

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

**System Name** City of Dayton **PWS #** 4100252  
**Month/Year** Aug-24 **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	6:30	WTP - A1		0.83
2	7:18			0.81
3	7:05			0.82
4	7:20			0.82
5	7:10			0.82
6	7:15			0.83
7	7:24			0.82
8	7:20			0.83
9	8:15			0.83
10	8:25			0.83
11	7:13			0.84
12	7:24			0.83
13	7:04			0.84
14	7:21			0.83
15	7:31			0.82
16	9:00			0.80
17	7:57			0.82
18	8:28			0.81
19	7:15			0.81
20	8:02			0.82
21	7:19			0.81
22	1:55			0.83
23	7:30			0.84
24	8:45			0.82
25	7:45			0.80
26	6:30			0.86
27	7:40			0.81
28	7:45			0.82
29	7:50			0.85
30	7:10			0.83
31	7:50	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*

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

**Signature** *Stephen Sagmiller*

**Date** \_\_\_\_ 9/5/2024