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

	m Name	City Of Oa	C				- 00582	
Month	Year mA	y / 2025 Entry	Point: EPA	Wellfiel	d Req	uired Minimu	um Residual          0 <sub>e</sub> 2 mg/L	
Date	Time	Source(s	) in use	Lowest fre residual at e distribution sy	ntry point to		Notes	
1	8:07			0.5	1 righ		C.M.E	
2	9:09	# 2,264		0.80	5 AGL		G.M.E	
3	8:50	44		0.50	MGL		C.M.F	
4	9:10	#4		0,50	the second se		L.M.E.	
5	9:00	74 Au		0.75			c.m.s	
6 7	9:10	D4		0,72	mgL		C.M.E	
8	8:18		×	1,10	mgl		c.m.E	
9	8:39	#4	-	0.95	mgl		C.M.E	
10	8:39	41		0.05	0		C.M.E	
11	9137	#24.6		1.12	MAL	C	ME	
12	8:57	24.6		110	mal	1	CHE	
	9:10	4		0.85	and the second se		cime	
14	8:15	4,2,6		0.91			C.M.E	
	8:20	42.61		0.97	mac		emit	
	9:30	4		0,85	MGL		C.M.E	
	9'09	1426		0,94	MGL	C	.m.E	
18	8:40	412.6		0.84	MgL	C	.M.E	
19 20	8:40	E U		0.76	mgz	6	c, m.E	
20	8:21	24		0.83	MgL		C.M.E.	
22	9:00	14		0.95	mge		C.M.E	
	9:29	2,4,6		0.85	mgl		C.M.E	
24	9:00	4		0.86			ent	
25	10:04	24.6		1.09	MGL		c.m.E	
26	9:32	2,46		1.02	mac		c.m.E	
27	9:01	4		0.82	Mal		C.M.E	
	8:55	4		0.80	mal		C.M.E	
29	8:30	6		0.82	MGL		C.W.E	
30 31	10:00	24		0,85	MGL		C. M.E	
Nas the o		dual ever less than the			mg/L?	Yes 🗌 No	C, M, E	
		ongest time period unt	ii the required leve		hours			
	-	,300 or Fewer			Serving Mo	•	800	
If yes, did you monitor every four hours Did continuous until the residual returned to mg/L? reporting mont				monitoring equipment fail at any time this ? □ Yes ☑ No			Date continuous monitoring equipment failed:	
Attach those results and submit them with his form.				b samples collected every four hours until the itoring equipment was returned to service?			/ / Date it was returned to	
			Attach grab sam			n this form.	service: / /	
inted Na	me: Clin	+ Whitney	Title	D.R.C		Operator	Operator Certification #: 1-06971	
	Pli		**	e #: (541) 554-7698				
ate: 6	1	2025		e #: (5 CTT) 5 5 9 7 7 (CZ OR Small Groundwater System				
	DWP		,	and a second	State of the second			