Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

ID #	Sample Location	pH	Alk	PO4	Other	Y/N
3/3/25	West Hall BF	7.4	120			Y
3/3/25	Room 16	7.3	120			Y
3/17/25	West Hall BF	7.4	120			Y
3/17/25	Room 16	7.4	120			Y
3/31/25	West Hall BF	7.3	120			Y
3/31/25	Room 16	7.4	120			Y

(N = No = Excursion) **Total N's** Ø

<Has sample met the minimum(s)?

County: Clackamas

Agency: CLACKAMA

DISTRIBUTION

PWS ID 4194670

OREGON TRAIL SD - BORING MID SCH

Sample Period: March 2025
Month/Year

Sample Frequency: Every 12 months

Distribution Samples required: 1

Number of excursions during this Sample Period = Ø

(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.

Reference

Minimum Water Quality Parameters as set by State:

pH 7.2

Print Name: Chelsea Lincoln Lane

Signature: [illegible]

Date: 4/4/25 503 668-6442

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/