



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

## WATER DIVISION INSPECTION REPORT

AFIN: <b>61-00055</b>	PERMIT #: <b>AR0034835</b>	DATE: <b>4/20/2017</b>
COUNTY: <b>61 Randolph</b>	PDS #: <b>097252</b>	MEDIA: <b>WN</b>
GPS LAT: <b>36.240997</b> LONG: <b>-90.979810</b> LOCATION: <b>Entrance</b>		

FACILITY INFORMATION	INSPECTION INFORMATION								
NAME: <b>City of Pocahontas</b> LOCATION: <b>~0.6 miles southwest of Swan Cove</b> CITY: <b>Pocahontas</b>	FACILITY TYPE: <b>1 - Municipal</b> INSPECTOR ID#: <b>112347 S - State</b> FACILITY EVALUATION RATING: <b>N</b> INSPECTION TYPE: <b>SSO/Collection System</b>								
	<table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 25%;">DATE(S): <b>4/20/2017</b></td> <td style="width: 25%;">ENTRY TIME: <b>09:45</b></td> <td style="width: 25%;">EXIT TIME: <b>12:26</b></td> <td style="width: 25%;">PERMIT EFFECTIVE DATE: <b>3/1/2014</b></td> </tr> <tr> <td><b>4/21/2017</b></td> <td><b>13:24</b></td> <td><b>15:39</b></td> <td>PERMIT EXPIRATION DATE: <b>2/28/2019</b></td> </tr> </table>	DATE(S): <b>4/20/2017</b>	ENTRY TIME: <b>09:45</b>	EXIT TIME: <b>12:26</b>	PERMIT EFFECTIVE DATE: <b>3/1/2014</b>	<b>4/21/2017</b>	<b>13:24</b>	<b>15:39</b>	PERMIT EXPIRATION DATE: <b>2/28/2019</b>
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<b>4/21/2017</b>	<b>13:24</b>	<b>15:39</b>	PERMIT EXPIRATION DATE: <b>2/28/2019</b>						
<b>RESPONSIBLE OFFICIAL</b>									
NAME / TITLE: <b>William Daniels / Manager</b> COMPANY: <b>City of Pocahontas</b> MAILING ADDRESS: <b>207 Hwy. 67 South</b> CITY, STATE, ZIP: <b>Pocahontas AR 72455</b> PHONE & EXT. / FAX: <b>/</b> EMAIL:	FAYETTEVILLE SHALE RELATED: <b>N</b> FAYETTEVILLE SHALE VIOLATIONS: <b>N</b>								
CONTACTED DURING INSPECTION: <b>Yes</b>	<b>INSPECTION PARTICIPANTS</b>								
	NAME/TITLE/PHONE/FAX/EMAIL/ETC.: <b>Donnie McGhee/ City of Pocahontas Sewer Employee</b>								

### AREA EVALUATIONS

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

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

### SUMMARY OF FINDINGS

The following violations were noted at the time of the inspection:

1. Seagraves Pump Station was observed with a hole located near wet well (Photo 1) that discharges untreated wastewater into hole (Photo 2) in violation of the A.C.A. §8-4-217.(a)(2) Place or cause to be placed any sewage, industrial waste, or other wastes in a location where it is likely to cause pollution of any waters of this state.
2. Lakeview Pump Station adjacent manholes were not reported for overflows in violation of Part II Section B.5 of the permit. All SSOs must be reported regardless of size. Areas that have frequent overflows should be monitored more closely during wet weather.
3. Seagraves Pump Station (Photo 3) and Lakeview Pump Station was observed with high level of solids in the wet well (Photo 4) and evidence of recent overflows on adjacent manholes (Photos 5-6) near Baltz Lake in violation of Part III, Section B.1.a of the permit.
4. Seagraves Pump Station and Lakeview Pump Station were observed without audio/visual alarms in violation of Item 46 of the 10 States Standards. It is also advised that pump stations have emergency contact information visible to the public.

**GENERAL COMMENTS**



Lakeview Pump Station is in need of repair/replacement with the wet well showing signs of age and deterioration (Photos 7-8).

The collection system has been smoke tested several times to minimize I & I. More work is needed to determine the cause of I & I in the system.

Operator is in the process of updating pump stations and placing fences around pump stations.

Brent Walker, District 3 Water Inspector, also participated in this inspection.

This SSO/Collection System Inspection was performed in conjunction with a Compliance Evaluation Inspection.

