

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

System Name Bear Creek MHP

PWS ID# 41 000 50

Month/Year Aug 2024 Entry Point: #51

Required Minimum Residual .4 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	7:42 a	Wells 1-2-3 Combined	.55	
2	9:57 a		.55	
3	10:47 a		.55	
4	11:21 a		.55	
5	9:53 a		.55	
6	12:01 P		.55	
7	9:15 a		.55	
8	8:26 a		.55	
9	9:41 a		.55	
10	11:47 a		.55	
11	11:13 a		.55	
12	9:41 a		.55	
13	9:33 a		.55	
14	9:44 a		.55	
15	9:06 a		.55	
16	8:41 a		.55	
17	9:00 a		.55	
18	11:25 a		.55	
19	8:39 a		.55	
20	9:41 a		.55	
21	9:45 a		.55	
22	10:39 a		.55	
23	9:27 a		.55	
24	8:58 a		.55	
25	11:13 a		.55	
26	9:40 a		.55	
27	9:34 a		.55	
28	10:34 a		.55	
29	9:31 a		.55	
30	9:38 a		.55	
31				

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?
notified by end of next business day.

hours - If > 4 hours, Drinking Water Program to be

GWS Serving 3,300 or Fewer

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.

GWS Serving More Than 3,300

Did continuous monitoring equipment fail at any time this reporting month? ☐ Yes ☐ No

If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? ☐ Yes ☐ No

Attach grab sample results and submit them with this form.

Date continuous monitoring equipment failed:

/ /

Date it was returned to service:

/ /

Printed Name: Mike Skinner

Signature: Mike Skinner

Date: 9/13/24

Title: Water System Operator

Phone #: (541) 414-3434

Operator Certification #:

OR

Small Groundwater System ☒

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