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 02/2024 Entry Point: EP-A (Skelton) Required Minimum Residual 0.20 mg/L						
Date	Time	Source(s) i	n use	Lowest free chlorine residual at entry point to distribution system (mg/L)		Notes
1	08:20P	Skelton Spring		1.18		
2	04:50A	Skelton Spring		0.67		
3	09:10P	Skelton Spring		0.84		
4	04:00P	Skelton Spring		0.59		
5	01:25A	Skelton Spring		0.62		
6	11:10A	Skelton Spring		0.82		
7	11:15A	Skelton Spring		0.82		
8	10:10P	Skelton Spring		0.82		
9	12:00A	Skelton Spring		0.95		
10	05:10P	Skelton Spring		0.89		
11	03:35P	Skelton Spring		0.88		
12	09:25P	Skelton Spring		0.84		
13	09:50P	Skelton Spring		0.80		
14	11:30P	Skelton Spring		0.89		
15	10:50P	Skelton Spring		0.92		
16	11:05A	Skelton Spring		0.81		
17	06:55P	Skelton Spring		0.87		
18	08:20P	Skelton Spring		0.90		
19	05:50P	Skelton Spring		0.64		
20	05:45P	Skelton Spring		1.11		
21	11:45P	Skelton Spring		0.69		
22	01:45A	Skelton Spring		0.63		
23	11:10P	Skelton Spring		0.91		
24	07:30P	Skelton Spring		0.58		
25	12:10A	Skelton Spring		0.65		
26	06:20P	Skelton Spring		0.50		
27	08:15P	Skelton Spring		1.95		
28	09:00P	Skelton Spring		1.30		
29	03:001 08:15P	Skelton Spring		1.43		
30	00.101			1.40		
30						
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? hours – <u>If > 4 hours, Drinking Water Program to be</u> notified by end of next business day.						
	-		GWS Serving More Than 3,300			1
If yes, did you monitor every four hours until the residual returned to 0.2 mg/L as required? Yes No Attach those results and submit them with this form.			reporting month	monitoring equipment fail at a ?		Date continuous monitoring equipment failed:
			If yes, were grab samples collected every four hor continuous monitoring equipment was returned to required? Yes No Attach grab sample results and submit them with		ed to service as	Date it was returned to service:
Printed I	Name: JJ Ols		Title: Compliance Manager		Operator Certification #: 766039	
Signatur	e:	Jeffrey Ol	aon Phone #: (503) 554-8333		OR	
Date: 03	3 / 09 / 2024	100			Small G	roundwater System 🗌