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

System Name CSWA Chehalem Springs PWS ID# 4 1 01518						
Month/Year 04/2023 Entry Point: EP-A (Skelton) Required Minimum Residual 0.20 mg/L						
Date	Time	Source(s) i	Lowest free chlor residual at entry po distribution system (
1	11:55P	11:55P Skelton Spring		2.32	-	
2	08:25A	Skelton Spring		1.70		
3	03:45P	Skelton Spring		2.20		
4	09:25P	Skelton Spring		2.01		
5	08:40P	Skelton Spring		0.38		
6	11:30A	Skelton Spring		0.23		
7	12:20P	Skelton Spring		0.37		
8	09:40P	Skelton Spring		2.56		
9	04:50A	Skelton Spring		1.58		
10	11:55P	Skelton Spring		0.73		
11	08:00A	Skelton Spring		0.07		
12	09:25P	Skelton Spring		0.88		
13	11:55P	Skelton Spring		0.24		
14	03:35A	Skelton Spring		0.23		
15	04:30P	Skelton Spring		0.38		
16	11:20A	Skelton Spring		0.38		
17	08:15A	Skelton Spring		4.57		
18	11:55P	Skelton Spring		3.43		
19	02:30P	Skelton Spring		0.58		
20	12:00P	Skelton Spring		0.10		
21	12:00A	Skelton Spring		0.01		
22	09:35A	Skelton Spring		1.39		
23	10:50P	Skelton Spring		0.79		
24	11:30P	Skelton Spring		0.28		
25	06:55A	Skelton Spring		0.24		
26	05:35P	Skelton Spring		0.00		
27	08:00P	Skelton Spring		5.23		
28	10:00P	Skelton Spring		1.35		
29	01:50A	Skelton Spring		1.60		
30	03:10P	Skelton Spring		1.14		
31						
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? 48 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 0.2 mg/L as required?			Did continuous	_		Date continuous monitoring
			Did continuous monitoring equipment fail at any time this reporting month? Yes No			equipment failed:
						1 1
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 Da			Date it was returned to
this form.			_			service:
			Attach grab sample results and submit them with this form.			
Printed Name: JJ Olson			Title: Compliance Manager		Operator Certification #: 766039	
Signature	e:	Jeffrey Ol	2000 Phone #: (503) 554-8333		OR	
•	5 / 08 / 2023	1W 8		, , , , , , , , , , , , , , , , , , , ,	Small G	roundwater System 🗍