

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


System Name: Seavey Loop Water Company **PWS ID#** 41 - 00289

Month/Year: June-22 **Required Minimum Residual:** 0.30 mg/L

| Date | Time | Source(s) in Use | Lowest free chlorine residual at entry point to distribution system (mg/L) | Notes |
|------|-------------|------------------|--|-------|
| 1 | 2:00:00 PM | WELL (L16262) | 0.65 | |
| 2 | 10:00:00 AM | WELL (L16262) | 0.71 | |
| 3 | 10:00:00 AM | WELL (L16262) | 0.68 | |
| 4 | 10:00:00 AM | WELL (L16262) | 0.50 | |
| 5 | 6:00:00 AM | WELL (L16262) | 0.57 | |
| 6 | 2:00:00 PM | WELL (L16262) | 0.52 | |
| 7 | 10:00:00 AM | WELL (L16262) | 0.48 | |
| 8 | 6:00:00 AM | WELL (L16262) | 0.40 | |
| 9 | 6:00:00 PM | WELL (L16262) | 0.45 | |
| 10 | 6:00:00 PM | WELL (L16262) | 0.45 | |
| 11 | 6:00:00 PM | WELL (L16262) | 0.47 | |
| 12 | 6:00:00 PM | WELL (L16262) | 0.40 | |
| 13 | 10:00:00 AM | WELL (L16262) | 0.39 | |
| 14 | 10:00:00 AM | WELL (L16262) | 0.41 | |
| 15 | 6:00:00 AM | WELL (L16262) | 0.40 | |
| 16 | 2:00:00 PM | WELL (L16262) | 0.37 | |
| 17 | 2:00:00 PM | WELL (L16262) | 0.35 | |
| 18 | 6:00:00 AM | WELL (L16262) | 0.31 | |
| 19 | 6:00:00 AM | WELL (L16262) | 0.34 | |
| 20 | 6:00:00 PM | WELL (L16262) | 0.35 | |
| 21 | 10:00:00 AM | WELL (L16262) | 0.38 | |
| 22 | 10:00:00 AM | WELL (L16262) | 0.36 | |
| 23 | 2:00:00 PM | WELL (L16262) | 0.33 | |
| 24 | 6:00:00 AM | WELL (L16262) | 0.30 | |
| 25 | 6:00:00 AM | WELL (L16262) | 0.32 | |
| 26 | 6:00:00 AM | WELL (L16262) | 0.33 | |
| 27 | 10:00:00 AM | WELL (L16262) | 0.35 | |
| 28 | 2:00:00 PM | WELL (L16262) | 0.56 | |
| 29 | 2:00:00 PM | WELL (L16262) | 0.55 | |
| 30 | 6:00:00 PM | WELL (L16262) | 0.59 | |
| 31 | 10:00:00 AM | WELL (L16262) | | |

Was the chlorine residual ever less than the required minimum residual of .30 mg/L Yes No
 If yes, what was the longest time period until the required level was restored? _____ hours

| | | |
|--|--|---|
| <p>GWS Serving 3,300 or Fewer</p> <p>If yes, did you monitor every four hours until the residual returned to .30 mg/L? <i>Attach those results and submit them with this form.</i></p> | <p>GWS Serving More Than 3,300</p> <p>Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service? <input type="checkbox"/> Yes <input type="checkbox"/> No <i>Attach grab sample results and submit them with this form.</i></p> | <p>Date continuous monitoring equipment failed: / /</p> <p>Date it was returned to service: / /</p> |
|--|--|---|

| | | |
|--|---|---|
| <p>Printed Name: Dan Reitz Signature: </p> | <p>Title: Vice- President Oregon Water Services, Inc. Phone#: (541) 342-1718</p> | <p>Operator Certification #: 6528 OR</p> <p style="text-align: center;">Small Ground Water System</p> |
| <p>Date: 7/5/2022</p> | | |