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

System Name		Rogue Valley Adventist Academy		PWS ID# 4 1 90722		
Month/Year 08/2025 Entry Point: EP-A Required Minimum Residual .20 mg/L						
Date	Time	Source(s) i	n use	Lowest free chlorine residual at entry point to distribution system (mg/L	)	Notes
1	8:00 am	AA-Well		.7		
2				offline		
3				offline		
4	7:30 am	AA-Well		.7		
5	8:00 am	AA-Well		.7		
6	7:30 am	AA-Well		.7		
7	7:30 am	AA-Well		.7		
8	8:00 am	AA-Well		.7		
9				offline		
10				offline		
11	8:00 am	AA-Well		.7		
12	7:30 am	AA-Well		.7		
13	8:00 am	AA-Well		.7		
14	7:30 am	AA-Well		.7		
15	8:00 am	AA-Well		.7		
16				offline		
17				offline		
18	7:30 am	AA-Well		.7		
19	8:00 am	AA-Well		.7		
20	7:30 am	AA-Well		.7		
21	7:30 am	AA-Well		.7		
22	8:00 am	AA-Well		.7		
23				offline		
24	0.00	A A AAC-II		offline		
25	8:00 am	AA-Well		.7		
26	7:30 am	AA-Well		.7	[	
27	8:00 am	AA-Well AA-Well		.7 .7		
28	7:30 am			.7	_	
29 30	8:00 am	AA-Well		offline		
31				offline		
Was the chlorine residual ever less than the required minimum residual of mg/L?   Yes  No  No  No  No  No  No  No  No  No  No						
GWS Serving 3,300 or Fewer GWS Serving More Than 3,300						800
			monitoring equipment fail at any time this n? ☐ Yes ☒ No		Date continuous monitoring equipment failed:	
Attach those results and submit them with If yes, were gra				ab samples collected every four hours until the		1 1
this form. continuous m				onitoring equipment was returned to service?		Date it was returned to service:
Attach grab sar				mple results and submit them with this form.		1 1
Printed N	Name: Mike	Hasgas (	Operator Certification #:			
Signatur	e: / <u>//</u>	4 100	Pho	ne #: (541) 773-2988	OR	
Date: 09	0/03/2025				Small Gr	oundwater System