



ARKANSAS
Department of Environmental Quality

December 31, 2019

Parnell Vann, Mayor
City of Magnolia
P.O. Box 666
Magnolia, AR 71754

RE: City of Magnolia - Big Creek Wastewater Treatment Plant Inspections (Columbia Co)
AFIN: 14-00059
Permit No.: AR0043613
ARR00C419
5279-W

Dear Mayor Vann:

On November 25, 2019, I performed a Compliance Evaluation Inspection, an SSO/Collection System Inspection, an Industrial Stormwater Inspection, and Land Application 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 each of the inspection reports is enclosed for your records.

Please refer to the "Summary of Findings" section of each of the attached inspection reports and provide a written response for each violation that was noted. This response should be mailed to the attention of the Office of Water Quality (OWQ) Compliance Branch at the address at the bottom of this letter or e-mailed to 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 **January 14, 2020**.

If I can be of any assistance, please contact me at youngm@adeq.state.ar.us or (501) 837-2073.

Sincerely,

A handwritten signature in black ink, appearing to read "Michael Young", is written over a light blue horizontal line.

Michael Young
District 8 Field Inspector
Office of Water Quality



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

WATER DIVISION INSPECTION REPORT

| | | |
|---|----------------------------|-------------------------|
| AFIN: 14-00059 | PERMIT #: AR0043613 | DATE: 11/25/2019 |
| COUNTY: 14 Columbia | PDS #: 110498 | MEDIA: WN |
| GPS LAT: 33.266603 LONG: -93.265103 LOCATION: Entrance | | |

FACILITY INFORMATION

NAME:
City of Magnolia - Big Creek Wastewater Treatment Plant

LOCATION:
72 Columbia Road 300

CITY:
Magnolia, AR 71753

RESPONSIBLE OFFICIAL

NAME: / TITLE
Parnell Vann / Mayor

COMPANY:
City of Magnolia

MAILING ADDRESS:
P.O. Box 666

CITY, STATE, ZIP:
Magnolia AR 71754

PHONE & EXT: / FAX:
870-234-1375 /

EMAIL:
parnellvan2010

CONTACTED DURING INSPECTION: **No**

INSPECTION INFORMATION

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|--|--|
| FACILITY TYPE: 1 - Municipal | INSPECTOR ID#: 101531 S - State |
| FACILITY EVALUATION RATING: 4 - Satisfactory | INSPECTION TYPE: Compliance Evaluation |
| DATE(S): 11/25/2019 | ENTRY TIME: 10:00 EXIT TIME: 14:11 |
| 4/23/2018 | 13:00 16:00 |
| PERMIT EFFECTIVE DATE: 2/1/2019 | |
| PERMIT EXPIRATION DATE: 1/31/2024 | |

FAYETTEVILLE SHALE RELATED: **N**

FAYETTEVILLE SHALE VIOLATIONS: **N**

INSPECTION PARTICIPANTS

NAME/TITLE/PHONE/FAX/EMAIL/ETC.:
Russell Thomas/Superintendent/870-234-1375
Tracie Love/Operator/870-234-1375
Brittanie Gloyd/ADEQ D7 Water Inspector

AREA EVALUATIONS

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

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

SUMMARY OF FINDINGS

1.) Composite samples for WET testing and effluent monitoring are not being collected as a flow-weighted composite. This is a violation of permit conditions Part II. (10.) (B.) (iv.) (b.). and Part IV. (9.).

GENERAL COMMENTS

On November 26, 2019, I performed an inspection of the City of Magnolia – Big Creek WWTP with the above participants. City of Magnolia – Big Creek WWTP has a treatment system consisting of an equalization/surge basin (used only during high flows), pH adjustment, bar screening, grit screening, oxidation ditch, two clarifiers, chlorine disinfection, dechlorination, post-aeration, sludge thickening, and a Class A biosolids dryer. On December 12, 2016, the City of Magnolia – Big Creek WWTP received a Consent Administrative Order (CAO Lis. #16-097) for numerous effluent violations. As a response to the CAO, the facility added a continuous pH adjustment unit, removed sludge from the equalization basin, and completed smoke testing on the collection system. On September 6, 2019, a closure letter was received for CAO Lis. #16-097. Following the closure letter, this facility has had one effluent violation for Ammonia-Nitrogen. This inspection consisted of a facility inspection and records review.


