DIVISION OF ENVIRONMENTAL QUALITY

Sarah Huckabee Sanders
GOVERNOR
Shane E. Khoury
SECRETARY

March 8, 2024

David Green, Utilities Manager
City of Arkadelphia
PO Box 495
Arkadelphia, AR 71923
Email Address: david.green@arkadelphia.gov

RE: City of Arkadelphia Inspection
AFIN: 10-00463 Permit No.: AR0020605 – PDS# 129015 & 129016
ARR000190 – PDS# 129017

Dear Mr. Green:

On January 30, 2024, I performed a Compliance Evaluation Inspection (CEI), Collections Systems Inspection, and Industrial Stormwater Inspection of the above referenced facility in accordance with the provisions of the Federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. A copy of the inspection reports are enclosed for your records.

Please refer to the "Summary of Findings" section of the inspection report and provide a written response for each item that was noted. This response should be mailed to the attention of the Office of Water Quality Compliance Branch at the address below my signature or emailed to Water-Inspection-Report@adeq.state.ar.us. This response should contain documentation describing the course of action taken to correct each item noted. The corrective action(s) should be completed as soon as possible and the written response with all necessary documentation (i.e. photos) is due by **March 25, 2024**.

If I can be of any assistance please contact me at Michael.young@adeq.state.ar.us or 501-837-2073.

Sincerely,

Michael Young
Inspector Supervisor, Office of Water Quality

ENVIRONMENTAL QUALITY

OFFICE OF WATER QUALITY INSPECTION REPORT

AFIN: **10-00463**	PERMIT #: **AR0020605**	DATE: **1/30/2024**
COUNTY: **10 Clark**	PDS #: **129015**	MEDIA: **WN**
GPS LAT: **34.084117** LONG: **-93.051534** LOCATION: **Entrance**		

FACILITY INFORMATION

NAME:
City of Arkadelphia
LOCATION:
1047 South 3rd Street
CITY:
Arkadelphia, AR

RESPONSIBLE OFFICIAL

NAME: / TITLE
David Green / Utilities Manager
COMPANY:
City of Arkadelphia
MAILING ADDRESS:
PO Box 495
CITY, STATE, ZIP:
Arkadelphia AR 71923
PHONE & EXT: / FAX:
870-246-5863 / 870-246-9546
EMAIL:
david.green@arkadelphia.gov

CONTACTED DURING INSPECTION: **No**

INSPECTION INFORMATION

FACILITY TYPE: **1 - Municipal**	INSPECTOR ID#: **101531 S - State**
FACILITY EVALUATION RATING: **4 - Satisfactory**	INSPECTION TYPE: **Compliance Evaluation**

DATE(S): **1/30/2024** ENTRY TIME: **10:00** EXIT TIME: **12:45**

PERMIT EFFECTIVE DATE: **11/1/2023**
PERMIT EXPIRATION DATE: **10/31/2028**

FAYETTEVILLE SHALE RELATED: **N**

FAYETTEVILLE SHALE VIOLATIONS: **N**

INSPECTION PARTICIPANTS

NAME/TITLE/PHONE/FAX/EMAIL/ETC.:
David Thomason/Operator (Lic. #001842)
Anna Ray/Operator (Lic. #012594)
Elizabeth Givens/DEQ OWQ Area 3 Water Inspector

AREA EVALUATIONS

(S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)

**	PERMIT	**	FLOW MEASUREMENT	**	STORMWATER
**	RECORDS/REPORTS	**	LABORATORY	**	FACILITY SITE REVIEW
**	OPERATION & MAINTENANCE	**	EFFLUENT/RECEIVING WATER	**	SELF-MONITORING PROGRAM
**	SAMPLING	**	SLUDGE HANDLING/DISPOSAL	**	PRETREATMENT
**	OTHER:				

SUMMARY OF FINDINGS

1.) At the time of inspection the aerators in the Industrial Pretreatment lagoon were not in operation. This is a violation of permit condition Part III. (B.) (1.) (A.)

2.) At the time of inspection the flowmeter was out of date for calibration. This is a violation of permit condition Part III. (C.) (2.).

At the manhole following final treatment and before final discharge at the Ouachita River I observed heavy foaming that was attributed to be naturally occurring. This foam dissipated quickly when exposed to oxygen and did not feel greasy or like a surfactant. Additionally, there was water on top of the manhole cover. Any discharge from this manhole would need to be reported within 24 hours of observation per condition Part III. (D.) (6.). If the river level of the Ouachita River is consistently causing the discharge at the manhole then a check valve or back flow preventer may need to be considered.

