

PLANT INFLUENT				PLANT EFFLUENT @DMS																				REMARKS		
DAY	INF. MGD	EFF. MGD	Molalla River CFS	pH	BOD mg/L	TSS mg/L	Temp	pH	Max Temp	Min DO	NH3	BOD mg/L	BOD % Rem	BOD Disch. lbs	TSS mg/L	TSS % Rem	TSS Disch. Lbs	Chlorine Used lbs	Max Chlorine Hr. Avg	Total Colif	Ecoli	MOL 1400-DO	River 1800 Temp	RAIN inch	Day	
1	0.921			7.2	169	151	15.1															11.5	11.4	0.60	1	
2	1.293			6.9			15.0																11.2	10.7	0.40	2
3	1.290			7.2			14.9																11.9	10.2	0.20	3
4	1.147			6.8			14.4																11.9	10.7	0.15	4
5	1.084																								0.00	5
6	1.057																								0.00	6
7	0.994			7.1			15.3																10.9	14.5	0.00	7
8				7.0			15.5																			8
9																										9
10																										10
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30																										30
31																										31
Total	7.786	0.000																0							1.35	TOTAL
MAX	1.293	0.000		7.2	169	151	15.5	0.0			0.0	0.0	0	0	0.0	0	0	0	0.00						0.60	MAX
MIN	0.921	0.000		6.8	169	151	14.4	0.0			0.0	0.0	0	0	0.0	0	0	0	0.00						0.00	MIN
AVG	1.112	#DIV/0!	#DIV/0!	7.0	169	151	15.0	#####	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#DIV/0!	#NUM!	11.5	11.5	0.19	AVG
PERMIT STAND								6-9				10mg/L	80%	160 lbs/day	10mg/L	80%	160 lbs/day		0.07mg/L Mo/Ave		126/100ml					PERMIT STAND

PRINCIPAL OPERATOR NAME: Otis Phillips TREATMENT CERTIFICATION # AND GRADE: 10506 LEVEL 4

SIGNATURE: \_\_\_\_\_ COLLECTIONS CERTIFICATION # AND GRADE: 7848 LEVEL 1

During this reporting period did all monitoring data & sampling frequencies meet permit requirements & limits (if "no", explain)? YES NO

During this reporting period were there unanticipated bypasses or upsets which exceeded any effluent limits (if "yes", explain)? NO YES

During this reporting period was there any collections system overflows (if "yes" explain)? NO YES

