Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

ID #	Sample Location	pH	Alk	PO4	other	Y/N
EP-A	1927 Intake (3/3/2026)	7.57	69			
EP-B	Rogue River (3/3/2026)	7.73	65			
EP-C	East Intake & Springs (3/3/2026)	7.64	68			
EP-A	1927 Intake (3/17/2026)	7.60	52			
EP-B	Rogue River (3/17/2026)	7.78	58			
EP-C	East Intake & Springs (3/17/2026)	7.67	59			
EP-A	1927 Intake (3/31/2026)	7.50	56			
EP-B	Rogue River (3/31/2026)	7.73	49			
EP-C	East Intake & Springs (3/31/2026)	7.65	54			
40	Antilles (*Not applicable)					
19	Howard (*Not applicable)					
30	Archer (*Not applicable)					
17	Keenway (*Not applicable)					
39	Fallbrook (*Not applicable)					
21	Antelope (*Not applicable)					
8	Stardust (*Not applicable)					
34	Ave. C (*Not applicable)					
43	Grape (*Not applicable)					
N	Samike Drive (*Not applicable)					
	*Not applicable – These sites will be sampled twice the same					
	Month that our 60 lead and copper samples are taken.					

(N = No = Excursion) **Total N's**

<Has sample met the minimums?

DISTRIBUTION

PWS ID: 41 0 0 5 1 3

System Name: Medford Water

Sample Period: March/2026 *Month/Year*

Sample Frequency: Monthly

Distribution Samples required: ____

Number of excursions during this Sample Period = 0

(Number of locations when any WQP was less than the minimum.)

Note: Entry Point and Distribution Excursions are cumulative. Add Entry Point and Distribution Excursions to get total for sample period.

For OHA use only

Minimum Water Quality Parameters as set by

pH
Alk *(Alkalinity)*
PO4 *(Orthophosphate)*
Other (_____)

Print Name: Matt Severloh

Signature: Matt Severloh

Date: 4/1/2026

Send to Drinking Water Program 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/