

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

System Name: Medford Water Commission

PWS ID#: OR 41-00513

Month/Year: **Dec, 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
12/01/23	12/01/2023 09:00 pm	Big Butte Springs	0.55	
12/02/23	12/02/2023 02:00 am	Big Butte Springs	0.26	
12/03/23	12/03/2023 01:00 pm	Big Butte Springs	0.44	
12/04/23	12/04/2023 04:00 am	Big Butte Springs	0.46	
12/05/23	12/05/2023 06:00 pm	Big Butte Springs	0.47	
12/06/23	12/06/2023 05:00 am	Big Butte Springs	0.45	
12/07/23	12/07/2023 06:00 am	Big Butte Springs	0.49	
12/08/23	12/08/2023 07:00 am	Big Butte Springs	0.54	
12/09/23	12/09/2023 06:00 pm	Big Butte Springs	0.53	
12/10/23	12/10/2023 07:00 am	Big Butte Springs	0.50	
12/11/23	12/11/2023 07:00 pm	Big Butte Springs	0.49	
12/12/23	12/12/2023 07:00 am	Big Butte Springs	0.40	
12/13/23	12/13/2023 09:00 am	Big Butte Springs	0.60	
12/14/23	12/14/2023 08:00 am	Big Butte Springs	0.59	
12/15/23	12/15/2023 03:00 pm	Big Butte Springs	0.58	
12/16/23	12/16/2023 12:00 am	Big Butte Springs	0.58	
12/17/23	12/17/2023 05:00 pm	Big Butte Springs	0.57	
12/18/23	12/18/2023 12:00 am	Big Butte Springs	0.57	
12/19/23	12/19/2023 10:00 am	Big Butte Springs	0.58	
12/20/23	12/20/2023 12:00 am	Big Butte Springs	0.58	
12/21/23	12/21/2023 12:00 am	Big Butte Springs	0.58	
12/22/23	12/22/2023 12:00 am	Big Butte Springs	0.58	
12/23/23	12/23/2023 12:00 am	Big Butte Springs	0.58	
12/24/23	12/24/2023 12:00 am	Big Butte Springs	0.58	
12/25/23	12/25/2023 01:00 am	Big Butte Springs	0.58	
12/26/23	12/26/2023 12:00 am	Big Butte Springs	0.58	
12/27/23	12/27/2023 10:00 pm	Big Butte Springs	0.57	
12/28/23	12/28/2023 12:00 am	Big Butte Springs	0.57	
12/29/23	12/29/2023 11:00 am	Big Butte Springs	0.58	
12/30/23	12/30/2023 12:00 am	Big Butte Springs	0.58	
12/31/23	12/31/2023 07:00 am	Big Butte Springs	0.58	

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	Date continuous monitoring equipment failed: / /
	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 it was returned to service: / /
Printed Name: Matt Severloh	Title: Plant Supervisor	Operator Certification #: 8480
Signature: <i>Matt Severloh</i>	Phone #: (541) 774-2743	OR
Date: 1/1/2024	Small Groundwater System _____	