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

	System	System Name Power City Water Co-Op			PWS ID# 41-00375	
	Month/Year May 15 Entry Point: E			nt: <u>EP-A for Well</u>	Required Minimum Residual 0.4 mg/L	
A CONTRACTOR OF THE CONTRACTOR	Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes	
×	1	3107 pm	Well	161	56/0 rate pumped in consing well	
et in the second	2	18:524	Well	18/0	LIES SACK Small KNO B-4855	
Haysqueyes	3	5:1100	Well	1,72	10582,49a1c	
I America Min	4	5143am	Well	97	10.5582011	
en mount	5	1:560m	Well	(4)	61827 and smell know the fel	
toatagon	6	10158m	Well	122	1.957 Head	
Petrophysian	7	1/0/10m	Well	150	2/80 000 5 small kny 6 9 665	
физинани	8	11:50 pm	Well		6432,83015 Addie 1galety + 93015Hgo	
Misamaila	9	11:36pm	Well	707	MANIA BOLL	
drawa	10	914900	Well	12	1470 8001	
4	11	51280n	Well	122	64318945	
V denomina	12	Cli Cum	Well	7-7	10 1 W Sunt Still print way	
- Andreada	13	14/18/14	Well	26	207414 god Sweening fung 10g	
s I	14	110000	Well	130	92.671 gals	
при	15	11:110000	Well	161	1101.19ak & samples taken	
no.	16	3:300m	Well	148	6432183213 Small Rover 576-20	
and document	17	4125 AM	Well	13	11968 gals added Igal Cla+ 9gc/5 Hyp)	
appungan	18	- C - L	Well	179	5834,496/scmellKubyto 15	
undaamus	19	S.59001	Well	179	S383, Legals	
The state of the s	20	94070	Well	186	53 85 1 b ga/s	
ANA SOCIAL	21	9147 Am	Well	- 30	1122	
	22	971500	Well	14	0133 (6 gal)	
activescont	23	117010	Well	193	3984.gess	
orekenose	24	Rigilain	Well	- 18 E	683.49615	
Section 1	25	12107em	Well	1/3	7854 gals INCOMING Still pumpting	
urowsper	26	3:08 pm	Well	151	3/3/10/01	
- September	27	3127pm	Well	144	338516 gals small Knob MESE	
andersont	28	124000	Well	163	3 460, 45als raded igolupt 48als 400	
Name of the last	29	1/200 Am	Weil	1378	9200, 4 gels small level & to 55	
Sidesona.	30	1:34 cm	Well	* 0 /	6058 Rgals Hot Day	
PARENTEN AND ADDRESS OF THE PA	31		Well	(34)	12,641,8gg/s Hot Dry	
	331434					
90/Qemenylentremannus (metalliste	If yes, w	Was the chlorine residual ever less than the required minimum residual of <u>0.4 mg/L?</u> Yes 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.				
ileanna ann an ann an ann an an ann an ann an a	GWS Serving 3,300 or Fewer GWS Serving Note Than 300				ery ng A gre Than 300	
SATURATION OF THE PARTY OF THE	If yes, did you monitor every four hours until the residual returned to mg/L as required? □ Yes □ No  Attach those results and submit them with  Did continuous monitoring reporting month? □ Yes  If yes, were grab samples continuous monitoring equ			Did continuous matering equipm	nent fail at any time this Date continuous monitoring	
				reporting month? ☐ Yes ☐ No JUN 0 6 2025 equipment failed:		
Desert Insulations (Constitution Constitution Constitutio				If yes, were grab samples collected every in the continuous monitoring equipment with the continuous monitoring equipme		
SS COLLEGE OF THE PARTY OF THE		Attach grab sample results and submit them with this form.				
(A)SQUIJIII INTERNATION	Printed Name: Manle enve Menitt Title: pres/manager Operator Certification #:					
drones politic	Signature: / Janleere Menth Phone #: (54) 922-2711 OR					
- CONTRACTOR OF THE PERSON NAMED OF THE PERSON	Date: 5 /31 / 2025				Small Groundwater System □	
273					Small Groundwater System L1	

May
I added Igent UZ & 9gals Hypo
Il small knock into 60
Is small knock into 65