

City of Manzanita

System Name		City Of Wheeler		PWS ID# 41 00952	
Month/Year:		Aug-21		Entry Point: EP-C	
				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	8:00 AM	Foss Road Wells 1 & 2	0.39	Normal Operations	
2	8:00 AM	Foss Road Wells 1 & 2	0.39	Normal Operations	
3	8:00 AM	Foss Road Wells 1 & 2	0.49	Normal Operations	
4	8:00 AM	Foss Road Wells 1 & 2	0.48	Normal Operations	
5	8:00 AM	Foss Road Wells 1 & 2	0.49	Normal Operations	
6	8:00 AM	Foss Road Wells 1 & 2	0.48	Normal Operations	
7	8:00 AM	Foss Road Wells 1 & 2	0.49	Normal Operations	
8	8:00 AM	Foss Road Wells 1 & 2	0.47	Normal Operations	
9	8:00 AM	Foss Road Wells 1 & 2	0.48	Normal Operations	
10	8:00 AM	Foss Road Wells 1 & 2	0.47	Normal Operations	
11	8:00 AM	Foss Road Wells 1 & 2	0.43	Normal Operations	
12	8:00 AM	Foss Road Wells 1 & 2	0.46	Normal Operations	
13	8:00 AM	Foss Road Wells 1 & 2	0.47	Normal Operations	
14	8:00 AM	Foss Road Wells 1 & 2	0.48	Normal Operations	
15	8:00 AM	Foss Road Wells 1 & 2	0.46	Normal Operations	
16	8:00 AM	Foss Road Wells 1 & 2	0.41	Normal Operations	
17	8:00 AM	Foss Road Wells 1 & 2	0.48	Normal Operations	
18	8:00 AM	Foss Road Wells 1 & 2	0.43	Normal Operations	
19	8:00 AM	Foss Road Wells 1 & 2	0.41	Normal Operations	
20	8:00 AM	Foss Road Wells 1 & 2	0.39	Normal Operations	
21	8:00 AM	Foss Road Wells 1 & 2	0.31	Normal Operations	
22	8:00 AM	Foss Road Wells 1 & 2	0.37	Normal Operations	
23	8:00 AM	Foss Road Wells 1 & 2	0.46	Normal Operations	
24	8:00 AM	Foss Road Wells 1 & 2	0.47	Normal Operations	
25	8:00 AM	Foss Road Wells 1 & 2	0.50	Normal Operations	
26	8:00 AM	Foss Road Wells 1 & 2	0.42	Normal Operations	
27	8:00 AM	Foss Road Wells 1 & 2	0.40	Normal Operations	
28	8:00 AM	Foss Road Wells 1 & 2	0.39	Normal Operations	
29	8:00 AM	Foss Road Wells 1 & 2	0.42	Normal Operations	
30	8:00 AM	Foss Road Wells 1 & 2	0.39	Normal Operations	
31	8:00 AM	Foss Road Wells 1 & 2	0.42	Normal Operations	
Was the chlorine residual ever less than the required minimum residual of 0.2mg/L <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, what was the longest time period until the required level was restored?					
GWS Serving 3,300 or Fewer		GWS Serving More than 3,300			
If yes, did you monitor every four until the residual returned to 0.02 mg/L? Attach those results and submit them with this form.		Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service? <input type="checkbox"/> YES <input type="checkbox"/> NO Attach grab sample results and submit them with this form.		Date continuous monitoring equipment failed: / / Date it was returned to service: / /	
Printed Name: Daniel L Weitzel Signature: Daniel L Weitzel Date: 9/8/2021		Title: Treatment DRC Phone#: (503) 812-2727		Operator Certification #: WD1#7191 / WT2#08183 OR Small Groundwater System	