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

	m Name	USFS Lobster Cree		PWS ID# 4195331			
WOTE	Teal		'OINT: 	Required Minimum Residual 0.50 mg/L			
Date	Time	Source(s) in use		Lowest free chlorine residual at entry point to distribution system (mg/l) -)	Notes	
1	100	MOS+	Site	162			
3	73·h	C 110 - 12		.57			
4	Sive	11001 501		. 66			
5	h	HOST Site		161			
6	CAN	,		. 59			
7	FAn	Day use		154			
8	5u	NOST SITE		12			
9	Bol	1		160			
10	9m			169			
11	7m			72			
12	10 1	Site# 2		.54			
13	5h	HOST SITE		, 64			
14	TAL	(,58			
15 5				,64			
16	930			.67			
17 18	950	() () () () () () () () () ()		- 74			
19	200	2. 46		186			
20	10	HOSK 5, the		. 79			
21	my am	, (83			
22	590/L	1) 11		+5/			
23	2	LIOSHSIZE		112			
24	7n	HOSADITE		62			
25	Men			1671			
26	7392	1		, 66	-		
27	M	She # 2		1 66			
28	TI	NOST 51 to		177		,	
29		1	311	, 88			
30	m	1		,83			
31							
Was the chlorine residual ever less than the required minimum residual of 0.50 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 GWS Serving More Than 3,300						300	
until the residual returned to 0.50 mg/L as reportin			Did continuous i	tinuous monitoring equipment fail at any time this Date continuous monitoring		Date continuous monitoring equipment failed:	
required? Yes No If yes, we				re grab samples collected every four hours until the / /			
Attach those results and submit them with this form.			continuous monitoring equipment was returned to service as required? Yes No			Date it was returned to service:	
			Attach grab sam	Attach grab sample results and submit them with this form.		1 1	
(1) (2)				REC TECH Operator Certification #:			
				e#: (541) 373 1006	OR		
Patric 6 1 9 12 97							
ate: 5 1 1 1 20 25 Small Groundwater System							

Return by 10th of following month by either email <u>dwp.dmce@odhsoha.oregon.gov</u>; fax 971-673-0458; or mail to Drinking Water Services, PO Box 14350, Portland, OR 97293-0350.