

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 05/2025

Entry Point: D

Required Minimum Residual 0.40 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	03:09P	Wells 5&6	1.44	
2	11:09A	Wells 5&6	1.38	
3	11:09P	Wells 5&6	1.25	
4	11:09A	Wells 5&6	1.16	
5	07:09A	Wells 5&6	1.08	
6	07:10A	Wells 5&6	1.07	
7	11:10A	Wells 5&6	1.06	
8	12:40P	Wells 5&6	2.26	
9	09:41A	Wells 5&6	3.16	
10	04:01A	Wells 5&6	3.51	
11	06:41P	Wells 5&6	0.71	
12	03:11A	Wells 5&6	1.21	
13	11:11P	Wells 5&6	0.99	
14	11:51P	Wells 5&6	0.64	
15	11:01A	Wells 5&6	0.53	
16	04:01A	Wells 5&6	0.48	
17	03:11A	Wells 5&6	1.80	
18	12:01A	Wells 5&6	2.77	
19	11:51P	Wells 5&6	2.67	
20	11:31P	Wells 5&6	2.52	
21	11:11P	Wells 5&6	2.13	
22	11:11P	Wells 5&6	1.58	
23	11:11P	Wells 5&6	1.38	
24	07:11P	Wells 5&6	1.29	
25	03:11P	Wells 5&6	1.28	
26	03:11A	Wells 5&6	1.28	
27	11:11A	Wells 5&6	1.23	
28	07:11A	Wells 5&6	1.30	
29	11:11P	Wells 5&6	1.30	
30	11:51A	Wells 5&6	0.47	
31	03:11A	Wells 5&6	1.59	

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?
notified by end of next business day.

hours – If > 4 hours, Drinking Water Program to be

GWS Serving 3,300 or Fewer

If yes, did you monitor every four hours until the residual returned to 0.40 mg/L as required? ☐ 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 as required? ☐ 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: Curtis Olson

Signature: Curtis Olson

Date: 06 / 08 / 2025

Title: Operations Manager

Phone #: (503) 554-8333

Operator Certification #: 216644

OR

Small Groundwater System ☐