



ARKANSAS  
Department of Environmental Quality

May 12, 2014

Honorable Charles Linam  
City of Decatur  
P.O. Box 247  
Decatur, Arkansas 72722

RE: NPDES Permit Compliance Evaluation Inspection  
AFIN: 04-00052 NPDES Permit Tracking No.: AR0022292

Dear Mayor Linam:

On April 4, 2014, Matt Holden, District 1 Field Inspector, and I performed a routine permit compliance evaluation inspection of the Decatur wastewater treatment 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. The inspection revealed the following:

1. After reviewing the December 2013 and January 2014 Discharge Monitoring Reports (DMRs), it was revealed the facility experienced the following permit excursions: one excursion for Total Suspended Solids (TSS) during December 2013; and, two excursions for TSS, two excursions for Ammonia Nitrogen, seven excursions for Nitrite plus Nitrate, and three excursions for Total Phosphorous during January 2014. These violations were noted on the monthly DMRs and were also submitted to the Department on the Non-Compliance Reports. The excursions are a violation of Part I, Section A2 of the permit.
2. During the week of December 1, 2013, the facility collected two samples for the following parameters: Dissolved Oxygen, pH, Total Suspended Solids, Ammonia Nitrogen, Fecal Coliform, and CBOD. This is in violation of Part I, Section A2 of the permit. According to Mr. Boston, the facility was not decanting during a specific time frame due to an industry being shut down. However, the effluent flow was reported as the following: December 1, 2013: 0.389 MGD; December 2, 2013: 1.475 MGD; December 3, 2013: 1.500 MGD; and December 6, 2013: 0.111 MGD. This is in violation of Part I, Section A2 of the permit. The facility is required by the permit to collect and analyze these parameters at a frequency of three times a week for the following parameters: Dissolved Oxygen, pH, Total Suspended Solids, Ammonia Nitrogen, Fecal Coliform, and CBOD.
3. Facility and contract lab need to update the Standard Methods to indicate the current methods approved in the Federal Register dated May 18, 2012. For example, the facility's records indicate the Standard Method for Ammonia Nitrogen as SM 18<sup>th</sup> 4500-NH3 H.

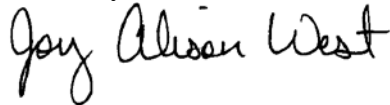
Currently, the approved Standard Method in the Federal Register is 4500–NH3 H–1997. This is in violation of Part III, Section C.8.e of the permit.

4. A noncompliance report has not been submitted to the Department for not obtaining three samples for the following parameters: Dissolved Oxygen, pH, Total Suspended Solids, Ammonia Nitrogen, Fecal Coliform, and CBOD during the week of December 1, 2013.
5. Maintenance records of the pH and Dissolved Oxygen meter are not being kept.

The above items require your immediate attention. Please submit a written response to these findings to the Water Division Inspection Branch of this Department. This response should be mailed to the address at the bottom of the first page of the letter or e-mailed to [Water-Inspection-report@adeq.state.ar.us](mailto:Water-Inspection-report@adeq.state.ar.us). This response should contain documentation describing the course of action taken to correct each item noted. This corrective action should be completed as soon as possible, and the written response with all necessary documentation (i.e. photos) is due by **May30, 2014**.

If I can be of any assistance, please contact me at 479-267-0811, ext. 12.

Sincerely,

A handwritten signature in black ink that reads "Alison West". The signature is written in a cursive, flowing style.

Alison West  
District 1 Inspector  
Water Division



**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

- I. DETAILS: Facility and contract lab need to update the Standard Methods to indicate the current methods approved in the Federal Register dated May 18, 2012. For example, the facility's records indicate the Standard Method for Ammonia Nitrogen as SM 18<sup>th</sup> 4500-NH3 H. Currently, the approved Standard Method in the Federal Register is 4500-NH3 H-1997. Maintenance records of the pH and Dissolved Oxygen meter are not being kept.