GENERAL COMMENTS

On January 30, 2024, I performed a Compliance Evaluation Inspection (CEI) at City of Arkadelphia Wastewater Treatment Facility (WWTF) with the above participants in attendance. The City of Arkadelphia is permitted to operate a WWTF with a design of an aerated industrial pretreatment lagoon that feeds into a splitter box that feeds water to Oxidation Ponds 1, 2, and 3. Each oxidation pond can discharge to the aquaculture pond. The aquaculture pond has plastic structures to contain duckweed, is aerated, and chemical addition of 35% Hydrogen Peroxide (when needed). Disinfection is completed using sodium hypochlorite and after contact flow is measured through a 49.5" rectangular weir with end contractions. The discharge falls from the weir to add post-aeration and is discharged to the Ouachita River. Sample collections and analysis are completed by City of Arkadelphia staff and in 2022 the laboratory was requested to send information to OWQ Enforcement Branch.

Facility Evaluation:

We entered the facility gates and traveled to the buildings that contain disinfection equipment and flow devices. In the chemical storage room I observed a dosing machine and storage of sodium hypochlorite and they were operating correctly (see photos 1-4). The final stage of the WWTF is an aquaculture pond that has optional application of hydrogen peroxide (see photo 5). At the chlorine contact chamber I observed that the water was a greenish color but had clarity, indicating that the recent high rain events had caused higher flow rates in the WWTF (see photos 6-7). Flow rates for the facility were very high and the water falling over the weir was causing foaming (see photo 8). I observed the foam coming out of the manhole immediately downstream of the weir and some standing water on the top of the concrete (see photos 9-10). The foam quickly dissipated when exposed to oxygen and did not leave a residue on the grass. We discussed that recently the Ouachita River level had risen after storms which caused some of the discharge to back up in the pipe. I informed the operators that any discharge from that manhole or the WWTF due to high river levels would require reporting per condition Part III. (D.) (6.). The primary flow measurement device is a rectangular weir with end contractions and the facility uses a totalizer (see photo 11). Inside the small building I observed the totalizer and the sticker indicated that calibration needs to be performed (see photo 12). We drove the entire levee system around Oxidation Ponds 1, 2, and 3 and stopped at the splitter box where we observed high influent rates (see photo 13). At the pretreatment lagoon the operators stated that the aerators were not in operation (see photos 14-15). During the collections systems inspection we stopped at the bar screen which is not at the WWTF but before the main influent pumps and we did not observe any issues (see photos 16-17). There were no other issues with the operation of the treatment system.

Records Review:

Following the inspection I requested records for September 2023. I received a spreadsheet that had all of the results from the internal lab analysis. The results entered into NetDMR were the same as the results in the spreadsheet. In 2022, the internal lab at the City of Arkadelphia was required to send information to the DEQ Laboratory group and Christie Daniel stated that they are still completing some of the recommendations for improving the laboratory quality control.

INSPECTOR'S SIGNATURE: **Michael Young**	DATE: **01/31/2024**
SUPERVISOR'S SIGNATURE: **Jason Bolenbaugh**	DATE: **3/6/2024**

