

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

System Name: Medford Water Commission

PWS ID#: OR 41-00513

Month/Year: **Feb, 2025**

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
02/01/25	02/01/2025 12:00 am	Big Butte Springs	0.58	
02/02/25	02/02/2025 12:00 am	Big Butte Springs	0.58	
02/03/25	02/03/2025 12:00 am	Big Butte Springs	0.58	
02/04/25	02/04/2025 12:00 am	Big Butte Springs	0.58	
02/05/25	02/05/2025 11:00 pm	Big Butte Springs	0.46	
02/06/25	02/06/2025 12:00 am	Big Butte Springs	0.46	
02/07/25	02/07/2025 12:00 am	Big Butte Springs	0.56	
02/08/25	02/08/2025 01:00 am	Big Butte Springs	0.57	
02/09/25	02/09/2025 12:00 am	Big Butte Springs	0.57	
02/10/25	02/10/2025 01:00 pm	Big Butte Springs	0.56	
02/11/25	02/11/2025 12:00 am	Big Butte Springs	0.57	
02/12/25	02/12/2025 12:00 am	Big Butte Springs	0.58	
02/13/25	02/13/2025 12:00 am	Big Butte Springs	0.58	
02/14/25	02/14/2025 03:00 am	Big Butte Springs	0.58	
02/15/25	02/15/2025 09:00 am	Big Butte Springs	0.57	
02/16/25	02/16/2025 10:00 pm	Big Butte Springs	0.58	
02/17/25	02/17/2025 11:00 am	Big Butte Springs	0.56	
02/18/25	02/18/2025 04:00 pm	Big Butte Springs	0.56	
02/19/25	02/19/2025 01:00 am	Big Butte Springs	0.56	
02/20/25	02/20/2025 07:00 am	Big Butte Springs	0.56	
02/21/25	02/21/2025 12:00 am	Big Butte Springs	0.56	
02/22/25	02/22/2025 10:00 pm	Big Butte Springs	0.54	
02/23/25	02/23/2025 07:00 am	Big Butte Springs	0.51	
02/24/25	02/24/2025 07:00 pm	Big Butte Springs	0.54	
02/25/25	02/25/2025 12:00 am	Big Butte Springs	0.54	
02/26/25	02/26/2025 01:00 pm	Big Butte Springs	0.56	
02/27/25	02/27/2025 12:00 am	Big Butte Springs	0.57	
02/28/25	02/28/2025 12:00 am	Big Butte Springs	0.57	
		Big Butte Springs		
		Big Butte Springs		
		Big Butte Springs		

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

<p><b>GWS Serving 3,300 or Fewer</b></p> <p>If yes, did you monitor every four hours until the residual returned to _____ mg/L?</p> <p><i>Attach those results and submit them</i></p>	<p style="text-align: center;"><b>GWS Serving More Than 3,300</b></p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 65%;"> <p>Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>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</p> <p><i>Attach grab sample results and submit them with this form.</i></p> </td> <td style="width: 35%;"> <p>Date continuous monitoring equipment failed: / /</p> <p>Date it was returned to service: / /</p> </td> </tr> </table>	<p>Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO</p> <p>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</p> <p><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>
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<p>Printed Name: Matt Severloh</p> <p>Singnature: </p> <p>Date: 3/1/2025</p>	<p>Title: Plant Supervisor</p> <p>Phone #: (541) 774-2743</p> <p>Operator Certification #: 8480</p> <p style="text-align: center;">OR</p> <p>Small Groundwater System _____</p>		