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: EQ basin available – gravity flow to EQ Basin from collection system. Mr. Boston estimated that 36-48 hours are available before hydraulic overload occurs. 1 megawatt generator is in service. S M U NA NE
4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE: Auto-Dialer for Influent 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: Collection system only 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:** During the week of December 1, 2013, the facility collected two samples for the following parameters: Dissolved Oxygen, pH, Total Suspended Solids, Ammonia Nitrogen, Fecal Coliform, and CBOD. This is in violation of Part 1, Section A2 of the permit. According to Mr. Boston, the facility was not decanting during a specific time frame due to an industry being shut down. However, the effluent flow was reported as the following: December 1, 2013: 0.389 MGD; December 2, 2013: 1.475 MGD; December 3, 2013: 1.500 MGD; and December 6, 2013: 0.111 MGD.

1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SAMPLE COLLECTION PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. SAMPLES REFRIGERATED DURING COMPOSITING:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER PRESERVATION TECHNIQUES USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. IF MONITORING IS PERFORMED MORE OFTEN THAN REQUIRED ARE RESULTS REPORTED ON THE DMR:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> 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: <b>9" Parshall Flume</b>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. CALIBRATION FREQUENCY ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
6. CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
7. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
8. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
9. HEAD MEASURED AT PROPER LOCATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

**SECTION F: LABORATORY****PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS**S M U NA NE**DETAILS:**

1. EPA APPROVED ANALYTICAL PROCEDURES USED (40 CFR 136.3 FOR LIQUIDS, 503.8(B) FOR SLUDGES) :	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
4. QUALITY CONTROL PROCEDURES ADEQUATE:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
5. DUPLICATE SAMPLES ARE ANALYZED $\geq$ 10% OF THE TIME:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
6. SPIKED SAMPLES ARE ANALYZED $\geq$ 10% OF THE TIME:	<input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
7. COMMERCIAL LABORATORY USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. LAB NAME: <b>Environmental Services Co., Inc.</b> <b>Pace Analytical Services, Inc.</b>	
b. LAB ADDRESS: <b>1107 Century Ave., Springdale, AR 72762</b> <b>9608 Loiret Blvd., Lenexa, KS 66219</b>	
c. PARAMETERS PERFORMED: <b>NH3-N, NO2+NO3, TP, CBOD, FCB, TSS</b> <b>Biomonitoring</b>	
8. BIOMONITORING PROCEDURES ADEQUATE: <b>October 2013 and January 2014 reviewed</b>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE

**SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS**

BASED ON VISUAL OBSERVATIONS ONLY S M U NA NE

DETAILS:

OUTFALL #:	OIL SHEEN	GREASE	TURBIDITY	VISIBLE FOAM	FLOATING SOLIDS	COLOR	OTHER
001	none	none	not visible	Slight	none	clear	no odor

**SECTION H: SLUDGE DISPOSAL**

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS S M U NA NE

DETAILS: Land-apply in Missouri

- |   |   |
|---|---|
| 1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY:   | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE |
| 2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503:   | <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> 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:   | <input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE |
| 2. TYPE OF SAMPLE: <input type="checkbox"/> GRAB:___ <input type="checkbox"/> COMPOSITE:___ METHOD:___ FREQUENCY:___ |  |
| 3. SAMPLES PRESERVED:  | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE |
| 4. FLOW PROPORTIONED SAMPLES OBTAINED:   | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE |
| 5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE:  | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE |
| 6. SAMPLE REPRESENTATIVE OF VOLUME AND NATURE OF DISCHARGE:  | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE |
| 7. SAMPLE SPLIT WITH PERMITTEE:  | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE |
| 8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED:   | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE |
| 9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT:  | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE |

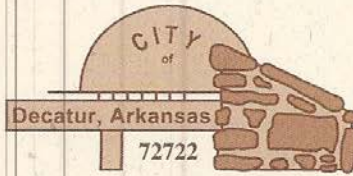
**SECTION J: STORMWATER POLLUTION PREVENTION PLAN**

STORMWATER MANAGEMENT MEETS PERMIT REQUIREMENTS S M U NA NE

DETAILS:

