

State of Oregon Drinking Water Section
Monthly UV Disinfection Report for Ground Water Systems Requiring 4-log Viral Inactivation

System Name Salmon Run Golf Course PWS ID# 4 1 95127
 Month/Year 08/2023 Entry Point: A Required Minimum Dose 186 mJ/cm²

| Date | Time | Source(s) in use | Any UV Alarms? (Y/N) | Notes |
|------|-------|------------------|----------------------|-------|
| 1 | | Well, SRC-AA | | |
| 2 | 11:29 | Well, SRC-AA | N | |
| 3 | | Well, SRC-AA | | |
| 4 | | Well, SRC-AA | | |
| 5 | | Well, SRC-AA | | |
| 6 | | Well, SRC-AA | | |
| 7 | | Well, SRC-AA | | |
| 8 | 08:35 | Well, SRC-AA | N | |
| 9 | | Well, SRC-AA | | |
| 10 | | Well, SRC-AA | | |
| 11 | | Well, SRC-AA | | |
| 12 | | Well, SRC-AA | | |
| 13 | | Well, SRC-AA | | |
| 14 | | Well, SRC-AA | | |
| 15 | | Well, SRC-AA | | |
| 16 | | Well, SRC-AA | | |
| 17 | | Well, SRC-AA | | |
| 18 | 13:31 | Well, SRC-AA | N | |
| 19 | | Well, SRC-AA | | |
| 20 | | Well, SRC-AA | | |
| 21 | | Well, SRC-AA | | |
| 22 | | Well, SRC-AA | | |
| 23 | | Well, SRC-AA | | |
| 24 | 18:47 | Well, SRC-AA | N | |
| 25 | | Well, SRC-AA | | |
| 26 | | Well, SRC-AA | | |
| 27 | | Well, SRC-AA | | |
| 28 | | Well, SRC-AA | | |
| 29 | | Well, SRC-AA | | |
| 30 | | Well, SRC-AA | | |
| 31 | 08:18 | Well, SRC-AA | N | |

Was the minimum UV dose ever less than the required dose of 186 mJ/cm²? Or was the alarm ever triggered? Yes No
 If yes, was a boil notice issued, and DWS contacted? If not, please explain: _____

This form is for groundwater systems where no residual disinfection has been required to prevent regrowth of pathogens in the pipes.

Date & time UV reactor failed: _____ / _____ / _____ : _____ am/pm
 Date & time it was returned to service: _____ / _____ / _____ : _____ am/pm

Printed Name: Mark Haglund Title: Operations Supervisor-Jacobs Operator Certification #: T-6161 T2 FE
 Signature: *Mark Haglund* Phone #: (541) 412-0424 OR
 Date: 09 / 05 / 2023 Small Groundwater System