

RECEIVED

APR 06 2023

Certification
 Drinking Water Services

Day	pH	Alk	Phos	Other	Y/N
1					
2					
3					
4					
5					
6	7.45				
7					
8					
9					
10					
11					
12					
13					
14	7.51				
15					
16					
17					
18					
19					
20					
21					
22					
23	7.43				
24					
25					
26					
27					
28					
29	7.52				
30					
31					

<<Have minimums been met for this day?

ENTRY POINT

PWS ID: 41 91915

System Name: Martin (S.O.S.A)

Entry Point: Well Room

Sample Period: March / 2023
 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 (Alkalinity)
 Alk (Alkalinity)
 PO4 (Orthophosphate)
 Other (_____)

Print Name: Keoni Gallegas

Signature: [Signature]

Date: 3/30/2023

Send to DWP within 10 days after end of sampling period

(No = N = Excursion) Total N's