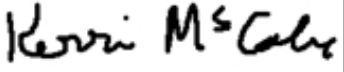
Facility Inspection:

This inspection started at the headworks and ended at Outfall 001 and the discharge to UT of Big Creek (see Figure 2). Influent wastewater enters a collection basin (see Photo 1) and there is a feed of chemical that can be added when the continuous pH meter drops below 6.5 s.u. (see Photos 2-5). Wastewater then passes through an automatic bar screen that has a manual bar screen that is used during maintenance and outages of the automatic (see Photo 6). Grit screening happens after the bar screen (see Photo 7) and wastewater then passes through an influent Parshall flume and totalizer (see Photo 8). I observed pumping of return activated sludge (RAS) into the oxidation ditch (see Photo 9-11). Wastewater leaves the oxidation ditch and passes through booms and a board used for skimming (see Photo 12). After the oxidation ditch, wastewater enters the clarifiers (only one was in operation at time of inspection) and I did observe some minor pin-floc in the clarifier (see Photos 13-16). After the clarifiers, there is a set of pumps (see Photo 17) to pump from the bottom of the clarifiers to RAS or waste activated sludge (WAS), which is sent to the sludge thickener. Chlorine contact takes place in a chamber (see Photo 18) followed by dechlorination and post-aeration (see Photos 18-20) and finally flow monitoring and sampling at a Parshall flume (see Photos 21-22). Chlorine and sulfur dioxide canisters are stored near the dosing location (see Photo 23). This facility utilizes the original wastewater lagoon as an equalization basin during high flows and I observed no issues with the basin (see Photos 24-25). Effluent discharged from Outfall 001 was clear and the UT of Big Creek had no issues related to the discharge of partially or inadequately treated wastewater (see Photos 26-27). I then observed the sludge thickener (see Photos 28-29) and the sludge drying process (see Photos 30-36) and several prepared bags of Class A Biosolids for public use. This facility was operating extremely well during the inspection and operator Tracie Love stated there have been no issues with the operation of the plant. There is currently no backwashing of drinking water from the Magnolia Municipal Water System (NPDES permit AR0052736) as the drinking water right now is from well water and not treated surface water from the water treatment plant. I advised Mr. Thomas and Ms. Love to monitor the discharges from the water system closely and manage them to avoid slug loads to the oxidation ditch.

Records Review:

During the inspection, I reviewed some records onsite and took copies of laboratory data for further review. I found no issues with the records inspected. Currently, this facility uses the Southern Arkansas University – Natural Resource Research Center (SAU-NRRC) as the main lab to collect and analyze the wastewater samples. Analysis of Total Phosphorus and metals are sub-contracted to Arkansas Analytical; Total Mercury is subcontracted to Mercury One LTD.; and WET testing is performed by Bio-Analytical. All analysis and Chain of Custody records reviewed were complete and correctly entered into NetDMR. In reviewing the Total Phosphorus and Total Lead analysis, I observed some strike-through on the analysis and Chain of Custody forms that were incorrect (see Photos 39-40). When correcting lab forms, a single strike-through is required. Also, when discussing sampling for WET testing and composite sampling it was determined that this facility is not completing flow-weighted compositing. This facility is currently sampling a time-weighted composite. We discussed flow-weighted composite sampling and I have included information describing a flow-weighted composite (see included attachment).

Note: Complete CEI/SSO inspections were conducted on April 23, 2018 by Inspector Supervisor Kerri McCabe. No inspection reports were generated or mailed for the CEI/SSO, and there were no major concerns associated with the site at the time of the inspections.

