Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

Day	pH	Alk mg/L	Y/N	<< Have minimums been met for this day?
1	7.26	36	Y	
2				
3				
4				
5				
6				
7				
8	7.23	34	Y	
9				
10				
11				
12				
13				
14	7.26	36	Y	
15				
16				
17				
18				
19				
20				
21	7.37	37	Y	
22				
23				
24				
25				
26				
27	7.35	35	Y	
28				
29				
30				
31				
Min	7.23			
Total N's			0	

(No = N = Excursion)

ENTRY POINT

PWD ID: OR 4100513

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

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)

Is system in compliance? **Yes**

Minimum Water Quality Parameters as set by State:

pH 7

Print Name: Dan Perkins

Signature: Dan Perkins

Date: 11/01/2022

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/
Email dwp.dmce@state.or.us