INSPECTOR'S SIGNATURE:  Sarah Frasher	DATE: 5/19/2017
SUPERVISOR'S SIGNATURE:  Jason Bolenbaugh	DATE: 5/25/2017

<b>COLLECTION SYSTEM INSPECTION AND OVERALL RATING</b>		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
PROVIDE A BRIEF DESCRIPTION OF THE COLLECTION SYSTEM: <b><u>Gravity flow and pressure lines</u></b>		
POPULATION SERVED/NUMBER OF RESIDENTIAL AND COMMERCIAL CONNECTIONS: <b><u>~3,475 customers</u></b>		
FEET OF SEWER SYSTEM: <b><u>~243,464 feet</u></b>		
AGE OF SYSTEM: <b><u>1930s and newer</u></b>		
DOES THE SYSTEM EXPERIENCE PROBLEMS DURING DRY OR WET WEATHER (EXPLAIN): <b><u>High I &amp; I</u></b>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
IS THERE A SYSTEM IN PLACE FOR REPORTING SSOS TO ADEQ (DESCRIBE): <b><u>Operator reports to ADEQ</u></b>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
ARE ALL SSOs REPORTED REGARDLESS OF SIZE: <b><u>Lakeview Pump Station manholes have not been reported</u></b>		<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
HAVE SSOs REACHED "WATERS OF THE STATE" (LIST DATE AND LOCATION OF EACH): <b><u>manholes near Baltz Lake</u></b>		<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>PUMP STATIONS</b>		<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
NUMBER OF PUMP STATIONS IN SYSTEM: <b><u>21</u></b>	NUMBER WITH BACKUP POWER: <b><u>0</u></b>	
HOW OFTEN ARE PUMP STATIONS INSPECTED/MONITORED: <b><u>5/week</u></b>		
ARE MAINTENANCE RECORDS AND/OR OPERATOR LOGS KEPT: <b><u>Yes</u></b>		
ADEQUATE INVENTORY OF SPARE PARTS: <b><u>Yes</u></b>		
TYPE OF REMOTE ELECTRONIC MONITORING USED (I.E. SCADA OR AUTO DIALERS): <b><u>N/A</u></b>		
BRIEF SUMMARY OF EMERGENCY PROCEDURES: <b><u>portable generators, check valves, updating electrical boxes</u></b>		
NUMBER OF PUMP STATIONS VISITED DURING INSPECTION (SEE ATTACHED CHECKLISTS FOR EACH): <b><u>3</u></b>		
<b>SATELLITE SYSTEMS</b>		<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
DOES THE COLLECTION SYSTEM RECEIVE FLOW FROM SATELLITE SYSTEMS:		
TYPE(S) OF WASTE WATER RECEIVED: <input type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:		
BRIEFLY DESCRIBE THE SATELLITE SYSTEM:		
ANY KNOWN PROBLEMS WITH SATELLITE SYSTEM:		
NAME, ADDRESS AND PHONE NUMBER OF PERSON RESPONSIBLE FOR SATELLITE SYSTEM:		

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Seagraves Pump Station</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <b>Solids observed on top of manhole to wet well</b>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>GENERAL OPERATION AND MAINTENANCE</b>	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED: <b>Construction fence placed near hole</b>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.):	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS: <b>Grease and other solids observed in hole</b>	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <b>No audio/visual alarms. No emergency contact information posted.</b>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED):	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Baltz Field Pump Station</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input checked="" type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS:	<input type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>GENERAL OPERATION AND MAINTENANCE</b>	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED):	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

<b>PUMP STATION VISIT (COMPLETE A SEPARATE CHECKLIST FOR EACH PUMP STATION VISITED)</b>	
<b>GENERAL INFORMATION AND OVERALL EVALUATION</b>	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA
NAME AND/OR LOCATION OF PUMP STATION: <b>Lakeview Pump Station</b>	
TYPE(S) OF WASTE WATER RECEIVED: <input checked="" type="checkbox"/> RESIDENTIAL <input type="checkbox"/> COMMERCIAL <input type="checkbox"/> INDUSTRIAL <input type="checkbox"/> OTHER:	
NUMBER OF PUMPS: <u>2</u>	NUMBER OPERATIONAL: <u>2</u>
NUMBER AND SIZE OF PUMPS APPEARS ADEQUATE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
EVIDENCE OF RECENT OVERFLOWS OR HIGH LEVELS: <u>accumulation of solids near wet well lid</u>	<input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>GENERAL OPERATION AND MAINTENANCE</b>	
CLEAN AND WELL MAINTAINED WITH MINIMAL STORAGE OF UNRELATED EQUIPMENT:	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
GATES/DOORS/HATCHES/LIDS/ETC. LOCKED TO PREVENT UNAUTHORIZED ACCESS AND/OR TAMPERING:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
WET WELLS, SUMPS AND PITS ADEQUATELY COVERED, GRATED OR OTHERWISE PROTECTED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ELECTRICAL CONTROLS COVERS CONDUIT AND EQUIPMENT PROPERLY INSTALLED AND MAINTAINED:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
GUARDS AND SHIELDS IN PLACE AROUND MOVING EQUIPMENT (BELTS, PULLEYS, DRIVESHAFTS, ETC.) :	<input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input checked="" type="checkbox"/> NE
ADEQUATE VENTILATION TO PREVENT EXCESSIVE CONDENSATION AND/OR GASES AND FUMES:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
ADEQUATE LIGHTING FOR ROUTINE INSPECTION/MAINTENANCE:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SEALS, VALVES AND PACKING ADEQUATELY MAINTAINED TO PREVENT LEAKS:	<input type="checkbox"/> S <input checked="" type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
MINIMAL ACCUMULATION OF GREASE AND SOLIDS IN WET WELLS:	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
<b>BACKUP POWER AND ALARMS</b>	
PROVISIONS FOR GENERATOR AND/OR EMERGENCY TRANSFER PUMP:	<input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
AUDIBLE/VISUAL ALARM WITH EMERGENCY CONTACT INFORMATION POSTED: <u>No audio/visual alarm. No emergency contact information.</u>	<input type="checkbox"/> S <input type="checkbox"/> M <input checked="" type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE
SCADA SYSTEM (LIST PARAMETERS MONITORED):	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

