

Water Quality Parameter Monitoring Form
Lead & Copper Rule Corrosion Control

Day	pH	Alk	Phos	Other	Y/N
1	7.5				
2	7.4	.83			
3	7.4				
4	7.6				
5	7.6				
6	7.5				
7	7.6				
8	7.6				
9	8.0				
10	7.7				
11	7.5				
12	7.4				
13	7.4				
14	7.5				
15	7.4				
16	7.5				
17	7.8	.91			
18	8.1				
19	7.8				
20	7.7				
21	7.8				
22	7.8				
23	7.5				
24	7.3				
25	7.5				
26	7.5				
27	7.5				
28	7.4	.97			
29	8.0				
30	8.0				
31	7.6				

(No = N = Excursion) Total N's

<<Have
minimums
been met for
this day?

ENTRY POINT
PWS ID: 41 94531

System Name: Jewell

Entry Point: _____

Sample Period: 7/2025
Month/Year



Number of excursions* during this month: _____
(Count the number of days when any WQP was
less than the minimum required)

Total excursions during the previous 5 months: _____
(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 7.2
Alk 66 (Alkalinity)
PO4 (Orthophosphate)
Other ()

Print Name: Ben Warner

Signature: Ben Warner

Date: 8/2/2025

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/>