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| INSPECTOR'S SIGNATURE:  | DATE: 12/16/2019 |
| SUPERVISOR'S SIGNATURE:  | DATE: 12/30/2019 |

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

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| SECTION D: SAMPLING | |
| PERMITTEE SAMPLING MEETS PERMIT REQUIREMENTS | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE |
| DETAILS: | |
| 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 type="checkbox"/> Y <input checked="" 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 checked="" type="checkbox"/> Y <input 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 | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE |
| DETAILS: | |
| 1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED:___ TYPE OF DEVICE: | <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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE |
| 5. RECORDS MAINTAINED OF CALIBRATION PROCEDURES: | <input checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input 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 | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input 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 checked="" type="checkbox"/> Y <input type="checkbox"/> N <input type="checkbox"/> NA <input 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: <u>Southern Arkansas University – Natural Resource Research Center (SAU-NRRC), Arkansas Analytical, Mercury One LTD, Bio-Analytical</u> | |
| b. LAB ADDRESS: <u>Magnolia, AR, Little Rock, AR, Doyline, LA</u> | |
| c. PARAMETERS PERFORMED: <u>All analysis performed by SAU-NRRC except subcontract Total Phosphorus, Total Mercury, Metals, WET Testing</u> | |
| 8. BIOMONITORING PROCEDURES ADEQUATE: | <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 |

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|--|-----------|--------|-----------|--------------|-----------------|---|-------|
| SECTION G: EFFLUENT/RECEIVING WATERS OBSERVATIONS | | | | | | | |
| BASED ON VISUAL OBSERVATIONS ONLY | | | | | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE | |
| DETAILS: | | | | | | | |
| OUTFALL #: | OIL SHEEN | GREASE | TURBIDITY | VISIBLE FOAM | FLOATING SOLIDS | COLOR | OTHER |
| 001 | No | No | No | No | No | Colorless | -- |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| | | | | | | | |
| SECTION H: SLUDGE DISPOSAL | | | | | | | |
| SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS | | | | | | <input checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input type="checkbox"/> NE | |
| DETAILS: | | | | | | | |
| 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 checked="" type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input type="checkbox"/> NA <input 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 | | | | | | <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| DETAILS: | | | | | | | |
| 1. SAMPLES OBTAINED THIS INSPECTION: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" 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: STORM WATER POLLUTION PREVENTION PLAN | | | | | | | |
| STORM WATER MANAGEMENT MEETS PERMIT REQUIREMENTS | | | | | | <input type="checkbox"/> S <input type="checkbox"/> M <input type="checkbox"/> U <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| DETAILS: | | | | | | | |
| 1. SWPPP UPDATED AS NEEDED:___ DATE OF LAST UPDATE:___ | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 2. SITE MAP INCLUDING ALL DISCHARGES AND SURFACE WATERS: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 3. POLLUTION PREVENTION TEAM IDENTIFIED: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 4. POLLUTION PREVENTION TEAM PROPERLY TRAINED: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 5. LIST OF POTENTIAL POLLUTANT SOURCES: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 6. LIST OF POTENTIAL SOURCES AND PAST SPILLS AND LEAKS: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 7. ALL NON-STORM WATER DISCHARGES ARE AUTHORIZED: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 8. LIST OF STRUCTURAL BMPS: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 9. LIST OF NON-STRUCTURAL BMPS: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 10. BMPS PROPERLY OPERATED AND MAINTAINED: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| 11. INSPECTIONS CONDUCTED AS REQUIRED: | | | | | | <input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE | |
| | | | | | | | |

