

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

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JUL 08 2021  
Data Mgmt & Compliance  
Drinking Water Program

System Name ROGUE RIVER PINES PACK PWS ID# 41 01017  
Month/Year 06/21 Entry Point: STORAGE TANK BLDG Required Minimum Residual 0.4 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	3:30PM	WELL #2	0.5	
2	4:35PM	WELL #2	0.5	
3	12:30PM	WELL #2	0.4	
4	4:50AM	WELL #2	0.5	
5	3:00AM	WELL #2	0.4	
6	1:35PM	WELL #2	0.5	
7	4:20PM	WELL #2	0.5	
8	4:10PM	WELL #2	0.4	
9	2:35PM	WELL #2	0.5	
10	4:50AM	WELL #2	0.5	
11	1:25PM	WELL #2	0.5	
12	10:15PM	WELL #2	0.6	
13	12:40PM	WELL #2	0.5	
14	11:10AM	WELL #2	0.5	
15	4:00PM	WELL #2	0.4	
16	12:15PM	WELL #2	0.5	
17	10:20PM	WELL #2	0.5	
18	3:35PM	WELL #2	0.5	
19	10:45AM	WELL #2	0.4	
20	2:25PM	WELL #2	0.5	
21	10:30AM	WELL #2	0.5	
22	9:40AM	WELL #2	0.5	
23	3:50PM	WELL #2	0.5	
24	4:20PM	WELL #2	0.4	
25	1:10 PM	WELL #2	0.4	
26	11:25PM	WELL #2	0.5	
27	2:10PM	WELL #2	0.4	
28	10:35AM	WELL #2	0.5	
29	4:50PM	WELL #2	0.4	
30	3:35PM	WELL #2	0.5	
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Was the chlorine residual ever less than the required minimum residual of 0.4 mg/L?  Yes  No  
If yes, what was the longest time period until the required level was restored? \_\_\_\_\_ hours

**GWS Serving 3,300 or Fewer**  
If yes, did you monitor every four hours until the residual returned to \_\_\_\_\_ mg/L?  
 Yes  No  
Attach those results and submit them with this form.

**GWS Serving More Than 3,300**  
Did continuous monitoring equipment fail at any time this reporting month?  Yes  No  
If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service?  
 Yes  No  
Attach grab sample results and submit them with this form.

Date continuous monitoring equipment failed: \_\_\_\_\_  
Date it was returned to service: \_\_\_\_\_

Printed Name: ERNEST G PRITCHETT SR Title: OWNER  
Signature: Ernest G Pritchett Sr Phone #: (541) 582-1374  
Date: 07/05/21

Operator Certification #: \_\_\_\_\_  
OR  
Small Groundwater System