State of Oregon Drinking Water Program Monthly Disinfection Report for Ground Water Systems

System Name Bear Creek Mobile PWS ID# 41.00050 Month/Year 19494517 2022 Entry Point: #49 Required Minimum Residual - 4 mg/L						
Date	Time	Source(s) in		Lowest free chlorine residual at entry point to distribution system (mg/L)	139	Notes
1	9:Ma	Wels 1-2-3 (Compined	.5		13 (4)
2	10:38 9			.55	1911	
3	9:30 0			.55		10 360 JA
4	9:08 a			. 55	11 700	
5	9:12 9			.55		
6	9:34 4		190000	.5		The same
7	10179	time to		. 5		
8	9:29 9		200	.55		
9	8:04 9			, 55		
10	9:18 a			.55	1 76	
11	11:153		1 11	.55		
12	9:28 9	1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 - 1 -		.5		7 18 1 1 1 1 1 1 1
13	9:05 9			.5	A 作業件 1.3.1%	
14	10:269	p de a jobstina		5.5		All the Proposition Control of
15	7:54 9	- 1014723		.5	F. Grand	
16	8:11 9	1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1. 1	9.6	-5		4 2 1 2 1 2 1 2 1 2 1
17	8:08 a	446 44 32 3	1 3 TAL	35	1970	
18	8:44 a				1 3/1	
19	8:27 9		1 100 10	.5 .5		
20	932 9		a accept	.5	. 1979	
21	10:129	2454		.55	96	
22	8:28 a			.55	100	
23	8:519		77 ° 24	,5	X BASIS	
24	8:24 4			.55	100	
	8:14 9			.55	Late Tale	The state of the s
26	Company of the second s	* I. (.55		
27	8:10 9	304 2.1	1000	.55		
28	10:129	A CHARLEST AND S		-55		ALC BY
29	(1 01	and the second		-55		PETAL TO THE PERANTE OF THE PERANTE
30	8:24 a	3644279		•6		TW s
31		11 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	4.00	.55		
Was the chlorine residual ever less than the required minimum residual of _4 mg/L? Yes No						
If yes, what was the longest time period until the required level was restored? hours – If > 4 hours, Drinking Water Program to be						
notified by end of next business day.						
GWS Serving 3,300 or Fewer				GWS Serving More Than 3,300		
If yes, did you monitor every four hours until the residual returned to mg/L as required? Yes No Attach those results and submit them with this form.			Did continuous monitoring equipment fail at any time this reporting month? ☐ Yes ☐ No		Date continuous monitoring equipment failed:	
			If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? Yes No			1 1
						Date it was returned to
						service:
			Attach grab sample results and submit them with this form.		1 1	
hall China later Scale						
Printed Name: Mike Skinner Title: Water System Operator Certification #:						
Signature: Mike Alem Phone #: (541) 414-8434 OR						
Date: 8 13 12027 Small Groundwater System 🖸						

Return by 10th of following month by either email dwp.dmce@state.or.us; fax 971-673-0694; or mail to Drinking Water Services, PO Box 14350, Portland, OR 97293-0350.