STATE OF OREGON DRINKING WATER PROGRAM MONTHLY DISINFECTION REPORT FOR GROUND WATER SYSTEM

MONTH/YEAR

ENTRY POINT - GOLF SHOP

 ${\tt COOS~GOLF~CLUB~-} \ {\tt Formerly~WATSON~RANCH~GOLF}$

PWS 4190859

MINIMUM REQUIRED CHLORINE IS 0.7 mg/L

DATE	TIME	SOURCE	CHLORINE RESIDUAL
1	730	WELL	0.96
2	700		0.86
3	700		0.95
4	700		0.94
5	730		1.02
6	700		0.89
7	650		1.15
8	710		0.97
9	630		0.81
10	700		0.92
11	600		0.99
12	700		0.9
13	630		0.87
14	710		1.1
15	700		1.06
16	700		0.99
17	630		0.94
18	700		1.2
19	700		1.15
20	630		0.96
21	630		0.99
22	740		0.89
23	700		0.85
24	630		1.1
25	700		1.02
26	700		1.01
27	700		0.99
28	800		0.89

email this report by the 7th day of every month to dwp.dmce@state.or.us

WAS THE CHLORINE RESIDUAL EVER LESS THAN THE REQUIRED MINIMUM RESIDUAL OF 0.7 mg/l?

IF YES WHAT WAS THE LONGEST TIME PERIOD UNTIL MINIMUM REQUIRED LEVEL WAS RESTORED

No

YES/NO

<4 hours

If >4 hours, Drinking Water Program must be notified by end of next business day. AND CHLORINE MUST BE MEASURED AT LEAST EVERY 4 HOURS UNTIL THE MINIMUM CHLORINE LEVEL IS AGAIN ACHIEVED.

NAME OF PERSON SUBMITTING REPORT DATE REPORT SUBMITTED

Andre

Liloc

7-Mar

2022