OHA - DWS

Membrane Filter Monthly Operating Report

County: LINCOLN

System Name: BEVERLY BEACH STATE PARK

Month/Year: NOVEMBER 2025

PWS ID#: 41 - 91052

Minimum test pressure **applied**: 15.98 psi

Plant ID: WTP - A (e.g., "A")

Minimum test pressure **req'd**: 14.0 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
0.390	4.00	

Day	CFE Daily Turbidity [NTU]	Highest CFE♦ [NTU]	Highest IFE [NTU] (>15 minutes)	Highest PDR of day [psi/min]	Lowest $LRV_{ambient}$ of day [log removal]	[Y/N] or "off"
1	OFF	OFF		OFF	OFF	OFF
2	OFF	OFF		OFF	OFF	OFF
3	OFF	OFF		OFF	OFF	OFF
4	OFF	OFF		OFF	OFF	OFF
5	OFF	OFF		OFF	OFF	OFF
6	OFF	OFF		OFF	OFF	OFF
7	OFF	OFF		OFF	OFF	OFF
8	OFF	OFF		OFF	OFF	OFF
9	0.080	0.099		0.010	5.199	YES
10	0.086	0.089		0.043	5.133	YES
11	0.089	0.093		0.021	5.142	YES
12	0.090	0.124		0.029	5.352	YES
13	OFF	OFF		OFF	OFF	OFF
14	OFF	OFF		OFF	OFF	OFF
15	0.084	0.088		0.029	5.335	YES
16	0.084	0.084		0.021	5.350	YES
17	0.093	0.152		0.028	5.340	YES
18	OFF	OFF		OFF	OFF	OFF
19	OFF	OFF		OFF	OFF	OFF
20	OFF	OFF		OFF	OFF	OFF
21	OFF	OFF		OFF	OFF	OFF
22	0.086	0.089		0.046	5.098	YES
23	0.091	0.091		0.034	5.122	YES
24	OFF	OFF		OFF	OFF	OFF
25	OFF	OFF		OFF	OFF	OFF
26	OFF	OFF		OFF	OFF	OFF
27	OFF	OFF		OFF	OFF	OFF
28	OFF	OFF		OFF	OFF	OFF
29	OFF	OFF		OFF	OFF	OFF
30	0.080	0.086		0.023	5.371	YES
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?
Y	Y	Y	Y	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: JAMES PICCIOTTI

SIGNATURE:

DATE: 12-1-2025

WT CERT #: 08520-1

PHONE #: 541-265 4520

Notes:

Revised 10/1/2024

♦ *Used for optimization purposes only.*

OHA-DWS

Disinfection Monthly Operating Report

System Name: BEVERLY BEACH STATE PARK

PWS ID#: 41 - 91052

Plant ID : WTP - A

4.00 ⇦ 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	1.15	2996	3445	11.7	7.0	39	YES	10.2	
2	1.15	2938	3379	11.5	7.0	39	YES	10.4	
3	1.11	3358	3727	11.4	7.0	39	YES	9.1	
4	1.03	3286	3385	11.5	7.0	39	YES	9.3	
5	1.06	3183	3374	11.7	7.0	39	YES	9.6	
6	1.20	3358	4030	11.8	7.0	39	YES	9.1	
7	1.09	2634	2872	11.9	7.0	>9	YES	11.6	
8	0.99	1679	1662	11.5	6.9	39	YES	18.2	
9	0.97	1830	1775	11.6	7.0	39	YES	16.7	
10	0.99	2526	2500	11.9	6.9	39	YES	12.1	
11	1.15	2883	3315	11.8	6.9	39	YES	10.6	
12	1.11	3773	4188	11.8	7.0	39	YES	8.1	
13	1.11	3434	3811	11.9	7.0	39	YES	8.9	
14	1.17	3151	3686	12.0	7.0	39	YES	9.7	
15	1.08	2526	2728	12.0	7.0	39	YES	12.1	
16	1.19	3151	3749	12.1	7.0	39	YES	9.7	
17	1.23	3322	4086	11.9	6.9	39	YES	9.2	
18	1.14	3286	3746	11.7	7.0	39	YES	9.3	
19	1.21	3682	4455	11.1	7.0	39	YES	8.3	
20	1.08	2681	2895	10.9	7.0	39	YES	11.4	
21	1.14	2830	3226	10.9	7.0	39	YES	10.8	
22	1.05	2830	2971	10.6	7.0	39	YES	10.8	
23	1.04	3087	3210	10.4	6.9	39	YES	9.9	
24	1.09	2856	3113	10.1	7.0	39	YES	10.7	
25	1.12	2883	3229	10.2	7.0	39	YES	10.6	
26	1.20	2634	3161	10.1	6.9	39	YES	11.6	
27	1.13	1634	1847	10.2	7.0	39	YES	18.7	
28	1.06	1707	1810	10.1	6.9	39	YES	17.9	
29	1.13	1934	2186	9.8	6.9	39	YES	15.8	
30	1.17	2526	2955	9.9	7.0	39	YES	12.1	
31									

♦ 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
PO Box 14350
Portland, OR 97293-0350
email: dwp.dmce@odhsoha.oregon.gov
fax: 971-673-0458