

A R K A N S A S Department of Environmental Quality

December 27, 2000

7969 JAH 2001 20231

Mr. Floyd E. Johnson, General Manager El Dorado Water Utilities P.O. Box 1587 El Dorado, AR 71731-1587

Re: CSN-70-0341;

NPDES Permit No.: AR0033723

Dear Mr. Johnson:

IN Fred. SiloAS

On December 22, 2000, I performed a routine compliance inspection and a pretreatment compliance inspection of the El Dorado South Plant in accordance with the provisions of the federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. This inspection revealed that you are in compliance with the terms of your permit.

If I can be any assistance, please contact me at 870-862-5941.

Sindenel

John W. Land

District Field Inspector

Water Division

cc: NPDES Branch

NPDES COMPLIANCE FILES
NPDES # 33723
DMR'S SHOW

NCR

CORRESPONDENCE

_CRAS

SEPA

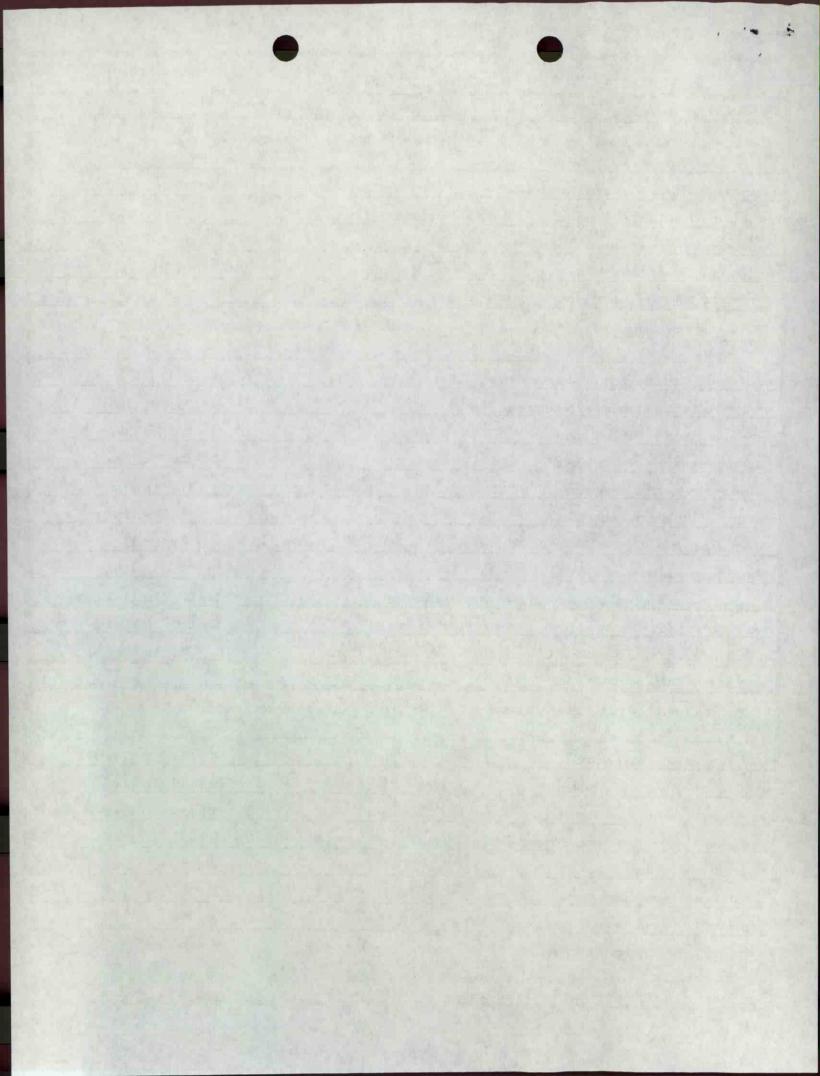
UNITED STATES ENVIRONMENTAL PROTECTION AGENCY Washington, D.C. 20460

