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Oregon Health Authority

Water Quality Parameter Monitoring Form

Lead & Copper Rule Corrosion Control

Date / ID #	Sample Location	pH	Alk	PO4	Temp / ~~Other~~	Y/N
5/1/23	West Hall	7.4			19.3	Y
5/1/23	Rm # 15	7.5			18.7	Y
5/24/23	West Hall	7.2			19.1	Y
5/24/23	Rm # 15	7.3			17.8	Y

(N = No = Excursion) **Total N's** 0

<Has sample met the minimum(s)?

County: Clackamas

Agency: CLACKAMA

DISTRIBUTION

PWS ID 4194670

OREGON TRAIL SD - BORING MID SCH

Sample Period: 5/23 *Month/Year*

Sample Frequency: Every 12 months

Distribution Samples required: 1

Number of excursions during this Sample Period = 0

(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: Lance Brooks

Signature: Lance Brooks

Date: 5/24/23

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/