

October 2024
 State of Oregon Drinking Water Program
 Monthly Disinfection Report for Ground Water Systems

System Name _____ PWS ID# 41
 Month/Year _____ / _____ Entry Point _____ Required Minimum Residual 0.7 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1	9:04			
2	9:22		1.0	
3	9:31		1.0	
4	9:41		1.0	
5	9:09		1.0	
6	9:41		1.0	
7	9:21		1.0	
8	9:24		1.0	
9	9:35		1.0	
10	9:30		1.0	
11	9:30		.80	
12	9:15		.86	
13	9:59		.74	Added 3/4 cup
14	9:00		1.0	
15	9:00		.73	ADD 1 cup
16	9:00		.83	1/2 cup
17	9:00		.79	ADD 1 cup
18	9:00		.91	1/2 cup
19	9:00		.90	1/2 cup
20	9:00		.99	-
21	9:40		1.12	-
22	9:19		1.03	-
23	9:00		1.86	-
24	9:39		1.11	-
25	9:31		1.10	-
26	9:39		1.03	-
27	9:30		1.01	1/4 cup
28	9:39		1.05	-
29	9:59		1.08	1/4 cup
30	9:30		.81	add 3/4 cup
31	09:00		.84	3/4 ADD
			.74	1 cup

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: Lynn Romero
 Signature: [Signature]
 Date: 10/31/2024

Title: MANAGER
 Phone #: (503) 999-3031

Operator Certification #: _____
 OR
 Small Groundwater System

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