FLOW CALCULATION SHEET

| | | | | | | |
|---|------------------|-------|-------------------|-----------------|--------------------------------|--|
| Date: 11/26/2016 | | | | | Time: 13:12 | |
| Head in Inches: | | | Feet: 0.55 | | | |
| Type & Size of Primary Flow Measurement Device: 18" Parshall Flume | | | | | | |
| Name & Model of Secondary Flow Measurement Device: | | | | | Siemens Hydroranger 200 | |
| Date of last Calibration of Secondary Flow Device: | | | | | 4-23-19 | |
| Recorded Flow at Date & Time Listed Above: | | | | 1193 GPM | (Facility Flow Meter) | |
| Calculated Flow at Date & Time Listed Above: | | | | 1184 GPM | | |
| (Flow is calculated using flow charts in: <u>ISCO Open Channel Flow Measurement Handbook-5th Edition</u>) | | | | | | |
| % Error = | Recorded Value | - | Calculated Value | X 100 | | |
| | Calculated Value | | | | | |
| % Error = | 1193 | - | 1184 | X 100 | | |
| | 1184 | | | | | |
| % Error = | 9 | X 100 | | | | |
| | 1184 | | | | | |
| % Error = | 0.007 | X 100 | | | | |
| % Error = | 0.7 | % | | | | |
| Comments: <u>Within 10%</u> | | | | | | |
| | | | | | | |
| | | | | | | |

DMR Calculation Check

| | | | | | | | | |
|-------------------|------|-------------|-----------|-----------|----|-------------|-----------|-----------|
| Reporting Period: | From | <u>2019</u> | <u>01</u> | <u>01</u> | To | <u>2019</u> | <u>01</u> | <u>31</u> |
| | | Year | Month | Day | | Year | Month | Day |

Parameter Checked: TSS

| | Loading Mass Mo. Avg. - lbs/day | Concentration Monthly Mo. Avg. - mg/l | 7-day Avg. - mg/l |
|-------------------|---------------------------------------|---|-------------------|
| Reported Value: | 197.78 | 6.1 | 14.3 |
| Calculated Value: | 197.78 | 6.1 | 14.3 |
| Permit Value: | 313 | 15 | 22.5 |

If calculated value does not equal reported value, explain:

Equal

Parameter Checked: CBOD5

If calculated value does not equal reported value, explain:

Inspection Report Page 9 of 31

Water Division Photographic Evidence Sheet

| | | | |
|---------------|---------------------------------------|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:47 |
| | | Photo #: | 1 |
| Description: | Influent wastewater. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:49 |
| | | Photo #: | 2 |
| Description: | Wastewater from sludge thickener and WWTP restrooms/facilities and pH adjustment chemical, when needed. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:49 |
| | | Photo #: | 3 |
| Description: | Chemical additive for pH control and pump. | | |



| | | | |
|---------------|----------------------------------|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:51 |
| | | Photo #: | 4 |
| Description: | Pump for adding chemical. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:51 |
| | | Photo #: | 5 |
| Description: | pH meter for automatic dosing to control pH. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:52 |
| | | Photo #: | 6 |
| Description: | Manual and automatic bar screening after pH adjustment. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:51 |
| | | Photo #: | 7 |
| Description: | Grit screening trash collection. | | |



| | | | |
|---------------|---------------------------------|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:51 |
| | | Photo #: | 8 |
| Description: | Influent Parshall flume. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|--|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:54 |
| | | Photo #: | 9 |
| Description: | RAS entering oxidation ditch. Ratios controlled using sludge age and MLVSS. | | |



| | | | |
|---------------|---------------------------------------|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:56 |
| | | Photo #: | 10 |
| Description: | Wastewater in oxidation ditch. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 12:57 |
| | | Photo #: | 11 |
| Description: | Aerated wastewater in oxidation ditch. | | |



| | | | |
|---------------|---|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:00 |
| | | Photo #: | 12 |
| Description: | Discharge from oxidation ditch to clarifiers. Note booms and board act as skimmer. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|--|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:03 |
| | | Photo #: | 13 |
| Description: | Activated sludge from the oxidation ditch to the clarifier. | | |



| | | | |
|---------------|---|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:02 |
| | | Photo #: | 14 |
| Description: | Water in clarifier. Some pin-floc was evident. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:02 |
| | | Photo #: | 15 |
| Description: | Skimmer arm and weir teeth in clarifier. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:04 |
| | | Photo #: | 16 |
| Description: | Clarifier not in use during inspection. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:06 |
| | | Photo #: | 17 |
| Description: | Pumps for return and waste activated sludge. | | |



