

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

System Name City Of Oakridge

PWS ID# 41- 00582

Month/Year Aug / 2021 Entry Point: EPA

Wellfield

Required Minimum Residual 0.2 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	9:47Am	1, 2, 4 & 6	.53 mg/L	CME
2	8:55Am	# 2, 4+6	0.57 mg/L	CME
3	8:49Am	# 2, 4, 6	0.56 mg/L	CME
4	11:33Am	# 4	0.53 mg/L	CME
5	9:35Am	# 2, 4, 6	0.63 mg/L	CME
6	8:50Am	# 4	0.52 mg/L	CME
7	8:36Am	# 4	0.50 mg/L	CME
8	9:00Am	# 2, 4, 6	0.55 mg/L	CME
9	8:48Am	# 1, 2, 4, 6	0.49 mg/L	CME
10	9:26Am	# 4	0.53 mg/L	CME
11	8:56Am	# 1, 2, 4	0.57 mg/L	CME
12	8:29Am	# 1, 4	0.63 mg/L	CME
13	9:40Am	# 1+4	0.66 mg/L	CME
14	9:00Am	# 1, 2, 4+6	0.67 mg/L	CME
15	8:40Am	# 1, 2, 4+6	0.64 mg/L	CME
16	9:24Am	# 1, 4	0.71 mg/L	CME
17	9:19Am	# 2, 4 & 6	0.73 mg/L	CME
18	10:15Am	# 4	0.61 mg/L	CME
19	9:35Am	# 4	0.60 mg/L	CME
20	10:20Am	# 2, 4, 6	0.60 mg/L	CME
21	11:15Am	# 4	0.68 mg/L	CME
22	8:00Am	# 4	0.61 mg/L	CME
23	8:15Am	# 4	0.59 mg/L	CME
24	8:24Am	# 1+4	0.66 mg/L	CME
25	8:21Am	# 2, 4, 6	0.61 mg/L	CME
26	9:20Am	# 4	0.67 mg/L	CME
27	8:30Am	# 2, 4	0.59 mg/L	CME
28	9:43Am	# 4	0.59 mg/L	CME
29	9:47Am	# 1, 2, 4	0.66 mg/L	CME
30	9:12Am	# 2, 4, 6	0.58 mg/L	CME
31	9:19Am	# 2, 4, 6	0.60 mg/L	CME

Was the chlorine residual ever less than the required minimum residual of 0.2 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

If yes, did you monitor every four hours until the residual returned to _____ mg/L?

Attach those results and submit them with this form.

GWS Serving More Than 3,300

Did continuous monitoring equipment fail at any time this reporting month? Yes No

If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service? Yes No

Attach grab sample results and submit them with this form.

Date continuous monitoring equipment failed:

/ /

Date it was returned to service:

/ /

Printed Name: Floyd Stalamp

Title: UTILITY WORKER III

Operator Certification #: T-08798

Signature: Floyd Stalamp

Phone #: (541) 974-3942

OR

Date: 9/1/2021

Small Groundwater System

DWP
PO Box 14450