027	4.522	Y
4			0.020	0.025	4.574	Y
5			0.020	0.025	4.574	Y
6			0.020	0.029	4.507	Y
7			0.020	0.024	4.586	Y
8			0.020	0.023	4.635	Y
9			0.020	0.023	4.629	Y
10			0.020	0.021	4.657	Y
11			0.020	0.024	4.484	Y
12			0.020	0.024	4.581	Y
13			0.020	0.022	4.649	Y
14			0.020	0.022	4.598	Y
15			0.020	0.022	4.600	Y
16			0.020	0.021	4.596	Y
17			0.020	0.022	4.636	Y
18			0.021	0.023	4.613	Y
19			0.031	0.025	4.578	Y
20			0.030	0.022	4.610	Y
21			0.027	0.022	4.625	Y
22			0.027	0.024	4.585	Y
23			0.025	0.024	4.600	Y
24			0.025	0.024	4.590	Y
25			0.025	0.021	4.640	Y
26			0.025	0.021	4.640	Y
27			0.024	0.023	4.550	Y
28			0.025	0.023	4.551	Y
29						
30						
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: *John Gastineau*

SIGNATURE: *[Signature]*

Notes:

DATE: *3/7/26*

WT CERT #: *T-08855*

PHONE #: *511-489-3100*

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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: Feb-2026

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	0.9	162	145.8	10.2	7.5	6.0	Yes	105	
2	0.9	162	145.8	10.5	7.5	6.0	Yes	101	
3	0.9	162	145.8	10.5	7.5	6.0	Yes	99	
4	0.9	162	145.8	11.0	7.5	5.6	Yes	100	
5	0.9	162	145.8	10.7	7.5	6.0	Yes	100	
6	0.8	162	129.6	10.8	7.6	6.0	Yes	103	
7	0.9	162	145.8	10.9	7.5	6.0	Yes	107	
8	0.9	162	145.8	10.8	7.5	6.0	Yes	139	
9	0.9	162	145.8	10.8	7.5	6.0	Yes	125	
10	0.9	162	145.8	10.8	7.5	6.0	Yes	106	
11	0.9	162	145.8	10.9	7.5	6.0	Yes	112	
12	0.8	162	129.6	10.8	7.5	6.0	Yes	116	
13	0.8	162	129.6	11.0	7.5	5.6	Yes	141	
14	0.8	162	129.6	10.8	7.5	6.0	Yes	102	
15	0.8	162	129.6	10.8	7.5	6.0	Yes	99	
16	0.8	162	129.6	10.7	7.5	6.0	Yes	101	
17	0.8	162	129.6	10.9	7.5	6.0	Yes	150	
18	0.8	162	129.6	10.7	7.5	6.0	Yes	118	
19	0.8	162	129.6	10.5	7.5	6.0	Yes	111	
20	0.7	162	113.4	10.2	7.5	6.0	Yes	138	
21	0.8	162	129.6	10.3	7.6	6.0	Yes	138	
22	0.8	162	129.6	10.3	7.5	6.0	Yes	114	
23	0.8	162	129.6	10.3	7.5	6.0	Yes	113	
24	0.8	162	129.6	10.3	7.5	6.0	Yes	103	
25	0.8	162	129.6	10.7	7.5	6.0	Yes	129	
26	0.9	162	145.8	10.6	7.5	6.0	Yes	119	
27	0.9	162	145.8	11.0	7.5	5.6	Yes	109	
28	0.8	162	129.6	10.9	7.5	6.0	Yes	117	
29		162							
30		162							
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: February 2026

Minimum UVT [%] during month: 93

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	77	59	Y	54,390	54,390	0	0.0000%
2	75	60	Y	51,770	106,160	0	0.0000%
3	79	55	Y	66,240	172,400	0	0.0000%
4	80	57	Y	63,130	235,530	0	0.0000%
5	79	57	Y	61,390	296,920	0	0.0000%
6	81	53	Y	62,590	359,510	0	0.0000%
7	76	59	Y	63,670	423,180	0	0.0000%
8	78	58	Y	88,650	511,830	0	0.0000%
9	76	55	Y	62,700	574,530	0	0.0000%
10	76	51	Y	60,730	635,260	0	0.0000%
11	79	52	Y	48,590	683,850	0	0.0000%
12	81	50	Y	50,360	734,210	0	0.0000%
13	80	53	Y	54,330	788,540	0	0.0000%
14	78	53	Y	49,480	838,020	0	0.0000%
15	81	51	Y	57,940	895,960	0	0.0000%
16	81	50	Y	62,920	958,880	0	0.0000%
17	78	52	Y	76,720	1,035,600	0	0.0000%
18	75	55	Y	46,090	1,081,690	0	0.0000%
19	76	57	Y	57,610	1,139,300	0	0.0000%
20	75	55	Y	43,170	1,182,470	0	0.0000%
21	75	55	Y	55,300	1,237,770	0	0.0000%
22	81	52	Y	72,260	1,310,030	0	0.0000%
23	81	50	Y	81,070	1,391,100	0	0.0000%
24	79	49	Y	60,210	1,451,310	0	0.0000%
25	78	48	Y	66,680	1,517,990	0	0.0000%
26	81	50	Y	66,780	1,584,770	0	0.0000%
27	74	52	Y	82,110	1,666,880	0	0.0000%
28	81	50	Y	73,580	1,740,460	0	0.0000%
29							
30							
31							

Monthly Cumulative % Off-Spec Water Produced

Signature



Op. Cert.#: T08855 D08856

Date: 3/7/26