



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

Day	pH	Alk mg/L	Y/N
1			
2			
3			
4			
5	7.62	65	Y
6			
7	7.80	58	Y
8			
9			
10	7.64	66	Y
11			
12			
13			
14			
15			
16			
17			
18	7.61	67	Y
19			
20			
21	7.70	56	Y
22			
23			
24	7.63	67	Y
25			
26			
27			
28			
29			
30			
31			
Min	7.61		
Total N's			<b>0</b>

<< 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>C</b>
<b>Sample Period:</b>	<b>February, 2025</b>

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:**           Matt Severloh          

**Signature:**           *Matt Severloh*          

**Date:**           3/1/2025          

(No = N = Excursion)

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