



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

Day	pH	Alk mg/L	Y/N
1			
2			
3			
4			
5			
6	7.01	53	Y
7			
8			
9			
10			
11			
12			
13	7.00	50	Y
14			
15			
16			
17			
18			
19			
20	7.02	54	Y
21			
22			
23			
24			
25			
26			
27	7.05	54	Y
28			
29			
30			
31			
Min	7.00		
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:** C

**Sample Period:** February, 2023

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 6.8**

**Print Name:** Dan Perkins

**Signature:**

**Date:** 3/1/2023

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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 Email [dwp.dmce@state.or.us](mailto:dwp.dmce@state.or.us)