NPDES Compliance Inspection Report

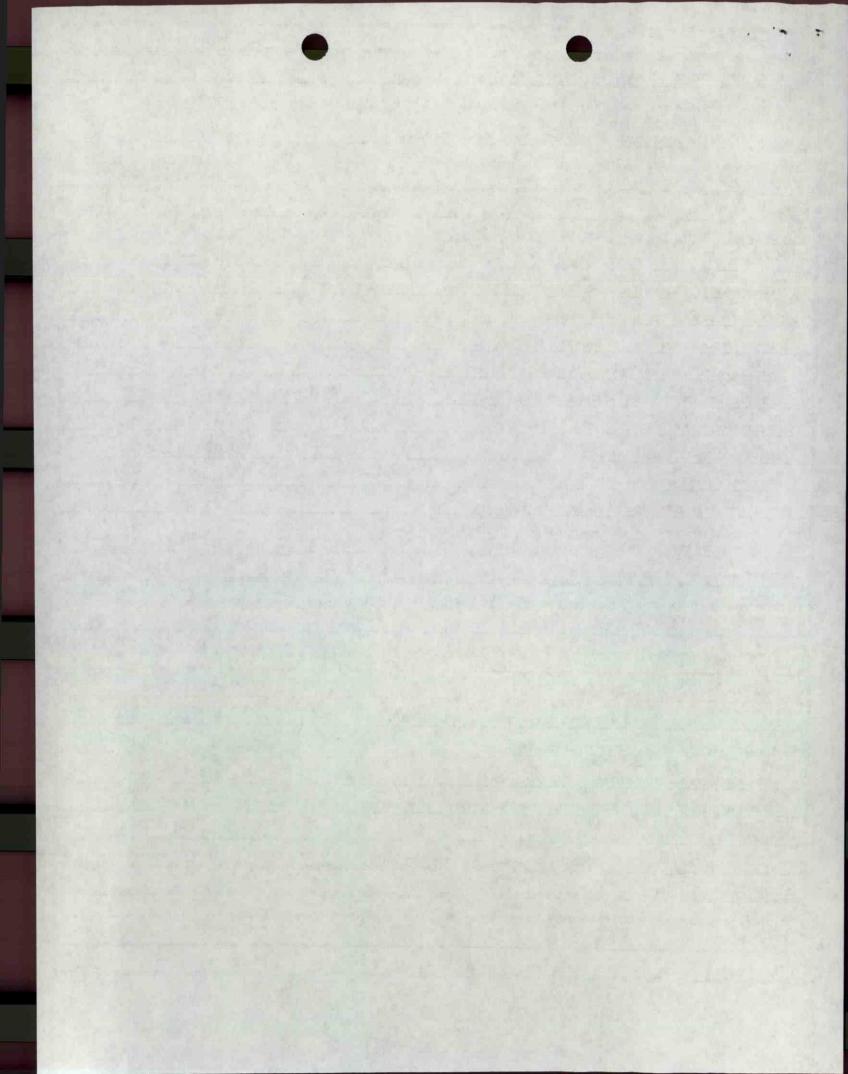
Form Approved OMB No. 2040-0003 Approval Expires 7-31-85

Section A: National Data System Coding						
Transaction Code N 2 5 3 A R 0 0 3 3 7 C S N - 7 0 - 0 3 4 1 Inspection Work Days 67 69 70 4		1 1 1 1 1	Inspec. Type Inspector Fac Type Inspector Fa			
	Section B: Facility	Data				
Name and Location of Facility Inspected (For industrial users disc include POTW name and NPDES permit number) City of El Dorado, El Dorado Water Utilities-South Plant S W Ave El Dorado, Arkansas	Entry Time /Date 9:04 Exit Time/Date 16:33	Permit Effective Date 01 April 1997 Permit Expiration Date 31 March 2002				
Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Num T. Harold Baker/Treatment Superintendent/870-862-6451	ber(s)		Other Facility Data			
Name, Address of Responsible Official/Title/Phone and Fax Number Floyd E. Johnson/ Operations Manager/870-862-6451 El Dorado Water Utilities P.O. Box 1587, El Dorado, AR 71731 Contacted Yes No X						
See (S = Satisfactor	tion C: Areas Evaluated I y, M = Marginal, U = Unsa	disfactory, N = Not Evaluated)				
S Permit S Flow Measureme S Records/Reports S Self-Monitoring S S Facility Site Review N Compliance School S Effluent/Receiving Waters S Laboratory	Program N S dules S	Sludge Handling/Disposal	S Sampling Pollution Prevention Multimedia Other:			
S Effluent/Receiving Waters S Laboratory N Storm Water Other: Section D: Summary of Findings/Comments (Attach additional sheets if necessary)						
Section E: The facility does not have a primary flow measuring device. This is the way that the system was approved. The facility can only discharge via two pumps which can only pump 5 or 7 mgd. The facility checks the flow meter against a newly installed hour meter to verify the discharge is within acceptable ranges. Section F: The facility does not distill ammonia samples, comparability data is on hand at the facility.						
Name(s) and Signature(s) of Inspector(s) John Wesley Paris	Name(s) and Signature(s) of Inspector(s) John Wesley Largo Agency/Office/Telephor ADEQ/EI Dorado/870-8					
Signature of Management QA Reviewer	nd Fax Numbers	Date				