**Water Division Photographic Evidence Sheet**

Location:	<b>City of Pocahontas</b>		
Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>
Witness:	<b>Brent Walker</b>	Time:	<b>10:06</b>
		Photo #:	<b>1</b>
Description:	<b>View of the Seagraves Pump Station. Note the hole near the wet well.</b>		



Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>
Witness:	<b>Brent Walker</b>	Time:	<b>10:10</b>
		Photo #:	<b>2</b>
Description:	<b>Close-up view of the hole near the wet well. Note the discharge of untreated wastewater into the hole.</b>		



**Water Division Photographic Evidence Sheet**

Location:	<b>City of Pocahontas</b>		
Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>
Witness:	<b>Brent Walker</b>	Time:	<b>10:07</b>
		Photo #:	<b>3</b>

Description: **View of the Seagraves Pump Station manhole to the wet well. Note the accumulation of solids near lid.**



Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>
Witness:	<b>Brent Walker</b>	Time:	<b>12:08</b>
		Photo #:	<b>4</b>

Description: **View of the inside of the Lakeview Pump Station wet well. Note the accumulation of solids near the lid.**





Water Division Photographic Evidence Sheet			
Location:	<b>City of Pocahontas</b>		
Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>
Witness:	<b>Brent Walker</b>	Time:	<b>12:02</b>
		Photo #:	<b>5</b>
Description:	<b>View of manhole 1 near Lakeview Pump Station. Note the evidence of an overflow near the lid.</b>		
			
Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>
Witness:	<b>Brent Walker</b>	Time:	<b>12:06</b>
		Photo #:	<b>6</b>
Description:	<b>View of manhole 2 near Lakeview Pump Station. Note the solids around the lid.</b>		
			

**Water Division Photographic Evidence Sheet**

Location:	<b>City of Pocahontas</b>				
Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>	Time:	<b>12:04</b>
Witness:	<b>Brent Walker</b>	Photo #:	<b>7</b>		
Description:	<b>View of the wet well to the Lakeview Pump Station. Note the deterioration on the outside.</b>				



Photographer:	<b>Sarah Frasher</b>	Date:	<b>4/20/2017</b>	Time:	<b>12:12</b>
Witness:	<b>Brent Walker</b>	Photo #:	<b>8</b>		
Description:	<b>View of the inside of the Lakeview Pump Station.</b>				



# ADEQ

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

May 30, 2018

Christopher Cherry, Pocahontas Waterworks Manager  
City of Pocahontas  
207 Hwy. 67 South  
Pocahontas, AR 72455

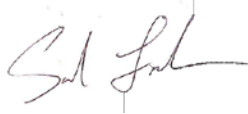
RE: City of Pocahontas Inspection Response  
Permit No.: AR0034835                      AFIN: 61-00055

Dear Mr. Cherry:

I have reviewed the response pertaining to my April 20 and 21, 2017 inspection of the City of Pocahontas. The information provided sufficiently addresses the violations referenced in my inspection report. At this time the Department has no further comment concerning this particular inspection. Acceptance of this response by the Department does not preclude any future enforcement action deemed necessary at this site or any other site.

If we need further information concerning this matter, we will contact you. Thank you for your attention to this matter. Should you have any questions, feel free to contact me at 870-935-7221 ext.-15 or you may e-mail me at [frasher@adeq.state.ar.us](mailto:frasher@adeq.state.ar.us).

Sincerely,



Sarah Frasher  
District 3 Field Inspector  
Water Division