



Water Quality Parameter Monitoring Form
Lead & Copper Rule Corrosion Control

Day	Sample Location	pH	Alk	PO4	Other	Y/N
1	1531 Spruce	----	----	----	----	----
2	1531 Spruce	----	----	----	----	----
3	1531 Spruce	----	----	----	----	----
4	1531 Spruce	----	----	----	----	----
5	1531 Spruce	----	----	----	----	----
6	1531 Spruce	8.1	43	2.2	----	Y
7	1531 Spruce	----	----	----	----	----
8	1531 Spruce	----	----	----	----	----
9	1531 Spruce	----	----	----	----	----
10	1531 Spruce	----	----	----	----	----
11	1531 Spruce	----	----	----	----	----
12	1531 Spruce	----	----	----	----	----
13	1531 Spruce	8.3	45	1.7	----	Y
14	1531 Spruce	----	----	----	----	----
15	1531 Spruce	----	----	----	----	----
16	1531 Spruce	----	----	----	----	----
17	1531 Spruce	----	----	----	----	----
18	1531 Spruce	----	----	----	----	----
19	1531 Spruce	----	----	----	----	----
20	1531 Spruce	8.4	45	2.2	----	Y
21	1531 Spruce	----	----	----	----	----
22	1531 Spruce	----	----	----	----	----
23	1531 Spruce	----	----	----	----	----
24	1531 Spruce	----	----	----	----	----
25	1531 Spruce	----	----	----	----	----
26	1531 Spruce	----	----	----	----	----
27	1531 Spruce	8.3	45	2.2	----	Y
28	1531 Spruce	----	----	----	----	----
29	1531 Spruce	----	----	----	----	----
30	1531 Spruce	----	----	----	----	----
31	1531 Spruce	----	----	----	----	----

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

<Has sample met the minimum(s)?

DISTRIBUTION

PWS ID: 41 00551

System Name: Myrtle Point, City of

Sample Period: February 2025
Month/Year

Sample Frequency: Every week

Distribution Samples required: 1

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 State:

pH	7.5	
PO ₄	1.3	(Orthophosphate)
Alk	25 mg/l	(Alkalinity)
Other		(_____)

Print Name: Ryan A. Sherman

Signature: Ryan A. Sherman

Date: March 3, 2025

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/>