



Disinfectant Level Quarterly Operating Report

You can submit this form electronically to TCEQ instead of mailing it. Visit [Electronic Reporting for Public Water Systems¹](https://www.tceq.texas.gov/drinkingwater/e2-reporting-system) for information.

Quarter	Year	PWS ID	PWS Name	Disinfectant Used in Distribution
3rd: July - Sept	2026	1630014	HWY 90 RANCH	Chloramine (Total)

First month of the quarter: July Monthly Summary

Was the PWS active? ☒ YES ☐ NO

Avg of all residuals	Total number of residuals	Number of residuals below minimum	Number of residuals that were 0
<u>1.16</u> mg/L	<u>5</u>	<u>0</u> 0.0 %	<u>0</u> 0.0 %

Second month of the quarter: August Monthly Summary

Was the PWS active? ☒ YES ☐ NO

Avg of all residuals	Total number of residuals	Number of residuals below minimum	Number of residuals that were 0
<u>0.92</u> mg/L	<u>5</u>	<u>0</u> 0.0 %	<u>0</u> 0.0 %

Third month of the quarter: September Monthly Summary

Was the PWS active? ☒ YES ☐ NO

Avg of all residuals	Total number of residuals	Number of residuals below minimum	Number of residuals that were 0
<u>1.04</u> mg/L	<u>6</u>	<u>0</u> 0.0 %	<u>0</u> 0.0 %

Summary for Quarter

Avg of all residuals for Quarter	Lowest Residual	Highest Residual
<u>1.04</u> mg/L	<u>1.21</u> mg/L	<u>0.87</u> mg/L

Operator Certification

☒ I acknowledge that samples were handled appropriately and all information is accurate. Falsification of this form or tampering with water samples is a crime punishable under state and/or federal law. (Texas Penal Code, Title 8, Chapter 37.10)

Name Steve Gilliam Date 10-05-2026 Title Operator

Operator License Number WO0005472 Email dawngill2413@yahoo.com

Phone 210-379-3988 Signature Steve W. Gilliam

Sign the DLQOR and mail to:
TCEQ Drinking Water Standards Section,
MC-155 Attn DLQOR,
PO BOX 13087,
Austin TX 78711-3087



¹ <https://www.tceq.texas.gov/drinkingwater/e2-reporting-system>