Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

ENTRY POINT

PWD ID: OR 4100513

System Name:	**Medford Water Commission**
Entry Point:	**C**
Sample Period:	**February, 2026**

Month/Year

Day	pH	Alk mg/L	Y/N	<< Have minimums been met for this day?
1				
2	7.78	66	Y	
3	7.80	54	Y	
4				
5				
6				
7				
8				
9	7.62	67	Y	
10				
11				
12				
13				
14				
15				
16				
17	7.76	55	Y	
18	7.70	65	Y	
19				
20				
21				
22				
23	7.71	65	Y	
24				
25				
26				
27				
28				
29				
30				
31				
Min	7.62			
Total N's			0	

(No = N = Excursion)

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: 3/3/2026

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