Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

Day	pH	Alk	Phos	Other	Y/N
1	7.58				Y
2	7.78				Y
3	7.67				Y
4	7.64				Y
5	7.69				Y
6	7.74				Y
7	7.72				Y
8	7.26				Y
9	7.12				Y
10	7.54				Y
11	7.53				Y
12	7.61				Y
13	7.55				Y
14	7.47				Y
15	7.29				Y
16	7.10				Y
17	7.73				Y
18	7.67				Y
19	7.48				Y
20	7.75				Y
21	7.62				Y
22	7.16				Y
23	7.71				Y
24	7.33				Y
25	7.61				Y
26	7.20				Y
27	8.29				Y
28	7.70				Y
29	8.45				Y
30	8.36				Y
31	7.74				Y

(Y = N = Excursion) **Total N's** 0

<<Have minimums been met for this day?

ENTRY POINT

PWS ID: 41 0 0 4 9 3

System Name: Lyons Mehama Water

Entry Point: _____

Sample Period: Jan 2024
Month/Year

Number of excursions* during this month: 0
(Count the number of days when any WQP was less than the minimum required)

Total excursions during the previous 5 months: 0
(Over 9 excursions in 6 months is a violation. Entry Point and Distribution excursions are cumulative)

For OHA use only

Minimum Water Quality Parameters as set by

pH		
Alk		*(Alkalinity)*
PO4		*(Orthophosphate)*
Other		(_____)

Print Name: John Markert

Signature: [signature]

Date: Jan 2024

Send to DWP within 10 days after end of sampling period

OHA Drinking Water Program, PO Box 14350, Portland, OR 97293-0350
Phone (971) 673-0405 Website: http://healthoregon.org/dwp/