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

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System Name Neahkahnie Wa			r District		PWS ID# 4 1 00506		
Month/	Year 09	12024 Entry	Point: WTP-B	(Fyd.#66)	Required Minim	um Residual 0.4 mg/L	
Date	Time Source(s			Lowest free chloring residual at entry point distribution system (m	nt to	Notes	
1		spr, 51-3+P	rates spris	0.46			
2				0.45	A STATE OF THE STA		
3				0.45			
4				0,44			
5			To come & normal di Addisonal anno con monthe proposition and an infrared property.	0.53			
7	and the second s			0.44			
8				0.40			
9			- A Management of Secretary of Secretary Control of Secretary Sec. 100 Sec.	0.48			
10				0.44			
11			***************************************	0.4/			
12				0.41			
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15		Manhaerikoles (111 201 21 acr 10		0.45	,.		
16		tion and a fine that the a frequency in the contract of the co	THE RESERVE OF THE PARTY OF THE PROPERTY OF THE PARTY OF	0.48		And desired the second of the	
17		The state of the s		0.42			
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19			1	0.48	***************************************	nderturp out fair (a) unique que appropries années de décente années de la que doncé décente messade années	
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24			The state of the s	0.48		The state of the s	
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26		AND DOMESTIC OF THE PARTY OF TH		0.46			
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28				0.54			
29				0.51		PROCESSES AND THE REST TO A REST TO A SECURE AND ADMINISTRATION AND A SECURE AND A	
30		Control of the second s		0.70			
	alarina rasid					***************************************	
f yes, wha	at was the lo	ual ever less than the ngest time period unt <u>business day.</u>	il the required level	residual of o. 4º mg/L? was restored? hou		Drinking Water Program to be	
GWS Serving 3,300 or Fewer GWS Serving More Than 3,300							
yes, did you monitor every four hours ntil the residual returned to mg/L s required? Yes No ttach those results and submit them with his form.			Did continuous monitoring equipment fail at reporting month? Yes No			Date continuous monitoring equipment failed:	
			If yes, were grab samples collected every for continuous monitoring equipment was return required?		ur hours until the		
					ned to service as	Date it was returned to service:	
Attach grab sample results and submit them with this form.							
nted Nam	e: Seatt	Amorrill	Title:	Title: System OPDRC Phone #: (503)8044649		Operator Certification #: $7-39278$	
Printed Name: Statt A Morr. 11 Signature: Sut a Muse Phone #: (303)8044649						OR	
Date: 09 / 30 / 2024 Small Groundwate						oundwater System	