

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

Day	pH	Alk	Phos	Other	Y/N
1					
2					
3					
4	7.36				Y
5					
6					
7					
8					
9					
10					
11	7.57				Y
12					
13					
14					
15					
16					
17					
18	7.36				Y
19					
20					
21					
22					
23					
24					
25	7.52				Y
26					
27					
28					
29					
30					
31					

<<Have  
minimums  
been met for  
this day?

County: Polk

Agency: POLK COUNTY

**ENTRY POINT**

**EP-A**

**PWS ID 4100538**

**LUCKIAMUTE DOMESTIC WATER COOP**

**Sample period:** NOVEMBER 2025

*Month/Year*

**Number of excursions during this month:** 0

*(Over 9 excursions in 6 months is a violation.  
Entry Point and Distribution excursions are  
cumulative). An 'excursion' is any day in which the  
water quality parameter(s) fall below the minimum  
set by the State.*

*Reference*

**Minimum Water Quality  
Parameter(s) as set by State:**

pH 7.2

**Print Name:** Charles Prouty

**Signature:** Charles Prouty

**Date & Phone#:** 503-838-2075

Send to DWP within 10 days after end of  
sampling period

(No = N = Excursion) **Total N's** 0

OHA Drinking Water Program, PO Box 14350, Portland, OR 97293-0350

Phone (971) 673-0405 Website: <http://healthoregon.org/dwp/>