- |  |  |
|--|--|
| 1. SWPPP UPDATED AS NEEDED:___ DATE OF LAST UPDATE:___   | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS: | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 3. POLLUTION PREVENTION TEAM IDENTIFIED:                 | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 4. POLLUTION PREVENTION TEAM PROPERLY TRAINED:           | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 5. LIST OF POTENTIAL POLLUTANT SOURCES:                  | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS:  | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 7. ALL NON-STORMWATER DISCHARGES ARE AUTHORIZED:         | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 8. LIST OF STRUCTURAL BMPS:                              | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 9. LIST OF NON-STRUCTURAL BMPS:                          | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 10. BMPS PROPERLY OPERATED AND MAINTAINED:               | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |
| 11. INSPECTIONS CONDUCTED AS REQUIRED:                   | <input type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE |





310 Maple Avenue • P.O. Box 247

Phone: 479.752.3912

May 2, 2014

Ms. Alison West  
ADEQ  
4170 W. Martin Luther King Jr. Blvd. Suite 5  
Fayetteville, AR 72704

Dear Ms. West,

During your recent routine compliance inspection, concerns come up about sampling frequency during December 2013 and January 2014. These were cold and difficult months for us at the WWTP, and after reviewing the documents this is what happened to make it appear we did not sample "enough" during the month of December.

During the first sampling week of December we sampled the 4<sup>th</sup> and 5<sup>th</sup> and due to a snow storm that come in the 5<sup>th</sup> into the 6<sup>th</sup> the poultry processing plant did not work at all on the 6<sup>th</sup> of December which caused us to not discharge water during the work day. We had a flow on the 6<sup>th</sup> of only .111 MGD, this is a flow that we would expect on a day that the processing plant is not running. Because our WWTP makes batches of water (150 thousand gallons per batch times three SBR's) we only decanted what would be only a partial batch of water. Probably what water we were discharging from the 5<sup>th</sup> into the sixth and stopping before morning accounts for the 111,000 gallons that we discharged. If this weather event would not have happened we would have had our 12 samples for the month.

Along with the above circumstances we were off work on New Years Eve and the way the calendar fell we sampled on December 30<sup>th</sup> which fell in to the January recording month, so we had 15 sampling days reported in the month of January 2014.

I hope this explains what happened to us during those two difficult months due to the weather and holidays that we were trying to sample around. If you have any questions or concerns please call me at 479-752-3912.

Thank you,

A handwritten signature in cursive script that reads "James Boston".

James Boston  
Public Works Manager  
City of Decatur



-----Original Message-----

From: James Boston [<mailto:jboston.cod@gmail.com>]

Sent: Friday, May 02, 2014 11:38 AM

To: West, Alison

Cc: [mikeliley@gmail.com](mailto:mikeliley@gmail.com)

Subject: RE: Emailing: Decatur AR Letter 001.jpg

Ms. West,

We sample three times a week for everything except phosphorus and nitrates which are sampled for twice a week. Due to the distance and scheduling of the testing labs in NWA we try to do testing on Wednesday, Thursday, and Friday of the week; this also corresponds with the highest flows of the week. If there are holidays on Thursday or Friday we move the sampling to include Monday or Tuesday or both and work that out with the lab pick ups. I did not know that the snow storm we had on that Thursday into Friday would be the nature is was on Monday of that week. Since I have been at Decatur the Poultry plant has only closed on a weekday due to weather no more than five days that I know of. If we had discharge on the sixth of December the auto sampler would have caught the sample and we could have done the test that was not time sensitive.

I will probably have to have the help of Mike Liley to get you copies of the flow chart for the days you ask for. The flow from the monitor however tells what the flow was on the days in question much better than the hard to read chart recorder. I will however get you the chart photos as soon as possible.

Thanks,

James Boston  
City of Decatur

-----Original Message-----

From: West, Alison [<mailto:west@adeq.state.ar.us>]

Sent: Friday, May 02, 2014 10:36 AM

To: James Boston

Subject: RE: Emailing: Decatur AR Letter 001.jpg

Mr. Boston,

Please explain why a sample was not obtained on December 2 or 3. Also, please provide a picture of the flow charts for December 1-3 and December 6.

After I receive this information, I will forward it to my supervisor to see how he wants me to handle this third sample not being collected. You will be notified once I have discussed this matter with Mr. Bolenbaugh.

