

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

System Name Bay City Water System

PWS ID# 4 1 00079

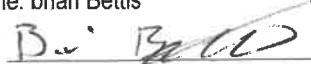
Month/Year 01/2024 Entry Point: Wells

Required Minimum Residual 0.20 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	9:50	1	.31	
2	6:50	1	.31	
3	7:55	-	.26	
4	7:25	1	.31	
5	8:20	1	.26	
6	8:30	1	.31	
7	7:25	1	.31	
8	8:25	1	.27	
9	7:45	1	.33	
10	10:45	2	.30	
11	8:20	1	.35	
12	8:05	1	.31	
13	7:20	-	.35	
14	10:50	1+2	.32	
15	10:50	1	.35	
16	8:40	1	.35	
17	8:20	2	.32	
18	7:50	1	.31	
19	9:10	1	.33	
20	9:05	2	.39	
21	11:20	1	.37	
22	8:20	2	.29	
23	8:05	2	.34	
24	8:10	2	.33	
25	11:55	2	.31	
26	8:45	1	.30	
27	12:45	1	.30	
28	12:30	1	.28	
29	8:30	2	.27	
30	8:25	2	.35	
31	7:50	2	.34	

Was the chlorine residual ever less than the required minimum residual of 0.20 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.

<p>GWS Serving 3,300 or Fewer</p> <p>If yes, did you monitor every four hours until the residual returned to 0.20 mg/L as required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>Attach those results and submit them with this form.</i></p>	<p>GWS Serving More Than 3,300</p> <p>Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p><i>Attach grab sample results and submit them with this form.</i></p>	<p>Date continuous monitoring equipment failed: / /</p> <p>Date it was returned to service: / /</p>
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Printed Name: brian Bettis	Title: Bay City Water Technician	Operator Certification #: T-09089
Signature: 	Phone #: (503) 377-4121	OR
Date: 02 / 01 / 2024		Small Groundwater System <input type="checkbox"/>