

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

System Name **OPRD LOEB STATE PARK**

PWS ID# **41 91019**

Month/Year **Apr 1 2025** Entry Point:

Required Minimum Residual **0.30 mg/L**

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	10:00	#1	.32	
2	9:40 am	#1	.31	
3	11:15 am	#1	.37	
4	10:40 am	#1	.31	
5	12:45 PM	#1	.32	
6	11:00 am	#1	.31	
7	9:50	#1	.33	
8	9:40	#1	.31	
9	10:45 a	#1	.31	
10	10:40 a	#1	.33	
11	11:00 a	#1	.31	
12	11:30	#1	.31	
13	11:10 a	#1	.30	
14	10:40	#1	.30	
15	10:45	#1	.30	
16	10:45	#1	.32	
17	10:45	#1	.33	
18	11:45 a	#1	.32	
19	11:20	#1	.32	
20	10:50	#1	.32	
21	11:00	#1	.32	
22	11:49	#1	.32	
23	10:45	#1	.34	
24	11:40 a	#1	.33	24
25	12:00 p	#1	.33	
26	10:45	#1	.34	
27	2:00 pm	#1	.39	
28	12:00	#1	.34	
29	11:00	#1	.36	
30	12:00	#1	.36	
31				

Was the chlorine residual ever less than the required minimum residual of _____ 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: Adam Jones

Signature: [Signature]

Date: 5/15/25

Title: PM

Phone #: (503) 661 3163

Operator Certification #:

OR

Small Groundwater System ☐

Return by 10th of following month by either email dwp.dmce@state.or.us; fax 971-673-0694;
or mail to Drinking Water Services, PO Box 14350, Portland, OR 97293-0350.