

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

System Name: Medford Water Commission

PWS ID#: OR 41-00513

Month/Year: **Mar, 2023**

Entry Point: EP-C, Big Butte Springs

Required Minimum Residual: 0.25 mg/L

Date	Time	Source(s) in use	Lowest free Chlorine residual at entry point to distribution system (mg/L)	Notes
03/01/23	03/01/2023 02:00 am	Big Butte Springs	0.53	
03/02/23	03/02/2023 10:00 pm	Big Butte Springs	0.53	
03/03/23	03/03/2023 12:00 am	Big Butte Springs	0.53	
03/04/23	03/04/2023 05:00 pm	Big Butte Springs	0.54	
03/05/23	03/05/2023 04:00 am	Big Butte Springs	0.53	
03/06/23	03/06/2023 06:00 pm	Big Butte Springs	0.55	
03/07/23	03/07/2023 03:00 am	Big Butte Springs	0.54	
03/08/23	03/08/2023 02:00 pm	Big Butte Springs	0.55	
03/09/23	03/09/2023 12:00 am	Big Butte Springs	0.54	
03/10/23	03/10/2023 04:00 pm	Big Butte Springs	0.55	
03/11/23	03/11/2023 12:00 am	Big Butte Springs	0.54	
03/12/23	03/12/2023 07:00 pm	Big Butte Springs	0.55	
03/13/23	03/13/2023 04:00 am	Big Butte Springs	0.54	
03/14/23	03/14/2023 10:00 pm	Big Butte Springs	0.54	
03/15/23	03/15/2023 12:00 am	Big Butte Springs	0.54	
03/16/23	03/16/2023 11:00 am	Big Butte Springs	0.55	
03/17/23	03/17/2023 03:00 am	Big Butte Springs	0.54	
03/18/23	03/18/2023 07:00 pm	Big Butte Springs	0.55	
03/19/23	03/19/2023 03:00 am	Big Butte Springs	0.54	
03/20/23	03/20/2023 07:00 pm	Big Butte Springs	0.55	
03/21/23	03/21/2023 12:00 am	Big Butte Springs	0.55	
03/22/23	03/22/2023 10:00 am	Big Butte Springs	0.51	
03/23/23	03/23/2023 12:00 am	Big Butte Springs	0.56	
03/24/23	03/24/2023 04:00 pm	Big Butte Springs	0.56	
03/25/23	03/25/2023 06:00 am	Big Butte Springs	0.54	
03/26/23	03/26/2023 10:00 pm	Big Butte Springs	0.55	
03/27/23	03/27/2023 05:00 am	Big Butte Springs	0.54	
03/28/23	03/28/2023 11:00 pm	Big Butte Springs	0.55	
03/29/23	03/29/2023 12:00 am	Big Butte Springs	0.55	
03/30/23	03/30/2023 09:00 am	Big Butte Springs	0.57	
03/31/23	03/31/2023 05:00 am	Big Butte Springs	0.57	

Was the chlorine residual ever less than the required minimum residual of 0.25 mg/L? Yes NO

If yes, what was the longest time period until the required level was restored? _____ Hours

GWS Serving 3,300 or Fewer	GWS Serving More Than 3,300	
If yes, did you monitor every four hours until the residual returned to _____ mg/L? <i>Attach those results and submit them</i>	Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> YES <input checked="" 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>	Date continuous monitoring equipment failed: / / Date it was returned to service: / /

Printed Name: Dan Perkins	Title: Plant Supervisor	Operator Certification #: 2339 OR Small Groundwater System _____
Signature: 	Phone #: (541) 774-2742	
Date: 4/1/2023		