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

System Name CSWA CHEHALEM SPRINGS PWS ID# 4 1 01518						)1518
Month/Year 12/2022 Entry Point: EP-A (Skelton) Required Minimum Residual 0.20 mg/L						
Date	Time	Source(s) i	nuse	Lowest free chlorine residual at entry point to distribution system (mg/L		Notes
1	8:00 A Skelton Spring			0.42		
2	8:00 A	8:00 A Skelton Spring		0.58		
3	8:00 A	Skelton Spring		1.29		
4	8:00 A	Skelton Spring		0.87		
5	8:00 A	Skelton Spring		0.37		
6	8:00 A	Skelton Spring		0.32		
7	8:00 A	Skelton Spring		1.61		
8	8:00 A	Skelton Spring		0.67		
9	8:00 A	Skelton Spring		0.39		
10	8:00 A	Skelton Spring		0.61		
11	8:00 A	Skelton Spring		0.54		
12	8:00 A	Skelton Spring		0.36		
13	8:00 A	Skelton Spring		0.32		
14	8:00 A	Skelton Spring		0.45		
15	8:00 A	Skelton Spring		0.43		
16	8:00 A	Skelton Spring		0.37		
17	8:00 A	Skelton Spring		0.32		
18	8:00 A	Skelton Spring		0.29		
19	8:00 A	Skelton Spring		0.54		
20	8:00 A	Skelton Spring		1.01		
21	8:00 A	Skelton Spring		0.98		
22	8:00 A	Skelton Spring		0.28		
23	8:00 A	Skelton Spring		0.32		
24	8:00 A	Skelton Spring		0.31		
25	8:00 A	Skelton Spring		0.29		
26	8:00 A	Skelton Spring		0.30		
27	8:00 A	Skelton Spring		0.26		
28	8:00 A	Skelton Spring		2.49		
29	8:00 A	Skelton Spring		2.44		
30	8:00 A	Skelton Spring		2.41		
31	8:00 A	Skelton Spring		2.22		
Was the chlorine residual ever less than the required minimum residual of 0.20 mg/L? Yes No						
If yes, what was the longest time period until the required level was restored? $If > 4$ 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 mg/L as required? Yes No						Date continuous monitoring equipment failed:
		_	If yes, were grab samples collected every four hours until the			
Attach those results and submit them with			continuous monitoring equipment was returned to service as Date it was returned to			
this form. N/A			required? Yes No N/A service:			
Attach grab sample results and submit them with this form.						
Printed I	Name: Aaror	n Olson	Title: DRC		Operator Certification #: T-09128, D-08773	
Signatur	e:	acon Olse	2 Phone #: (503) 554-8333		OR	
Date: 0	1 / 05 / 2023		. ,		Small Groundwater System	