SECTION A: PERMIT VERIFICATION	
PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE:	☑Y ☐N ☐NA ☐NE
2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES:	☐Y ☐N ☑NA ☐NE
3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT:	☑Y ☐N ☐NA ☐NE
4. ALL DISCHARGES ARE PERMITTED:	☑Y ☐N ☐NA ☐NE
SECTION B: RECORDKEEPING AND REPORTING EVALUATION	
RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRS:	☑Y ☐N ☐NA ☐NE
2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE:	☑S ☐M ☐U ☐NA ☐NE
a. DATES AND TIME(S) OF SAMPLING:	☐Y ☐N ☐NA ☐NE
b. EXACT LOCATION(S) OF SAMPLING:	☑Y ☐N ☐NA ☐NE
c. NAME OF INDIVIDUAL PERFORMING SAMPLING:	☑Y ☐N ☐NA ☐NE
d. ANALYTICAL METHODS AND TECHNIQUES:	☑Y ☐N ☐NA ☐NE
e. RESULTS OF CALIBRATIONS:	☑Y ☐N ☐NA ☐NE
f. RESULTS OF ANALYSES:	☑Y ☐N ☐NA ☐NE
g. DATES AND TIMES OF ANALYSES:	☑Y ☐N ☐NA ☐NE
h. NAME OF PERSON(S) PERFORMING ANALYSES:	☑Y ☐N ☐NA ☐NE
3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE:	☑S ☐M ☐U ☐NA ☐NE
4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR:	☑S ☐M ☐U ☐NA ☐NE
5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA:	☑Y ☐N ☐NA ☐NE
SECTION C: OPERATIONS AND MAINTENANCE	
TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED	☐S ☑M ☐U ☐NA ☐NE
DETAILS:	
1. TREATMENT UNITS PROPERLY OPERATED:	☑S ☐M ☐U ☐NA ☐NE
2. TREATMENT UNITS PROPERLY MAINTAINED:	☑S ☐M ☐U ☐NA ☐NE
3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED:	☐S ☑M ☐U ☐NA ☐NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE:	☑S ☐M ☐U ☐NA ☐NE
5. ALL NEEDED TREATMENT UNITS IN SERVICE:	☐S ☐M ☑U ☐NA ☐NE
6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED:	☑S ☐M ☐U ☐NA ☐NE
7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED:	☑S ☐M ☐U ☐NA ☐NE
8. OPERATION AND MAINTENANCE MANUAL AVAILABLE:	☑Y ☐N ☐NA ☐NE
9. STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED:	☑Y ☐N ☐NA ☐NE
10. PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED:	☑Y ☐N ☐NA ☐NE
11. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR:	☐Y ☑N ☐NA ☐NE
12. IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED:	☐Y ☐N ☑NA ☐NE
13. HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS:	☐Y ☐N ☑NA ☐NE
14. HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT:	☐Y ☑N ☐NA ☐NE
15. IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT:	☐Y ☐N ☑NA ☐NE

SECTION D: SAMPLING	
PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS	☑S ☐M ☐U ☐NA ☐NE
DETAILS:	
1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	☑Y ☐N ☐NA ☐NE
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	☑Y ☐N ☐NA ☐NE
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	☑Y ☐N ☐NA ☐NE
6. SAMPLE COLLECTION PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
a. SAMPLES REFRIGERATED DURING COMPOSITING:	☑Y ☐N ☐NA ☐NE
b. PROPER PRESERVATION TECHNIQUES USED:	☑Y ☐N ☐NA ☐NE
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	☑Y ☐N ☐NA ☐NE
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	☐Y ☐N ☑NA ☐NE

SECTION E: FLOW MEASUREMENT	
PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS	☐S ☑M ☐U ☐NA ☐NE
DETAILS:	
1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED:__ TYPE OF DEVICE: **Rectangular Weir w/ end contractions**	☑Y ☐N ☐NA ☐NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	☑Y ☐N ☐NA ☐NE
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED: **Siemens**	☐Y ☑N ☐NA ☐NE
4. CALIBRATION FREQUENCY ADEQUATE:	☐Y ☑N ☐NA ☐NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	☑Y ☐N ☐NA ☐NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	☑Y ☐N ☐NA ☐NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	☑Y ☐N ☐NA ☐NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	☑Y ☐N ☐NA ☐NE
9. HEAD MEASURED AT PROPER LOCATION:	☑Y ☐N ☐NA ☐NE

SECTION F: LABORATORY	
PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS	☑S ☐M ☐U ☐NA ☐NE
DETAILS: **Laboratory was requested to send documents to Enforcement in 2022.**	
1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) :	☐Y ☐N ☐NA ☐NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	☑Y ☐N ☐NA ☐NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	☑Y ☐N ☐NA ☐NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
5. DUPLICATE SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☑Y ☐N ☐NA ☐NE
6. SPIKED SAMPLES ARE ANALYZED ≥10% OF THE TIME:	☑Y ☐N ☐NA ☐NE
7. COMMERCIAL LABORATORY USED:	☑Y ☐N ☐NA ☐NE
a. LAB NAME: **Arkansas Anlytical**	
b. LAB ADDRESS: **Little Rock**	
c. PARAMETERS PERFORMED: **WET Testing Only**	
8. BIOMONITORING PROCEDURES ADEQUATE:	☑Y ☐N ☐NA ☐NE
a. PROPER ORGANISMS USED:	☑Y ☐N ☐NA ☐NE
b. PROPER DILUTION SERIES FOLLOWED:	☑Y ☐N ☐NA ☐NE
c. PROPER TEST METHODS AND DURATION:	☑Y ☐N ☐NA ☐NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	☑Y ☐N ☐NA ☐NE

SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS

BASED ON VISUAL OBSERVATIONS ONLY ☑S ☐M ☐U ☐NA ☐NE

DETAILS: **Foam was abundant but was dissipating fast.**

OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	N	N	N	Yes	N	Greenish	--

SECTION H: SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS ☑S ☐M ☐U ☐NA ☐NE

DETAILS:

1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY: ☑S ☐M ☐U ☐NA ☐NE
2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503: ☑S ☐M ☐U ☐NA ☐NE
3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: (E.G., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE):

SECTION I: SAMPLING INSPECTION PROCEDURES

SAMPLE RESULTS WITHIN PERMIT REQUIREMENTS ☐S ☐M ☐U ☑NA ☐NE

DETAILS:

1. SAMPLES OBTAINED THIS INSPECTION: ☐Y ☐N ☑NA ☐NE
2. TYPE OF SAMPLE: ☐GRAB:__ ☐COMPOSITE:__ METHOD:__ FREQUENCY:
3. SAMPLES PRESERVED: ☐Y ☐N ☑NA ☐NE
4. FLOW PROPORTIONED SAMPLES OBTAINED: ☐Y ☐N ☑NA ☐NE
5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE: ☐Y ☐N ☑NA ☐NE
6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE: ☐Y ☐N ☑NA ☐NE
7. SAMPLE SPLIT WITH PERMITTEE: ☐Y ☐N ☑NA ☐NE
8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED: ☐Y ☐N ☑NA ☐NE
9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT: ☐Y ☐N ☑NA ☐NE

SECTION J: STORM WATER POLLUTION PREVENTION PLAN

STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS ☐S ☐M ☐U ☑NA ☐NE

DETAILS:

1. SWPPP UPDATED AS NEEDED:__ DATE OF LAST UPDATE: ☐Y ☐N ☑NA ☐NE
2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS: ☐Y ☐N ☑NA ☐NE
3. POLLUTION PREVENTION TEAM IDENTIFIED: ☐Y ☐N ☑NA ☐NE
4. POLLUTION PREVENTION TEAM PROPERLY TRAINED: ☐Y ☐N ☑NA ☐NE
5. LIST OF POTENTIAL POLLUTANT SOURCES: ☐Y ☐N ☑NA ☐NE
6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS: ☐Y ☐N ☑NA ☐NE
7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED: ☐Y ☐N ☑NA ☐NE
8. LIST OF STRUCTURAL BMPS: ☐Y ☐N ☑NA ☐NE
9. LIST OF NON-STRUCTURAL BMPS: ☐Y ☐N ☑NA ☐NE
10. BMPS PROPERLY OPERATED AND MAINTAINED: ☐Y ☐N ☑NA ☐NE
11. INSPECTIONS CONDUCTED AS REQUIRED: ☐Y ☐N ☑NA ☐NE

DMR Calculation Check

Reporting Period:	**From**	**2023**	**09**	**01**	**To**	**2023**	**09**	**30**
		Year	**Month**	**Day**		**Year**	**Month**	**Day**

Parameter Checked: **TSS**

	Loading Mass Mo. Avg. - lbs/day	**Concentration Monthly Mo. Avg. - mg/l**	**Concentration Monthly 7-day Avg. - mg/l**
Reported Value:	**58.3**	**16.6**	**29.0**
Calculated Value:	**58.3**	**16.6**	**29.0**
Permit Value:	**751**	**30.0**	**45.0**

If calculated value does not equal reported value, explain:

Equal

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:24**
Witness:	**Elizabeth Givens**			Photo #:	**1**
Description:	**Sodium hypochlorite (liquid bleach) used for disinfection.**				

Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:24**
Witness:	**Elizabeth Givens**			Photo #:	**2**
Description:	**Dosing pump for liquid feed of bleach.**				

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:26**
Witness:	**Elizabeth Givens**			Photo #:	**3**
Description:	**Additional storage tank for bleach.**				

Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:26**
Witness:	**Elizabeth Givens**			Photo #:	**4**
Description:	**Label for storage tank.**				

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:27**
Witness:	**Elizabeth Givens**			Photo #:	**5**
Description:	**Aquaculture pond in background and tank of hydrogen peroxide.**				

Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:28**
Witness:	**Elizabeth Givens**			Photo #:	**6**
Description:	**Chlorine contact chamber with greenish colored water that had clarity.**				

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:30**
Witness:	**Elizabeth Givens**			Photo #:	**7**
Description:	**End of chlorine contact chamber.**				

Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:30**
Witness:	**Elizabeth Givens**			Photo #:	**8**
Description:	**Post-aeration following flow measurement. Note foam after aeration.**				

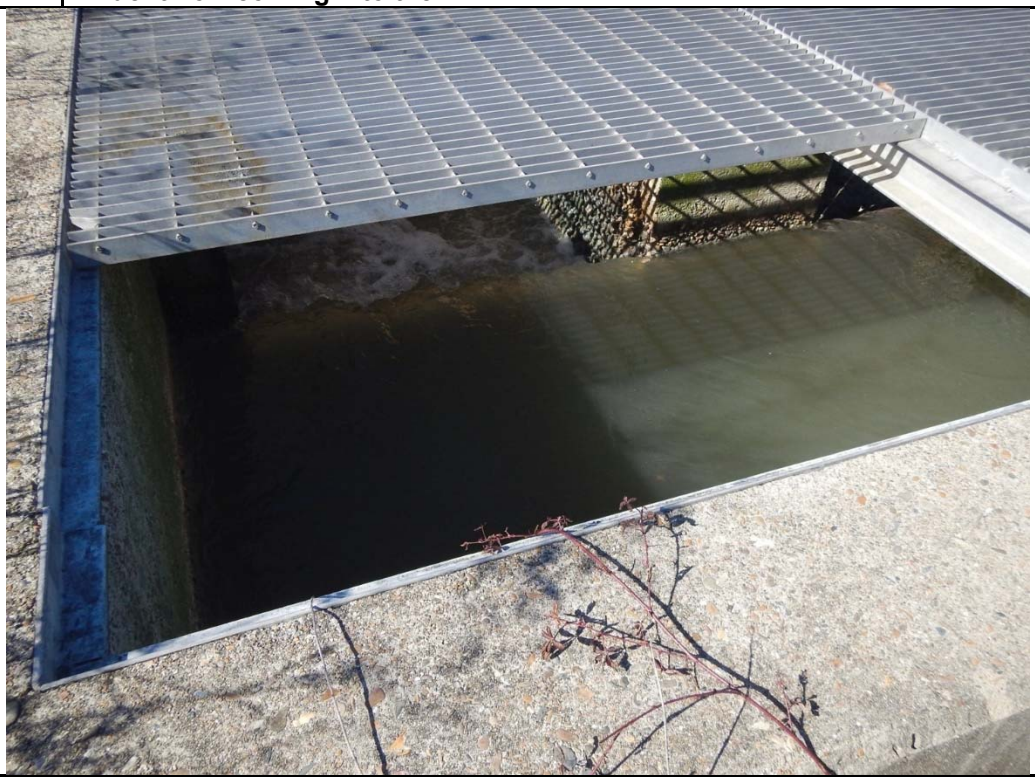
Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:34**
Witness:	**Elizabeth Givens**			Photo #:	**9**
Description:	**Foam exiting manhole and some green colored liquid on cement surface.**				

Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:34**
Witness:	**Elizabeth Givens**			Photo #:	**10**
Description:	**Foam that was lifted by wind and deposited on grass. Foam quickly dissipated.**				

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:37**
Witness:	**Elizabeth Givens**			Photo #:	**11**
Description:	**Flow over the rectangular weir with end contractions.**				

Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**10:39**
Witness:	**Elizabeth Givens**			Photo #:	**12**
Description:	**Flow totalizer with a sticker indicating that calibration needs to be performed.**				

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**11:04**
Witness:	**Elizabeth Givens**			Photo #:	**13**
Description:	**Influent flow coming into the WWTP.**				



Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**11:10**
Witness:	**Elizabeth Givens**			Photo #:	**14**
Description:	**Aerated pretreatment lagoon with high water levels.**				

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**11:12**
Witness:	**Elizabeth Givens**			Photo #:	**15**
Description:	**Aerated pretreatment lagoons with no aerators in operation.**				

Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**11:52**
Witness:	**Elizabeth Givens**			Photo #:	**16**
Description:	**Control panel for the traveling bar screen.**				

Office of Water Quality Photographic Evidence Sheet					
Location:	**City of Arkadelphia**				
Photographer:	**Michael Young**	Date:	**01/30/2024**	Time:	**11:56**
Witness:	**Elizabeth Givens**			Photo #:	**17**
Description:	**Traveling bar screen in operation.**				

Photographer:		Date:		Time:	
Witness:				Photo #:	
Description:					

Intentionally left blank.

Figure 1. Overview of City of Arkadelphia WWTP and the treatment areas indicated.