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

Systen	n Name	Boardman, C	ity of		PWS ID# 41	00130
Month/	Year 🔰	1 2025 Entry F	oint: EP-A for Ra	anney Collector Wells	Required Min	imum Residual <u>0.2</u> mg/L
Date	Time	Source(s		Lowest free chlori residual at entry poi distribution system (i	int to	Notes
1	7:13	Col 1	22	0.80		
2	7:00	Coll	€2	0.86		
3	3 :52	COL 1	42	0.85		
4	7:53	201 1	82	0.86		
5	4.00	$\frac{\zeta_0}{1}$	₹ 7	0.85		
6	1.08	(0)	180	0.89		
7	715	CO1 1	<u> </u>	0.84		
8	7:12	COL	12	0.87		
9	7:07	Colla	12	2.82		
10	8,11	COLL	12	0.01	. 15	
11	45:45	COLI	ئ ر	0.84		
12	7:06	Col	\$2	0.85		
13	1:06	0	2	0.86		
14	7:28	Coll	£2	0.93		
15	7:10	(6) 9	2	0.83		
16	7:06	Col 1 9	2	0.84		
17	7:32	0011	,	0.86		
18 19	7:19	60/1/2	Ϋ́	0.90		
20		001 19	2	0.90		
21	7:10	CO 1 9	2	-		
22	7:13			0.86		
23	7:09	(0) 1 97		^/		
24	7:50	01/12	2	0.86		
25	8:00	(a) 1 4 Call &	7	0.85		1
26	652	C0118	7	1.8.0		
27	7:06		2	0.86		
28	7:20		2	1.05		
29	7:05		\$2	0.92		
30	7:15	COI 1 \$	2	0.83		
31	7:10	col 18	2	0.90		
Was the chlorine residual ever less than the required minimum residual of <u>0.2 mg/L?</u> ■ 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, d	Vou monitor	every four nours	Did continuous monitoring equipment fail at any time this Date continuous monitoring			
until the residual returned to 0.2 mg/L as			reporting month? ■ Yes ■ No equipment failed:			
required	!?	■No	If yes, were grab samples collected every four hours until the			
		nd submit them with	continuous monitoring equipment was returned to service as required?			
this for	1.		Attach grab sample results and submit them with this form.			
Printed Name: Luis Camps Title: Public Works Lead						
Signature: Phone #: (54) 70/-888 Operator Certification #: 900039						
Date: 6 13 12025						