| | | | |
|---------------|----------------------------------|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:07 |
| | | Photo #: | 18 |
| Description: | Chlorine contact chamber. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|--|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:07 |
| | | Photo #: | 19 |
| Description: | Dechlorination and post-aeration. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:11 |
| | | Photo #: | 20 |
| Description: | Dechlorination and post-aeration. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|--|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:12 |
| | | Photo #: | 21 |
| Description: | Parshall flume and location of totalizer. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:12 |
| | | Photo #: | 22 |
| Description: | Parshall flume with staff gage. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|--|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:14 |
| | | Photo #: | 23 |
| Description: | Chlorine and Sulfur Dioxide storage and dosing. | | |



| | | | |
|---------------|----------------------------------|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:17 |
| | | Photo #: | 24 |
| Description: | Equalization/surge basin. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---------------------------------------|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:17 |
| | | Photo #: | 25 |
| Description: | Equalization/surge basin. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:16 |
| | | Photo #: | 26 |
| Description: | Outfall 001 discharging to UT of Big Creek, | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:17 |
| | | Photo #: | 27 |
| Description: | UT of Big Creek with discharge from Outfall 001. | | |



| | | | |
|---------------|--------------------------|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:24 |
| | | Photo #: | 28 |
| Description: | Sludge thickener. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---------------------------------------|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:24 |
| | | Photo #: | 29 |
| Description: | Sludge thickener. | | |



| | | | |
|---------------|----------------------------------|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:27 |
| | | Photo #: | 30 |
| Description: | Centrifugal dewater unit. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---------------------------------------|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:27 |
| | | Photo #: | 31 |
| Description: | Sludge after water removal. | | |



| | | | |
|---------------|---|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:28 |
| | | Photo #: | 32 |
| Description: | Heating units for sludge drying. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:28 |
| | | Photo #: | 33 |
| Description: | Sludge heater with temperatures of 494-507° F. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:28 |
| | | Photo #: | 34 |
| Description: | Cooling tank for heated sludge. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|--|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:28 |
| | | Photo #: | 35 |
| Description: | Cooling tank for heated sludge. | | |



| | | | |
|---------------|---|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:29 |
| | | Photo #: | 36 |
| Description: | Conveyer belt after cooling of dried sludge. | | |



Water Division Photographic Evidence Sheet

| | | | |
|---------------|---|----------|-------------------|
| Location: | City of Magnolia - Big Creek W | | |
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:26 |
| | | Photo #: | 37 |
| Description: | Class A biosolids packaged for citizens of Magnolia. | | |



| | | | |
|---------------|--|----------|-------------------|
| Photographer: | Michael Young | Date: | 11/26/2019 |
| Witness: | Brittanie Gloyd | Time: | 13:26 |
| | | Photo #: | 38 |
| Description: | Dried and packaged Class A biosolids. | | |



Figure 1. Overview of location of equalization/surge basin and activated sludge WWTP in Magnolia, AR.



Figure 2. Overview of working components in WWTP at City of Magnolia – Big Creek WWTP.



From: [Wastewater System Magnolia](#)
To: [Water-Inspection-Report](#)
Subject: inspection report response for AR0043613 AFIN: 14-00059
Date: Monday, January 13, 2020 3:32:40 PM
Attachments: [response adeq inspect 2019.docx](#)

Please see attached letter

Russell Thomas, Superintendent
City of Magnolia Big-Creek WWTP
NPDES No.AR0043613 AFIN: 14-00059

**CITY OF MAGNOLIA
WASTEWATER SYSTEM
P.O. BOX 666
MAGNOLIA, ARKANSAS 71754-066
(870) 234-2955
mwws@sbcglobal.net
Permit No. 5279-W**

NPDES Permit No. AR0043613

AFIN: 1400059

January 13, 2020
Office of Water Quality Compliance Branch
ADEQ
5301 Northshore Drive.
North Little Rock, Arkansas 72118-5317

RE: Response to inspection findings, City of Magnolia Big-Creek Treatment Plant. Permit No. AR0043613
And permit 5279-W. AFIN; 14-0059.

