

RECEIVED

OCT 04 2024

Day	pH	Alk	Phos	Other	Y/N
2					
3					
4					
5	7.71				
6					
7					
8					
9					
10					
11	7.33				
12					
13					
14					
15					
16	7.51				
17					
18					
19					
20					
21					
22					
23					
24					
25	7.58				
26					
27					
28					
29					
30					
31					

<<Have minimums been met for this day?

ENTRY POINT

Certification Drinking Water Services

PWS ID: 41

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

Entry Point: Well Room

Sample Period: September / 2024
 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 (Orthophosphate)
 PO4 (_____)
 Other

Print Name: Kevin Colledge
 Signature: [Signature]
 Date: 9/30/24

Send to DWP within 10 days after end of sampling period

(No = N = Excursion) Total N's