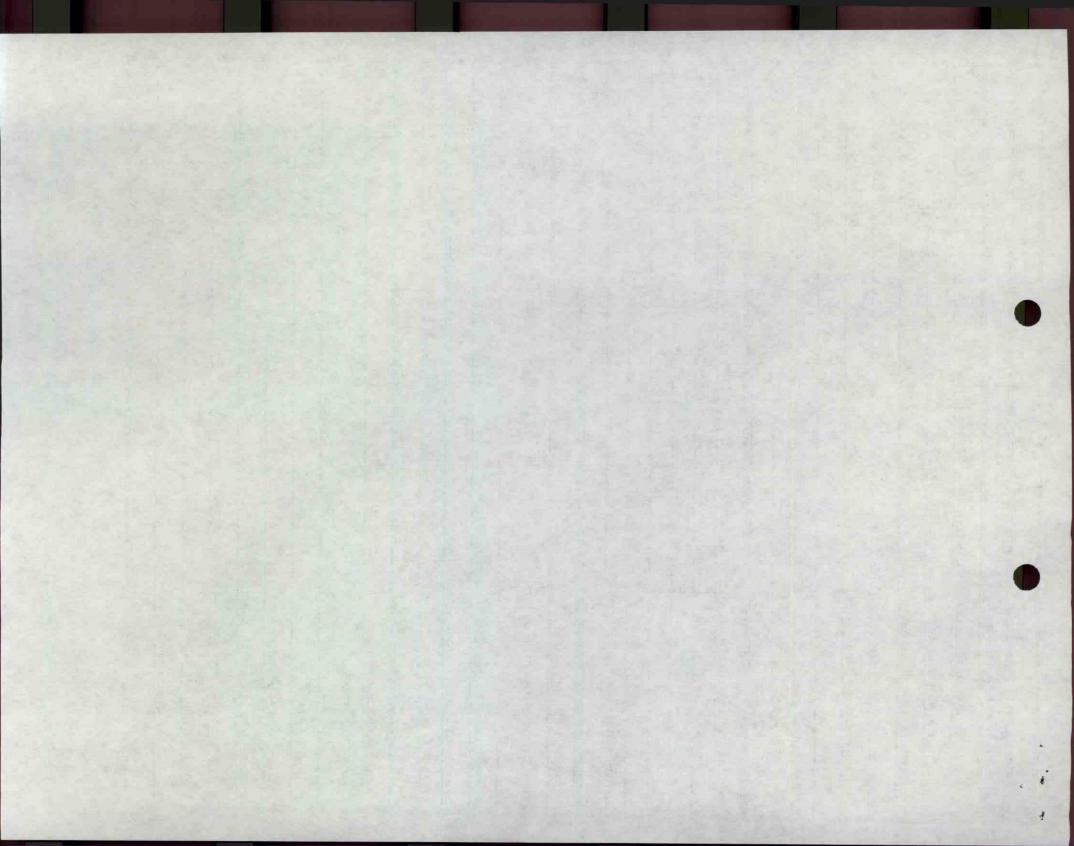
	Permit No. AR0033723
SECTION A - PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS ■ S □ M □ U □ NA (FURTHER EXPENDING)	(PLANATION ATTACHED <u>no</u>)
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE	■Y□N□NA
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES	□ Y □ N ■ NA
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT	■ Y □ N □ NA
4. ALL DISCHARGES ARE PERMITTED	■ Y □ N □ NA
SECTION B - RECORDKEEPING AND REPORTING EVALUATION	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. BS M U NA (FURTHER DETAILS:	EXPLANATION ATTACHED <u>no</u>)
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs.	■ Y□ N □ NA
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE.	■ S □ M □ U □ NA
a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING	■ Y □ N □ NA
b) NAME OF INDIVIDUAL PERFORMING SAMPLING	■ Y □ N □ NA
c) ANALYTICAL METHODS AND TECHNIQUES.	■ Y □ N □ NA
d) RESULTS OF ANALYSES AND CALIBRATIONS.	■ Y □ N □ NA
e) DATES AND TIMES OF ANALYSES.	■ Y □ N □ NA
f) NAME OF PERSON(S) PERFORMING ANALYSES.	■Y□N□NA
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE.	■ S □ M □ U □ NA
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR.	■ S □ M □ U □ NA
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA.	■ Y □ N □ NA
SECTION C - OPERATIONS AND MAINTENANCE	
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED.	R EXPLANATION ATTACHED <u>mo</u>)
1. TREATMENT UNITS PROPERLY OPERATED.	■ s □ M □ U □ NA
2. TREATMENT UNITS PROPERLY MAINTAINED.	■ S □ M □ U □ NA
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED.	■ S □ M □ U □ NA
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE.	■ S □ M □ U □ NA
5. ALL NEEDED TREATMENT UNITS IN SERVICE.	■S □M □U □NA
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED.	■S □M □U □NA
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED.	■ S □ M □ U □ NA
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE.	■Y□N □NA
STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED.	■ Y □ N □ NA ■ Y □ N □ NA



