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

System Name HILAND WC - ILLAHE GOLF CLUB ESTATES PWS ID# 4 1 00755						
Month/Year May/2021 Entry Point: A Re					quired Minimum Residual 0.33 mg/L	
Date	Time	Source(s) in use		Lowest free chlorine residual at entry point to distribution system (mg/L		Notes
1	4:00P	Well 1&2		0.74		
2	4:00P	Well 1&2		0.71		
3	4:00P	Well 1&2		0.67		
4	4:00P	Well 1&2		0.84		
5	4:00P	Well 1&2		0.91		
6	4:00P	Well 1&2		0.83		
7	4:00P	Well 1&2		0.66		
8	4:00P	Well 1&2		0.50		
9	4:00P	Well 1&2		0.64		
10	4:00P	Well 1&2		0.91		
11	4:00P	Well 1&2		1.33		
12	4:00P	Well 1&2		1.39		
13	4:00P	Well 1&2		1.58		
14	4:00P	Well 1&2		1.77		
15	4:00P	Well 1&2		1.41		
16	4:00P	Well 1&2		1.47		
17	4:00P	Well 1&2		1.51		
18	4:00P	Well 1&2		1.56		
19	4:00P	Well 1&2		1.53		
20	4:00P	Well 1&2		1.65		
21	4:00P	Well 1&2		1.28		
22	4:00P	Well 1&2		0.94		
23	4:00P	Well 1&2		1.24		
24	4:00P	Well 1&2		1.37		
25	4:00P	Well 1&2		1.57		
26	4:00P	Well 1&2		1.68		
27	4:00P	Well 1&2		1.62		
28	4:00P	Well 1&2		1.65		
29	4:00P	Well 1&2		1.21		
30	4:00P	Well 1&2		1.08		
31 4:00P Well 1&2 0.94						
Was the chlorine residual ever less than the required minimum residual of 0.33 mg/L?  Yes  No						
If yes, what was the longest time period until the required level was restored? hours – If > 4 hours, Drinking Water Program to be notified by end of next business day.						
GWS Serving 3,300 or Fewer				GWS Serving More Than 3,300		
If yes, did you monitor every four hours			Did continuous monitoring equipment fail at any time this    Date continuous monitoring equipment			Date continuous monitoring
until the residual returned to mg/L				n? ∐ Yes ÖÖNo N/A	•	equipment failed:
as required?			If yes, were grab samples collected every four hours until the / /			
Attach those results and submit them with			continuous monitoring equipment was returned to service as Date it was returned to			
this form.			required? $\square$ Yes $\square$ No $N/A$ service:			
N/A  Attach grab sample results and submit them with this form.						
Printed Name: Melvin Olson			Title: DRC		Operator Certification #: 3413	
Signatur	e:	Mel Olso	Phone #: (503) 312-9206		OR	
Date: 06 / 06 / 2021 Small Groundwater Syste						roundwater System