



Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

Day	pH	Alk mg/L	Y/N
1	7.82	52	Y
2			
3			
4			
5			
6			
7	7.56	65	Y
8			
9			
10			
11			
12			
13			
14			
15	7.54	66	Y
16			
17			
18	7.71	56	Y
19			
20			
21	7.67	63	Y
22			
23			
24			
25			
26			
27			
28	7.74	64	Y
29	7.82	48	Y
30			
31			
Min	7.54		
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: April, 2025**

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:****5/1/2025**

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