State of Oregon Drinking Water Program

Monthly Disinfection Report for Ground Water Systems

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| --- | --- | --- | --- | --- |
| **System Name** |  | City of Dayton |  | PWS # 4100252 |
| **Month/Year** | Feb-25 |  | **Entry Point** WTP - A1 | Required Minimum Residual 0.6 mg/L |

|  |  |  |  |  |
| --- | --- | --- | --- | --- |
| Date | Time | Source in Use | Lowest free chlorine residual  at entry point to distribution system | Notes |
| 1 | 7:00 | WTP - A1 | 0.87 |  |
| 2 | 6:45 |  | 0.88 |  |
| 3 | 7:35 |  | 0.87 |  |
| 4 | 7:40 |  | 0.86 |  |
| 5 | 8:00 |  | 0.86 |  |
| 6 | 9:23 |  | 0.85 |  |
| 7 | 7:35 |  | 0.86 |  |
| 8 | 7:59 |  | 0.79 |  |
| 9 | 7:48 |  | 0.83 |  |
| 10 | 7:56 |  | 0.81 |  |
| 11 | 7:26 |  | 0.87 |  |
| 12 | 7:44 |  | 0.84 |  |
| 13 | 7:50 |  | 0.78 |  |
| 14 | 8:14 |  | 0.86 |  |
| 15 | 8:02 |  | 0.84 |  |
| 16 | 8:47 |  | 0.84 |  |
| 17 | 7:37 |  | 0.85 |  |
| 18 | 7:48 |  | 0.89 |  |
| 19 | 7:40 |  | 0.98 |  |
| 20 | 7:30 |  | 0.82 |  |
| 21 | 7:50 |  | 0.82 |  |
| 22 | 8:15 |  | 0.80 |  |
| 23 | 7:55 |  | 0.82 |  |
| 24 | 7:35 |  | 0.84 |  |
| 25 | 8:42 |  | 0.84 |  |
| 26 | 8:45 |  | 0.85 |  |
| 27 | 7:30 |  | 0.81 |  |
| 28 | 7:50 |  | 0.82 |  |
|  |  |  |  |  |
|  |  |  |  |  |
|  |  | WTP - A1 |  |  |
| 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 buisness 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** Don Cutler **Title** PublicWorks Supervisor **Operator Certification** # 2853  **DRC - Darrel Lockard**  **Signature** *Don Cutler*  **Date** 3/4/2025 | | | | |
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