

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

System Name Birch Creek Golf Course

PWS ID# 4190240

Month/Year 05 123 Entry Point: EP-A for well

Required Minimum Residual 0.3 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1		Well UMAT 300/301		Was absent from Birch Creek 4/28-5/4
2		Well UMAT 300/301		
3		Well UMAT 300/301		
4		Well UMAT 300/301		
5	8:17	Well UMAT 300/301	1.41	Added chlorine & water
6	10:06	Well UMAT 300/301	1.36	
7	7:33	Well UMAT 300/301	1.47	
8	9:04	Well UMAT 300/301	1.31	
9	9:00	Well UMAT 300/301	1.4	
10	9:00	Well UMAT 300/301	1.52	
11	8:30	Well UMAT 300/301	1.64	
12	10:00	Well UMAT 300/301	1.48	
13	9:30	Well UMAT 300/301	1.4	
14	9:22	Well UMAT 300/301	1.31	
15	8:46	Well UMAT 300/301	1.22	
16	7:00am	Well UMAT 300/301	1.27	
17	9:00	Well UMAT 300/301	1.49	
18	9:00	Well UMAT 300/301	2.13	added water After (5 gal)
19	10:30	Well UMAT 300/301	1.9	
20	9:22	Well UMAT 300/301	2.03	
21	8:04	Well UMAT 300/301	1.71	
22	6:35	Well UMAT 300/301	1.63	
23	7:00	Well UMAT 300/301	1.55	
24	8:11	Well UMAT 300/301	1.46	
25	9:16	Well UMAT 300/301	1.52	
26	10:30	Well UMAT 300/301	1.43	
27	8:00	Well UMAT 300/301	1.33	
28	1:14	Well UMAT 300/301	1.21	Added more water
29	7:09	Well UMAT 300/301	1.13	Still strong chlorine taste
30	8:00	Well UMAT 300/301	.73	
31	8:00	Well UMAT 300/301	.71	

Was the chlorine residual ever less than the required minimum residual of 0.3 mg/L? Yes No

If yes, what was the longest time period until the required level was restored? _____ hours - If > 4 hours, Drinking Water Services 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 0.3 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

Date continuous monitoring equipment failed: / /

If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? Yes No

Date it was returned to service: / /

Attach grab sample results and submit them with this form.

Printed Name: Chris Stoops

Title: Clubhouse Manager

Operator Certification #: n/a

Signature: 

Phone #: (541) 443-8874

OR

Date: Dec 11 2023

Small Groundwater System