Thank you,

Alison West  
ADEQ-Fayetteville

-----Original Message-----

From: James Boston [<mailto:jboston.cod@gmail.com>]

Sent: Friday, May 02, 2014 10:19 AM

To: West, Alison

Subject: Emailing: Decatur AR Letter 001.jpg

Ms. West,

I have attached the letter of what occurred during the months of December 2013 and January 2014 pertaining to the sampling concerns. If you have any questions please give me a call.

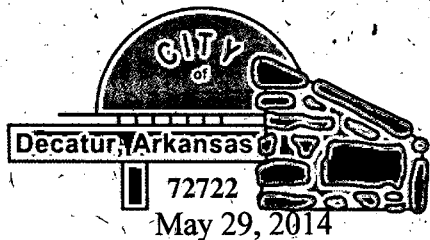
Thank you,

James Boston  
City of Decatur

The message is ready to be sent with the following file or link attachments:

Decatur AR Letter 001.jpg

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.



310 Maple Avenue • P.O. Box 247

Phone: 479.752.3912

Ms. Alison West  
Arkansas Dept. of Environmental Quality  
5301 Northshore Drive  
North Little Rock AR 72118-5317

RE: NPDES Compliance Inspection response letter. AFIN: 04-00052, NPDES Permit  
Tracking NO.: AR0022292

Dear Ms. West,

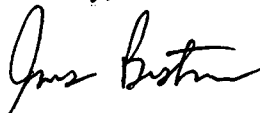
I will respond to the violations mentioned in your inspection report dated May 12, 2014 in the order you have listed them in the report...

1. The first comment pertained to the DMR violations we had during the months of December 2013 and January 2014. During the end of December and throughout January we experienced the coldest weather that we have had since the WWTP was put into operation in 2009. The decant valves that open at the end of the SBR batch's were flash freezing on us due to the extended cold and sometimes windy conditions. This was happening mainly at night and once we figured out the problem we worked diligently to get heat tracing on the valves. We replaced all the valves due to concerns that the flash freezing may have damaged the valve seats. This was a large project getting it all done timely was costly and a challenge; it has worked great. The valve problem caused the SBR batches to get out of cycle or rhythm, causing the biology to not treat the way it should.
2. The second reported violation is to us a no win situation caused by the weather. The Friday of the week in question was a sample day. Our sampling times have been our understanding to be from 10am until 3pm, during business hours. We have tried to sample from 9am until 2pm to help with lab pick up in the past, and previous inspectors have told us we must sample from 10-3pm. On this day the flow stopped at 9:08 am and momentarily started again the next day (Saturday). That day (Friday) the weather caused the closing of the local processing plant that sends us a majority of the wastewater we treat. The City of Decatur was not officially closed; however it was a get to work if you can situation. The testing lab is in Springdale and would not have picked up samples if we would have had flow to take samples. If we would have known we could have sampled earlier in the week, but believing a weather report to the letter is not possible. We did not intentionally not sample and the way I understood the inspectors we should "grab" sample if that is all we have time to do. We will get some sample in the future if possible, if this situation comes up again.

3. We contacted the contract lab and have since got the Standard Method for Ammonia changed from SM 18<sup>th</sup> 4500-NH3 H to method Number SM 1997 4500-NH3 F. The lab seems to think this is the method that we should be using. It is hard for us to know which is the correct method; your guidance would be appreciated.
4. I did not submit a non compliance report for the week of December 1<sup>st</sup> for the day we did not sample because of lack of flow. I now know that this should have been done and it will be submitted in the future.
5. We did not have pH and Dissolved Oxygen maintenance records to show during the inspection, pH probes are replaced when they begin having difficulty sloping; and the D.O. probe is replaced once a year when the device tells us to. In the future will make note in the Maintenance Quardinator we use for the plant when we do any work on the pH and Dissolved Oxygen meter.

We will continue to be diligent in insuring we stay in compliance with all aspects of our permit. If you have any questions or concerns about any of my comments you can reach me at the Decatur City Hall at 479-752-3912.

Cordially,



James Boston  
Public Works Manager  
City of Decatur

**Decatur Water & Waste Water**

P.O. Box 247 • 310 Maple Ave.  
Decatur, Arkansas 72722

NORTHWEST AR P&DF

AR 72711

30 MAY 2014 PM



02 1P  
0001682146 MAY 29 2014  
MAILED FROM ZIP CODE 72722

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