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

System NameCity of DaytonPWS # 4100252

System Nam		City of Dayton	Forting Delicat MATE 44	PWS # 4100252
Month/Year	Aug-2	1	Entry Point WTP - A1	Required Minimum Residual 0.6 mg/L
			Lowest free chlorine residual	
			at entry point to distribution	
Date	Time	Source in Use	system	Notes
1	7:46	WTP - A1	0.85	
2	7:52		0.85	
3	7:30	<u> </u>	0.80	
4	9:00		0.83	
5	7:34		0.86	
6 7	8:31 7:51		0.84	
8	7:56		0.85	
9	8:25		0.85	
10	8:43		0.85	
11	7:40		0.84	
12	7:11	1	0.83	
13	7:30	+	0.81	
14	8:00	+	0.80	
15	7:20	+	0.80	
16	8:48		0.78	
17	8:40		0.79	
18	8:31		0.85	
19	7:40		0.86	
20	8:31		0.87	
21	8:36		0.85	
22	7:38		0.86	
23	7:14		0.84	
24	7:09		0.87	
25	8:34		0.87	
26	7:42		0.84	
27	8:20		0.79	
28	6:44		0.85	
29	7:43		0.84	
30	8:24		0.84	
31	7:11	WTP - A1	0.85	
Was the chlo	rine residual ever	less than the requi	red minimum residual of 0.6 m	g/L 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 buisness day				
GWS Servin 3,300 or Fewer If yes, did you monitor every 4 hours				
-	-	-		
until the re	esidual returne	ed to 0.6 mg/L		
as required	d YES NO			
Attach those results and submit them				
with this form				
Printed Na	ame Stephen S	agmiller Titl	ePublic Works Director O	perator Certification # 6845
Signature Stephen Sagmiller				
Date 9/7/2021				
	3/1/202	±		