

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

System Name Kellogg Springs Camp Christian Camp

PWS ID# 4 1 90490

Month/Year _ 08/2024

Entry Point: First User (Shop)

Required Minimum Residual .045 mg/

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	0626	AA,AB,AC,AF	.5	
2	0639	AA,AB,AC,AF	.7	
3	0705	AA,AB,AC,AF	.5	
4	0731	AA,AB,AC,AF	.5	
5	0941	AA,AB,AC,AF	.8	
6	0850	AA,AB,AC,AF	.5	
7	0653	AA,AB,AC,AF	.5	
8	0713	AA,AB,AC,AF	.8	
9	0848	AA,AB,AC,AF	.5	
10	0717	AA,AB,AC,AF	.6	
11	0758	AA,AB,AC,AF	.6	
12	0838	AA,AB,AC,AF	.5	
13	0841	AA,AB,AC,AF	.7	
14	0658	AA,AB,AC,AF	.5	
15	0754	AA,AB,AC,AF	.8	
16	0720	AA,AB,AC,AF	.9	
17	0731	AA,AB,AC,AF	.9	
18	0734	AA,AB,AC,AF	1.0	
19	0743	AA,AB,AC,AF	.9	
20	0743	AA,AB,AC,AF	1.0	
21	0750	AA,AB,AC,AF	1.0	
22	0741	AA,AB,AC,AF	.7	
23	0752	AA,AB,AC,AF	1.1	
24	0711	AA,AB,AC,AF	1.0	
25	0804	AA,AB,AC,AF	.9	
26	0742	AA,AB,AC,AF	.7	
27	1020	AA,AB,AC,AF	1.0	
28	1030	AA,AB,AC,AF	1.0	
29	1003	AA,AB,AC,AF	1.0	
30	0834	AA,AB,AC,AF	.6	
31	0854	AA,AB,AC,AF	.9	

Was the chlorine residual ever less than the required minimum residual of .4 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
 If yes, did you monitor every four hours until the residual returned to _____ 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
 If yes, were grab samples collected every four hours until the continuous monitoring equipment was returned to service as required? Yes No
Attach grab sample results and submit them with this form.

Date continuous monitoring equipment failed: _____ / _____ / _____
 Date it was returned to service: _____ / _____ / _____

Printed Name: Ed Humber Title: Facilities Director
 Signature: Edward Humber Phone #: (541) 459-1511ext462
 Date: 09 / 04 / 2024

Operator Certification #:
 OR
 Small Groundwater System