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

Month/Year 3 / 22 Entry Point: Date Time Source(s) in use Lowest free chlorine residual at entry point to distribution system (mg/L) 1	System Name L		Lobster Creek / Campground		PWS ID# 4195331		
Date Time Source(s) in use residual at entry point to distribution system (mg/L) 1	Month/Year 3 / 22 Entry Pe		int:	Required Minimum Residual 0.50 mg/L			
2 7m 3.0 3 7m 4 79 5 te # 2 2.7 5 8m 105+ 5, m 6 82/n 195+ 5, m 7 7m 8 73/n 10 7an 1-05+ 5, te 3.11 11 75/n 12 7 13 73/n 14 73/n 15 7m 16 3.08 17 2.87 18 73/n 19 2.87 19 3.08 10 3.87 11 3.08	Date	Time	Source(s) in use		residual at entry point to		Notes
3 7 2 2.7 4 7 2 5.1 to 2.34 5 8 105 t 5.1 to 2.88 7 7 7 1 2.88 8 7 3 9 1 2.89 9 7 20 1 2.89 10 7 2 1 2.89 11 7 3 1 3.08 12 7 1 2.87 13 7 3 1 2.87 14 7 3 2 1 2.89 15 1 3.08 15 1 5.50		817	HOST STE				
5 Sh 105+ 51+ 3-1 6 8 2 / n 1405+ 51+ 3-1 7 7 h 2 88 7 7 h 2 1 2 88 9 m 2 4 13e 2 24 10 7 h 1-05+ 51+e 3.11 11 7 5 / n 1 2 87 12 7 1 3 7 3 h 1 2 87 13 7 3 h 1 2 87 14 7 3 h Site 2 2 3 8 15 m 405+ 51+e 3.09							
6 8 2 / n 140 5 t 5 · 16 2 · 88 7 7 4 1 2 · 94 8 7 3 9 n 2 cu use 2 · 2 · 4 10 7 4 n 1 - 0 5 t 5 · t e 3 · 11 11 7 5 0/n 1 2 · 8 7 13 7 3 0/n 1 2 · 8 7 14 7 3 0/n Sixet 2 2 · 3 8 8 15 m 40 5 t 5 · t e 3 · 0 9		700	£ 2		2.7		many and the
6 8 2 / n 140 5 t 5 · 16 2 · 88 7 7 4 1 2 · 94 8 7 3 9 n 2 cu use 2 · 2 · 4 10 7 4 n 1 - 0 5 t 5 · t e 3 · 11 11 7 5 0/n 1 2 · 8 7 13 7 3 0/n 1 2 · 8 7 14 7 3 0/n Sixet 2 2 · 3 8 8 15 m 40 5 t 5 · t e 3 · 0 9		Can .			2.74		
7 784 8 7396 9 7m 2dy use 2.24 10 78h 1-65t 5ite 3ill 11 730/h 3.08 12 7m 1 2.87 13 730/h 1 2.87 14 730/h Site 2 2.38 15 7m 405t 5ite 3.09		8/2	405+	NOSE SILE			
8 730/a 9 2m Jay UBE 2.24 10 7An 1-6st 5ite 3.11 11 750/h 12 7 1 2.87 13 730/h 14 730/h Site 2 2.38 15 2m Host 5ite 3.09		TAL	17851 5.16		2.80		
9 7m		530%	1		2.74		
10 74h 1-05+ 5ite 3.11 11 750/h 3.08 12 7 1 2.87 13 730/h 5ite 2 2.38 14 730/h Site 2 2.38 15 M Host 5ite 3.09		nu		1140	2.81		
11 750/h 12 7 1 2.87 13 730/h 14 730/h Site 2 2.38 15 7 309		DAN	Vac	Side	2.47		
12 7 20/1 2.87 13 730/1 5.82 14 730/1 Site 2 2.38 15 7 405+ 5, re 3,09		730/1	1-1001	5140	2 18/		
13 730/ Site 2 2.38 14 730/ Site 2 2.38 15 M HOST SiTE 3,09		5m	6 1		200		
14 730/h Site 2.38 15 m Host sine 3,09		730/2			2 8 2		
15 pm +05+ 5; re 3,09		730/	SIL	2	2.38		
		yen	HOST Sine		2 09		
16	16	3m			295		
17 70/6		20/4	N. Zenina da Para da P		2.82		
18 784 2.95		792			2.95		
19 A Jay Use Apr 2,34	19	en	Jan Use Are		5.34		
20 7m HOSK Size 3.0	20	722			3.0		_/
21 75%	21	プラル			2.92	and the same	
22 730/n 2.88	22	730/n			2.88		J
23 7m Site# 2 2.41	23	7m	Site#2		2.41	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	
24 7h +15+5,4e 388		7m	+105+ 5,4e		3.08	5	
25 730/2 2.59		730/n			2.99	0 17	
26 7 3.03		7~			3.03		
27 780/2 2 91		70/1			2.91		
28 7 Day USE 2,38		-201	Jay U	5-e	2,38		
20 10 4034 314		-)00/h	HOST SITE		2.74		
30 7 1		1	1		2-14		
31 /				TA SE LIFE		V. 57.	
Was the chlorine residual ever less than the required minimum residual of 0.50 mg/L? Yes Very No lf 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 Did continuous monitoring equipment fail at any time this Date continuous monitoring		_		Did continuous			T .
	until the residual returned to 0.50 mg/L as reporting montl required? Yes No If yes, were gra				? Yes No equipment failed:		
roquirad? Vos No							1 1
							Date it was returned to
this form. required? Yes No service:							
Attach grab sample results and submit them with this form.	1 1						
Printed Name: Will is Sugar Title: Rec +&C Operator Certification #:	Printed Name: Will is Sugar Title: Rec 480 Operator Certification #:						
Signature: Phone #: (5"41) 247 343 OR	OR						
	Date:	111.6	1202 2			Small Groundwater System 🛛	