



## Water Quality Parameter Monitoring Form Lead & Copper Rule Corrosion Control

| Day       | pH   | Alk<br>mg/L | Y/N      |
|-----------|------|-------------|----------|
| 1         |      |             |          |
| 2         |      |             |          |
| 3         | 7.00 | 50          | Y        |
| 4         |      |             |          |
| 5         |      |             |          |
| 6         |      |             |          |
| 7         |      |             |          |
| 8         |      |             |          |
| 9         | 6.99 | 49          | Y        |
| 10        |      |             |          |
| 11        |      |             |          |
| 12        |      |             |          |
| 13        |      |             |          |
| 14        |      |             |          |
| 15        |      |             |          |
| 16        |      |             |          |
| 17        | 6.99 | 50          | Y        |
| 18        |      |             |          |
| 19        |      |             |          |
| 20        |      |             |          |
| 21        |      |             |          |
| 22        |      |             |          |
| 23        | 7.00 | 47          | Y        |
| 24        |      |             |          |
| 25        |      |             |          |
| 26        |      |             |          |
| 27        |      |             |          |
| 28        |      |             |          |
| 29        |      |             |          |
| 30        | 7.05 | 50          | Y        |
| 31        |      |             |          |
| Min       | 6.99 |             |          |
| Total N's |      |             | <b>0</b> |

(No = N = Excursion)

<< Have minimums been met for this day?

### ENTRY POINT

**PWD ID: OR 4100513**

|                       |                                 |
|-----------------------|---------------------------------|
| <b>System Name:</b>   | <b>Medford Water Commission</b> |
| <b>Entry Point:</b>   | <b>A</b>                        |
| <b>Sample Period:</b> | <b>January, 2023</b>            |

Month/Year

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

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

**Is system in compliance?**

**Minimum Water Quality  
Parameters as set by State:**

**pH 6.8**

**Print Name:** Dan Perkins

**Signature:**

**Date:** 2/1/2023

Send to DWP within 10 days after end of sampling period.  
 OHA Drinking Water Program, PO Box 14350, Portland, OR 97293-0350  
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