

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

System Name City of Dayton **PWS #** 4100252
Month/Year Jan-23 **Entry Point** WTP - A1 **Required Minimum Residual** 0.6 mg/L

Lowest free chlorine residual at entry point to distribution system				
Date	Time	Source in Use	system	Notes
1	7:05	WTP - A1		0.82
2	7:10			0.80
3	7:15			0.78
4	7:18			0.80
5	7:15			0.80
6	8:30			0.78
7	7:00			0.87
8	7:00			0.82
9	9:16			0.80
10	8:52			0.82
11	8:48			0.86
12	8:42			0.80
13	8:32			0.81
14	7:15			0.88
15	7:16			0.81
16	7:20			0.81
17	7:36			0.86
18	7:39			0.82
19	7:30			0.81
20	8:49			0.78
21	6:30			0.77
22	6:20			0.79
23	7:10			0.83
24	7:14			0.79
25	7:08			0.81
26	7:18			0.80
27	8:28			0.83
28	8:05			0.71
29	8:05			0.83
30	7:33			0.85
31	8:00	WTP - A1		0.83

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 ____ 2/2/2023