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

System Name Humbug Mtn SP PWS ID# 4 1 91018							
Month/Year 0 8 / 2 Entry Point: WTP-A 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 .	8:00A	A Ele		.76	shop	an	
2	7:UNA			,77	Shao	Ew	
3	7:00An		V =	,7/	SHAP	KN	
4	6:50 pm		*	. 84	SITOF	KN	
5	8:20A	7.40		e 77	Shop	511	
6	SYNH		ATTACA CONTRACTOR OF THE PARTY	172	Ship	GW	
7	8:00 A			179	Shoo	GW	
8	SUNA	2		181	Shyp	EJW.	
9	7. DDA	*		,64	Show	yec.	
10	9:20A			. 66'	Shop	5/1	
11	8:15 A		5 ×	.62	Shop	SI	
12	8:15/4		6	.57	Shap	5/-/	
13	8:25A		• :1	*61	Shop	511	
14 15	8:15A			. 14	Shop	S/-/	
16 -	8:30A			, 75	Shor) jec	
17	1 50A			, 58	Shop	1cc	
18	8,15 A			280 '	Shop	24	
19	8:20A			- 19	Shop	5/4	
20	8:00 A			. 58	Shop	JS_	
21	9:20 0			0 15	2/100	SH	
22	7:25			./8	Shop	SH	
23	G.COCA		Eg.	17/1	STIOP	Joec.	
24	8:29A			10	Shop	900	
25	8:40A			.76	Shop	5/4	
26	8:30A			11	Shap	SI-J	
27				.66	Shop	SI	
28	8:15A 8:16A	W ,		.65	Shop	5/7	
29	12 wop			10	2/30	514	
30	12:00 1			169	shoo	gw	
31	8;25 A			62	Shop	951/	
Was the chlorine residual ever less than the required minimum residual of $O.3 \text{ mg/L}$? Yes X 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			
If yes, did you monitor every four hours until the residual returned to mg/L			Did continuous monitoring equipment fail at any tin reporting month? Yes No		ny time this	Date continuous monitoring equipment failed:	
as required? Yes No			If yes, were grab samples collected every four hours until the /			1 1	
Attach those results and submit them with this form.			continuous monitoring equipment was returned to service as required?				
			Attach grab sample results and submit them with this form.				
Printed N	lame: Ster	re Husted		PR2		r Certification #:	
Printed Name: Steve Hysted Title: PR2 Operator Certification #: Signature: Manufacture: Phone #: (54) 332 6774 OR							
- 00.21.21							
Dale.	Date: USISI IZ/ Small Groundwater System ▼						