

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

System Name City of Dayton **PWS #** 4100252
Month/Year May-22 **Entry Point** WTP - A1 **Required Minimum Residual** 0.6 mg/L

			Lowest free chlorine residual at entry point to distribution system	Notes
Date	Time	Source in Use		
1	7:59	WTP - A1	0.77	
2	7:36		0.80	
3	7:32		0.79	
4	7:38		0.76	
5	7:35		0.78	
6	8:41		0.78	
7	7:30		0.80	
8	6:40		0.81	
9	7:40		0.85	
10	7:20		0.86	
11	8:50		0.79	
12	7:30		0.86	
13	7:57		0.82	
14	7:47		0.81	
15	7:07		0.78	
16	7:45		0.80	
17	8:50		0.80	
18	7:35		0.75	
19	7:48		0.84	
20	9:00		0.83	
21	6:11		0.76	
22	6:45		0.72	
23	7:19		0.73	
24	7:20		0.72	
25	8:42		0.67	
26	9:23		0.65	
27	9:17		0.87	
28	7:30		0.86	
29	8:08		0.86	
30	8:00		0.82	
31	7:28	WTP - A1	0.85	

Was the chlorine residual ever less than the required minimum residual of 0.6 mg/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 business day

GWS Servin 3,300 or Fewer

If yes, did you monitor every 4 hours
 until the residual returned to 0.6 mg/L
 as required **YES NO**
*Attach those results and submit them
 with this form*

Printed Name Stephen Sagmiller **Title** Public Works Director **Operator Certification #** 6845

Signature *Stephen Sagmiller*

Date ____ 6/1/2022