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

System Name WESTERN HILLS MH ESTATES PWS ID# 4 1 01172						
Month/Year 03/2025 Entry Point: D Required Minimum Residual 0.40 mg/L						
Date	Time Source(s) i		n use	Lowest free chlorine residual at entry point to distribution system (mg/L	Notes	
1	11:57P Wells 5&6			1.81		
2	03:57P	Wells 5&6		1.71		
3	11:57P	Wells 5&6		1.58		
4	07:57A	Wells 5&6		1.51		
5	08:02P	Wells 5&6		1.46		
6	08:03P	Wells 5&6		1.29		
7	08:03P	Wells 5&6		1.15		
8	12:08P	Wells 5&6		1.00		
9	05:08P	Wells 5&6		0.86		
10	11:59P	Wells 5&6		0.72		
11	08:01P	Wells 5&6		0.67		
12	03:32A	Wells 5&6		0.41		
13	11:56P	Wells 5&6		2.73		
14	09:17P	Wells 5&6		2.26		
15	05:18P	Wells 5&6		1.98		
16	09:20P	Wells 5&6		1.67		
17	05:23P	Wells 5&6		1.35		
18	09:24P	Wells 5&6		1.07		
19	09:30P	Wells 5&6		0.89		
20	11:51P	Wells 5&6		0.70		
21	11:22P	Wells 5&6		0.59		
22	11:57P	Wells 5&6		0.46		
23	11:58P	Wells 5&6		0.40		
24	05:18P	Wells 5&6		0.60		
25	09:18A	Wells 5&6		0.45		
26	01:18A	Wells 5&6		0.60		
27	05:38A	Wells 5&6		0.82		
28	05:39A	Wells 5&6		0.83		
29	09:43A	Wells 5&6		0.83		
30	09:45A	Wells 5&6		0.83		
31	01:45A	Wells 5&6		0.82		
Was the chlorine residual ever less than the required minimum residual of 0.40 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 until the residual returned to 0.40 mg/L as required? Yes No			Did continuous	Did continuous monitoring equipment fail at any time this Date continuous monitoring		
				n? Yes No	my unio uno	equipment failed:
Attach those results and submit them with			If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as Date it was returned to			
this form.			required? Yes No service:			
			•	ttach grab sample results and submit them with this form.		
Printed Name: Curtis Olson			Title	: Compliance Manager	operator Certification #: 216644	
Signature: Curtis Olson			Phone #: (503) 554-8333		OR	
Date: 0/	1 / 08 / 2025				Small Gr	roundwater System