

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

System Name City Of Oakridge

PWS ID# 41- 00582

Month/Year Dec / 2024 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				
2	8:39 am	# 2, 4, 6	0.58 mg/L	CME
3	9:44	# 4	0.45 mg/L	CME
4	9:23 am	# 4	0.46 mg/L	CME
5	9:17 am	# 2, 4, 6	0.47 mg/L	CME
6	9:55 am	# 2, 4, 6	0.45 mg/L	CME
7	9:58 am	# 4	0.37 mg/L	CME
8	10:00 am	# 4	0.46 mg/L	CME
9	10:00 am	# 4	0.44 mg/L	C.M.E
10	9:40 am	# 2, 4, 6	0.51 mg/L	C.M.E
11	9:00 am	# 4	0.45 mg/L	C.M.E
12	8:25 am	# 2, 4, 6	0.43 mg/L	C.M.E
13	9:00 am	# 4	0.38 mg/L	C.M.E
14	9:35 am	2, 4, 6	0.34 mg/L	C.M.E
15	9:38 am	# 4	0.35 mg/L	C.M.E
16	9:13 am	# 4	0.35 mg/L	CME
17	9:58 am	# 4	0.47 mg/L	CME
18	8:41 am	# 2, 4	0.62 mg/L	CME
19	9:00 am	# 4	0.72 mg/L	CME
20	1:54 pm	# 2, 4, 6	0.91 mg/L	CME
21	9:30 am	# 4	1.02	CME
22	9:30 am	# 4	0.88	CME
23	9:10 am	# 4	0.90	C.M.E
24	9:10 am	# 4	0.78	C.M.E
25	10:20 am	# 4	1.12	C.M.E
26	8:16 am	# 4	0.63	CME
27	9:15 am	# 4	0.64	CME
28	10:25	# 4	0.90	CME
29	11:30 am	# 2, 4, 6	1.12	CME
30	9:00 am	# 4	0.82	C.M.E
31	9:37 am	# 6	0.83	C.M.E

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: Travess Hower

Title: Crew Lead/PRC

Operator Certification #: 933316

Signature: Travess Hower

Phone #: (541) 852-0821

Date: 12 131 2024

OR

Small Groundwater System

DWP