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

System Name City Of Oakridge PWSID# 41- 00582								
Mont	h/Year Jal	y / 2025 Entry	Point: EPA	Wellfield Required Minimum Residual 0₀2 m			0 ₀ 2 mg/L	
Date	Time	Source(s) in use		Lowest free chlorine residual at entry point to distribution system (mg/L)		Notes		
1	8:30	2/4		. 86, mgL		cimit		
2	8:50	9		.74 mg/-			c.m,e	Matter.
3	9:17	2/4/6		.51 mg1			C.Mire	
5	7:18	y		.51 MgL			CIM.E.	,
6	7.10			. 45	MyL	C.M.E.		
7	8:46	2,46	:8	, 915	MAL	C.M.E		
8	9:10 246			74	Mal	cne		
9				67 mg(cme	
10	8:15	14		37	mal		CME	
11	9:00	9:00 1.4.6			0.96 266		CWE	
12	7:15	, A,		0.85 mgL		CMF		
13	7:30	4		0.87	- mgL		cm5	
14	9:35	1,2,4		0.76	WAL		CWE	
15	8:30	2,4		0.79 mgZ		6. W. 6		
16	9:00An		0.75 mgL		c.m.E			
17 18				0.68 1/2			C.M.E.	
19				0.84 MZ			C.M.E.	
20	7:31	2/4/		0.67 mgL		CME		
21	7:30	2,46		0.76 hgL		CNE		
22	9:02	2.4.6		M L F	mgl		cne	
23	7:49	H		0.58 mg			(ne	
24	9:24	4	* A	0.60	V		CMe	
25	9:40	1,01,6		0.71	mgy		CMP	7.55
26	8:40			0.60	MOL		CME	
	8:18 2.46			0.7/166		C	MF	
28	8:30	2,4,5		6.47		- (ME	
29 30	11:40	2,4,6		93		<u>C</u> /	ne	
31	8:50	246		·	1	C	ne	
Comment of the last of the las	0 1	dual ever less than the	required minimum	1.40	mg/		n K	
Was the chlorine residual ever less than the required minimum residual of mg/L? Yes No If yes, what was the longest time period until the required level was restored?								
If yes, did you monitor every four hours Did continuous n				GWS Serving More Than 3, monitoring equipment fail at any time this? Yes No			Date continuous	monitoring
							equipment failed	d:
The state of the s				ab samples collected every four hours until the nitoring equipment was returned to service? Yes No			Date it was returned to service:	
Attach grab s				mple results and submit them with this form.			/ /	
rinted N	ame: Clin	+ whitney	Title:	D D a			Operator Certification #: 1-0897(
gnature: Chita I Lilia Phi				e#:(541)554-	7698	OR		
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ate: 8 / 3 / 2025 Small Groundwater System								