

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	11:11A	Wells 5&6	2.10	
2	11:11A	Wells 5&6	1.95	
3	11:11P	Wells 5&6	1.78	
4	11:11A	Wells 5&6	1.62	
5	03:11P	Wells 5&6	1.54	
6	11:11P	Wells 5&6	1.50	
7	11:11A	Wells 5&6	1.27	
8	11:11A	Wells 5&6	1.39	
9	11:11A	Wells 5&6	1.35	
10	11:11A	Wells 5&6	0.98	
11	12:11A	Wells 5&6	0.71	
12	03:11A	Wells 5&6	1.35	
13	03:11A	Wells 5&6	1.45	
14	03:11P	Wells 5&6	0.84	
15	12:11A	Wells 5&6	1.02	
16	04:01P	Wells 5&6	2.55	
17	11:11P	Wells 5&6	1.37	
18	11:11P	Wells 5&6	1.14	
19	09:36A	Wells 5&6	0.75	
20	11:11A	Wells 5&6	1.06	
21	11:11P	Wells 5&6	1.05	
22	11:11P	Wells 5&6	0.90	
23	03:11A	Wells 5&6	0.92	
24	11:11A	Wells 5&6	1.04	
25	04:40A	Wells 5&6	0.99	
26	09:20P	Wells 5&6	0.72	
27	12:00P	Wells 5&6	0.46	
28	12:00A	Wells 5&6	2.89	
29	10:50P	Wells 5&6	2.77	
30	11:30P	Wells 5&6	2.56	
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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**

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

Title: Operations Manager

Operator Certification #: 216644

Signature: Curtis Olson

Phone #: (503) 554-8333

OR

Date: 07 / 10 / 2025

Small Groundwater System ☐