

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

System Name Hanley Farm Living History Museum PWS ID# 95571  
 Month/Year JUN 2023 Entry Point: Contact Tank hose bib Required Minimum Residual 1.0 mg/L

Date	Time	Source(s) in use	Lowest free chlorine residual at entry point to distribution system (mg/L)	Notes
1				
2	<u>Missed</u>			
3	<u>2042</u>		<u>1.5</u>	<u>TM</u>
4	<u>1242</u>		<u>1.6</u>	<u>TM</u>
5	<u>1727</u>		<u>1.9</u>	<u>TM</u>
6	<u>1730</u>		<u>3.4</u>	<u>DL</u>
7	<u>1570</u>		<u>3.8</u>	<u>DL</u>
8	<u>1508</u>		<u>3.0</u>	<u>TM</u>
9	<u>1416</u>		<u>1.6</u>	<u>TM</u>
10	<u>1055</u>		<u>1.4</u>	<u>TM</u>
11	<u>0801</u>		<u>1.0</u>	<u>TM</u>
12	<u>1440</u>		<u>1.4</u>	<u>TM</u>
13	<u>1400</u>		<u>1.6</u>	<u>DL</u>
14	<u>1157</u>		<u>1.2</u>	<u>TM</u>
15	<u>1148</u>		<u>1.5</u>	<u>TM</u>
16	<u>1013</u>		<u>1.0</u>	<u>TM</u>
17	<u>1230</u>		<u>1.0</u>	<u>TM</u>
18	<u>1030</u>		<u>1.2</u>	<u>TM</u>
19	<u>1300</u>		<u>1.2</u>	<u>DL</u>
20	<u>Missed</u>		<u>-</u>	<u>-</u>
21	<u>1151</u>		<u>3.4</u>	<u>TM</u>
22	<u>1035</u>		<u>1.0</u>	<u>TM</u>
23	<u>1223</u>		<u>3.0</u>	<u>TM</u>
24	<u>1005</u>		<u>1.6</u>	<u>TM</u>
25	<u>1530</u>		<u>1.2</u>	<u>TM</u>
26	<u>1730</u>		<u>2.6</u>	<u>DL</u>
27	<u>1400</u>		<u>2.8</u>	<u>DL</u>
28	<u>1505</u>		<u>2.7</u>	<u>TM</u>
29	<u>1013</u>		<u>2.0</u>	<u>TM</u>
30	<u>1140</u>		<u>2.0</u>	
31				

Was the chlorine residual ever less than the required minimum residual of 1.0 mg/L?  Yes  No  
 If yes, what was the longest time period until the required level was restored? 22 minutes 6/21 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 1.0 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: Greg Arkins Title: farm manager Operator Certification #: \_\_\_\_\_  
 Signature: [Signature] Phone #: (541) 951 2202 OR  
 Date: 30 June 2023 Small Groundwater System

Return by 10<sup>th</sup> of following month by either email [dwp.dmce@state.or.us](mailto:dwp.dmce@state.or.us); fax 971-673-0694; or mail to Drinking Water Services, PO Box 14350, Portland, OR 97293-0350.

August 22, 2019