

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

System Name Leafwood Water Assoc PWS ID# 41 00993
 Month/Year 1/24 Entry Point: Source AA Well 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	9:20 am		0.2	
2	10:10	am	0.2	RECEIVED FEB 2 2024 Certification Drinking Water Services
3	9:10	am	0.2	
4	10:05	am	0.2	
5	8:45	am	0.25	
6	8:30	am	0.3	
7	5:10	p.m.	0.2	
8	8:40	am	0.2	
9	9:00	am	0.25	
10	9:10	am	0.25	
11	11:00	am	0.3	
12				
13		Power outage ↓		
14				
15				
16				
17				
18				
19				
20				
21				
22				
23				
24				
25				
26	9:10	am	0.3	
27	8:50	am	0.3	
28	9:30	am	0.3	
29	8:12	am	0.25	
30	2:50	pm	0.2	
31	8:20	am	0.3	

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 - If > 4 hours, Drinking Water Program to be notified by end of next business day.

<p>GWS Serving 3,300 or Fewer</p> <p>If yes, did you monitor every four hours until the residual returned to <u>0.2</u> mg/L as required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Attach those results and submit them with this form.</p>	<p>GWS Serving More Than 3,300</p> <p>Did continuous monitoring equipment fail at any time this reporting month? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>Attach grab sample results and submit them with this form.</p>	<p>Date continuous monitoring equipment failed: _____/_____/_____</p> <p>Date it was returned to service: _____/_____/_____</p>
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Printed Name: Alix Geller Title: _____ Operator Certification #: N/A
 Signature: Alix Geller Phone #: (707) 535-6536 OR
 Date: 1/31/24 Small Groundwater System