PERMIT NO. AR0033723
They have the a
☐ Y ■ N ☐ NA ☐ Y ☐ N ■ NA ☐ Y ☐ N ■ NA
□ Y ■ N □ NA □ Y □ N ■ NA
TON ATTACHED <u>no</u>).
■ Y □ N □ NA
TION ATTACHED <u>yes</u>)
□ Y □ N ■ NA
■ Y □ N □ NA
■ y □ n □ na
■ y □ n □ na ■ y □ n □ na ■ y □ n □ na
■ Y □ N □ NA
■ Y □ N □ NA
■ Y □ N □ NA
NATION ATTACHED <u>yes</u>
■ y □ n □ na



		WAY, CTA			Perm	it No.AR0033723		
SECTION F - LABORATO	PRY (CONT'D)			CALL STAIL				
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED					□ Y □ N ■ NA			
3. SATISFACTORY CALIBRAT	TON AND MAINTENAN	ICE OF INSTRUMENTS	S AND EQUIPMENT.		■s□m	□ U □ NA		
4. QUALITY CONTROL PROC	EDURES ADEQUATE.			Street, Street	∎s□м	□ u □ NA		
5. DUPLICATE SAMPLES ARE	E ANALYZED. 10-100	% OF THE TIME.	NEW YORK		■ Y □ N □ NA			
6. SPIKED SAMPLES ARE AN	ALYZED. 10 % OF TH	HE TIME.			■ Y □ N □ NA			
7. COMMERCIAL LABORATO	DRY USED.		Ass. State		= y	ON ONA		
LAB NAME American Interp	lex							
LAB ADDRESS Kanis Rd., L								
PARAMETERS PERFORME	D CBOD, Biomonitoring	z, and Table II and III						
SECTION G - EFFLUENT	/RECEIVING WAT	ERS OBSERVATIO	NS. ■S□M□	U NA (FURTHER EX				
OUTFALL NO.	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOAT SOL.	COLOR light steen	OTHER	
001	none	none	slight	none	none	light gteen		
RECEIVING WATER OBSER	VATIONS did not obse	rve						
							199	
SECTION H - SLUDGE I	DISPOSAL							
SLUDGE DISPOSAL MEETS	PERMIT REQUIREMEN	ITS.	□ѕ□м□	U NA (FURTHER E	XPLANATION ATTACHED	no).		
DETAILS:								
1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY.			u □ u □ NA					
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503. □ S □ M □ U □ NA								
3. FOR LAND APPLIED SLU	DGE, TYPE OF LAND A	PPLIED TO:	(e.g., FOREST, AG	RICULTURAL, PUBLIC C	CONTACT SITE)			
SECTION I - SAMPLING	G INSPECTION PRO	OCEDURES (FURTI	HER EXPLANATION ATTAC	THED_).				
1. SAMPLES OBTAINED THIS INSPECTION. □ Y ■ N □ NA						Y ■ N □ NA		
2. TYPE OF SAMPLE OBTA	INED							
GRAB	COMPOSITE	SAMPLE METHO	DD FREQUE	NCY				
3. SAMPLES PRESERVED.						Y□N ■NA		
4. FLOW PROPORTIONED SAMPLES OBTAINED.					Y D N NA			
5. SAMPLE OBTAINED FRO	SAMPLES OBTAINED.							
6. SAMPLE REPRESENTATIVE OF VOLUME AND MATURE OF DISCHARGE.						Y□N ■NA		
6. SAMPLE REPRESENTAT	OM FACILITY'S SAMPLI		RGE.			Y ON INA		
SAMPLE REPRESENTAT SAMPLE SPLIT WITH PE	OM FACILITY'S SAMPLI		RGE.					
	OM FACILITY'S SAMPLITYE OF VOLUME AND ERMITTEE.	MATURE OF DISCHAR	RGE.			IY□N ■ NA		



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DMR Calculation Check

5

Reporting Period: From	2000 Year	Aug Month	01 Day	_ To <u>2000</u> Year	Aug. Month	31 Day
Parameter Checked:	NH3-N					
		Quar	itity			
		Min-mg/L		Avg-mg/L	Max-mg/L	
Reported Value:			1		3	
Calculated Value:			1		3	

If calculated value does not equal reported value, explain: equal

Permit Value: