



Water Quality Parameter Monitoring Form Lead & Copper Rule Corrosion Control

Day	pH	Alk mg/L	Y/N
1	7.92	30	Y
2			
3			
4			
5			
6			
7			
8	7.91	30	Y
9			
10			
11			
12	7.86	28	Y
13			
14			
15			
16	8.00	31	Y
17			
18			
19			
20			
21			
22	7.93	32	Y
23	7.82	27	Y
24			
25			
26			
27			
28			
29			
30	7.71	34	Y
31			
Min	7.71		
Total N's			0

(No = N = Excursion)

<< Have minimums been met for this day?

ENTRY POINT

PWD ID: OR 4100513

System Name:	Medford Water Commission
Entry Point:	B
Sample Period:	July, 2024

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 7

Print Name: Matt Severloh

Signature: *Matt Severloh*

Date: 08/01/2024

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/>
 Email dwp.dmce@state.or.us