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

| System Name McKenzie Ridge Subdivision PWS ID# 4 1 06095 | | | | | | 6095 |
|--|-------------------|--------------|--|--|-------------------------------------|----------------------------|
| Month/Year 6/2024 Entry Point: WTP-A Required Minimum Residual 0.20 m | | | | | | Residual 0.20 mg/L |
| Date | Time Source(s) ir | | n use | Lowest free chlorine residual at entry point to distribution system (mg/L) | | Notes |
| 1 | 0800 Well # | | 1 | 0.20 Onsite HOA contact of | | contact data collection |
| 2 | 0800 | Well # | 1 | 0.20 | Onsite HOA contact data collection | |
| 3 | 0800 | Well # | 1 | 0.20 | Onsite HOA contact data collection | |
| 4 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 5 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 6 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 7 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 8 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 9 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 10 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 11 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 12 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 13 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 14 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 15 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 16 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 17 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 18 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 19 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 20 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 21 | 0800 | Well #1 | | 0.33 | Inspection/Data collection/MTR read | |
| 22 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 23 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 24 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 25 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 26 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 27 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 28 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 29 | 0800 | Well #1 | | 0.20 | Onsite HOA contact data collection | |
| 30 | 0800 | Well # | 1 | 0.20 | Onsite HOA | contact data collection |
| | | | | | | |
| 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 – 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 | | | | | | |
| | - | | Did continuous monitoring equipment fail at an | | - | Date continuous monitoring |
| If yes, did you monitor every four hours until the residual returned to mg/L as required? Yes No | | | reporting month? Yes No | | | equipment failed: |
| · <u> </u> | | | | b samples collected every fou | | |
| Attach those results and submit them with this form. | | | | nitoring equipment was returne | ed to service as | Date it was returned to |
| | | | required? Yes No | | with this former | service: |
| | | | Attach grab sample results and submit them w | | WITH THIS TOPM. | |
| Printed N | Name: Garre | n Friedemann | Title: Operations Manager | | Operator Certification #: 609860 | |
| Signatur | e: | | Phone #: (541) 505-9968 | | OR | |
| Date: 7 | / 08 / 2024 | | | | Small Gr | roundwater System 🗌 |

Return by 10th of following month by either email <u>dwp.dmce@state.or.us</u>; fax 971-673-0694; or mail to Drinking Water Services, PO Box 14350, Portland, OR 97293-0350.

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The onsite contact for HOA measured a consistent 0.20mg/L free chlorine residual the entire month of June. A 0.33 mg/L free chlorine residual was measured at the pumphouse during the monthly site inspection/meter reading event 6/21/2024. An adjustment was made to the dosing pump during that inspection to increase the dosing rate for chlorine. The distribution lines were flushed 7/1/24 to bring up the distribution chlorine residual. A 0.60mg/L was measured at our site contacts residence on 7/2/2024 after the distribution lines were flushed. Increased monitoring will take place to ensure that the distribution chlorine residual stays above the 0.20mg/L minimum.