Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

ENTRY POINT

PWD ID: OR 4100513

System Name:	**Medford Water Commission**
Entry Point:	**B**
Sample Period:	**May, 2022**

Month/Year

Day	pH	Alk mg/L	Y/N	<< Have minimums been met for this day?
1				
2				
3				
4	7.16	40	Y	
5				
6				
7				
8				
9				
10				
11				
12				
13	7.20	32	Y	
14				
15				
16				
17				
18	7.16	38	Y	
19				
20				
21				
22				
23				
24				
25				
26				
27	7.28	38	Y	
28				
29				
30				
31				
Min	7.16			
Total N's			0	

(No = N = Excursion)

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)

Is system in compliance? Yes

Minimum Water Quality Parameters as set by State:

pH 7

Print Name: Dan Perkins

Signature: Dan Perkins

Date: 06/01/2022

Send to DWP within 10 days after end of sampling period.

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