

Day	pH	Alk	Phos	Other	Y/N
1	7.4				Y
2	7.6				Y
3	7.5				Y
4	7.5				Y
5	7.5				Y
6	7.6				Y
7	Off				Y
8	7.6				Y
9	7.8				Y
10	8.4				Y
11	7.7				Y
12	Off				Y
13	7.8				Y
14	Off				Y
15	7.6				Y
16	7.6				Y
17	7.7				Y
18	7.7				Y
19	7.7				Y
20	7.7				Y
21	Off				Y
22	7.6				Y
23	7.7				Y
24	7.7				Y
25	7.8				Y
26	7.7				Y
27	7.5				Y
28	7.7				Y
29	7.7				Y
30	7.7				Y
31	7.7				Y
					0

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

<<Have minimums been met for this day?

**ENTRY POINT**

**PWS ID: 41- 00792**

**System Name: City of Scappoose**

**Entry Point: A**

**Sample Period: March 2026**

**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 )*

*For OHA use only*

**Minimum Water Quality Parameters as set by**

pH

Alk  *(Alkalinity)*

**Print Name: Kevin Turner**

**Signature: *Kevin Turner***

**Date and Phone: 4/2/2026 971-246-6189**

Send to DWP within 10 days after end of sampling period

Phone (971) 673-0405

Website: <http://healthoregon.org/dwp/>