Dear Sir,

As instructed, I am submitting a written response to each violation that has been noted in the "Summary of Findings" in the inspection report of November 15, 2019.

Permit No. AR0043613

Summary of Findings; "Composite samples for WET testing and effluent monitoring are not being collected as a flow –weighted composite".

RESPONSE; As soon as we purchase a new sampler and have it set up to take a flow weighted composite samples we will forward the needed documentation to your office.

Permit No. 5279-W

Summary of Findings; This facility has not submitted an annual report for years 2017 and 2018.

RESPONSE; this was due to my oversight. There has not been, nor will be any applications of bio-solids to this permit site. The City of Magnolia –Magnolia Wastewater decided to contract the removal and disposal of its bio-solids from our equalization pond to DRT Biosolids from Bloomer Wisconsin. This site was inspected by ADEQ field inspectors Michael Young and Brittanie Gloyd to verify no-discharge. I will submit the same information to the office of Water Quality, No – discharge section as specified in the permit.

If you have any questions, feel free in contacting me at 870-234-2955

Thank you,

Russell Thomas, Superintendent
City of Magnolia-Big Creek WWTP

CITY OF MAGNOLIA
WASTEWATER SYSTEM
P.O. BOX 666
MAGNOLIA, ARKANSAS 71754-066
(870) 234-2955
mwws@sbcglobal.net
Permit No. 5279-W

NPDES Permit No. AR0043613

AFIN: 1400059

**CITY OF MAGNOLIA
WASTEWATER SYSTEM
P.O. BOX 666
MAGNOLIA, ARKANSAS 71754-066
(870) 234-2955
mwws@sbcglobal.net
Permit No. 5279-W**

NPDES Permit No. AR0043613
January 13, 2020

AFIN: 1400059

Office of Water Quality Compliance Branch
ADEQ
5301 Northshore Drive.
North Little Rock, Arkansas 72118-5317

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If you have any questions, feel free in contacting me at 870-234-2955

Thank you,



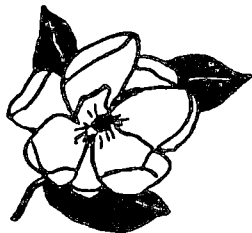
Russell Thomas, Superintendent
City of Magnolia-Big Creek WWTP

MAGNOLIA WASTEWATER SYSTEM

P.O. Box 666

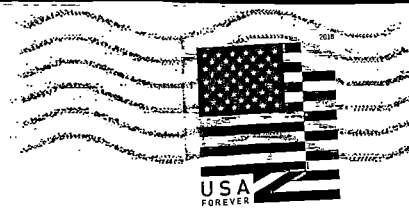
Magnolia, Arkansas

71754-0666



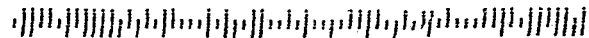
LITTLE ROCK AR 722

29 JAN 2020 PM 4:1



Office of Water Quality Compliance Branch
ADEQ
5301 Northshore Drive.
North Little Rock, Arkansas 72118-5317

72118-531793





January 22, 2020

Parnell Vann, Mayor
City of Magnolia
P.O. Box 666
Magnolia, AR 71754

RE: City of Magnolia - Response to Inspection (Columbia Co)
AFIN: 14-00059 **Permit No.: AR0043613**
ARR00C419
5279-W

Dear Mayor Vann:

I have reviewed the response pertaining to my November 25, 2019 inspections of the City of Magnolia – Big Creek Wastewater Treatment Plant, collection system, and biosolids land application site. The information provided sufficiently addresses the violations referenced in my inspection reports. At this time, the Department has no further comment concerning these particular inspections. 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 (501) 837-2073 or you may e-mail me at youngm@adeq.state.ar.us.

Sincerely,

A handwritten signature in dark ink, appearing to read "Michael Young".

Michael Young
District 8 Field Inspector
Office of Water Quality