

ADEQ

ARKANSAS
Department of Environmental Quality

May 15, 2020

Joe Doss Phillips, Executive Director
City of Texarkana
PO Box 2008
Texarkana, TX 75504

RE: City of Texarkana - North WWTP Inspections (Miller Co)
AFIN: 46-00237 **NPDES Permit No.: AR0048691**
ARR00C484

Dear Mr. Phillips:

On April 29, 2020, I performed a Compliance Evaluation Inspection, an SSO/Collection System Inspection, and an Industrial Stormwater Inspection of the above-referenced facility in accordance with the provisions of the Federal Clean Water Act, the Arkansas Water and Air Pollution Control Act, and the regulations promulgated thereunder. A copy of 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 **May 29, 2020**.

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

Sincerely,



Michael Young
District 8 Inspector
Office of Water Quality

 A R K A N S A S Department of Environmental Quality	WATER DIVISION INSPECTION REPORT				
	AFIN: 46-00237	PERMIT #: AR0048691	DATE: 4/29/2020		
	COUNTY: 46 Miller	PDS #: 111868	MEDIA: WN		
	GPS LAT: 33.503137 LONG: -94.017011 LOCATION: Entrance				
FACILITY INFORMATION		INSPECTION INFORMATION			
NAME: City of Texarkana - North WWTP LOCATION: 8301 Sanderson Lane CITY: Texarkana, AR 71854		FACILITY TYPE: 1 - Municipal INSPECTOR ID#: 101531 S - State FACILITY EVALUATION RATING: 2 - Marginal INSPECTION TYPE: Compliance Evaluation			
RESPONSIBLE OFFICIAL		DATE(S): 4/29/2020 ENTRY TIME: 11:02 EXIT TIME: 13:42 PERMIT EFFECTIVE DATE: 10/31/2009 PERMIT EXPIRATION DATE: 10/31/2014			
NAME / TITLE: Joe Doss Phillips / Executive Director COMPANY: City of Texarkana MAILING ADDRESS: PO Box 2008 CITY, STATE, ZIP: Texarkana TX 75504 PHONE & EXT. / FAX: 903-798-3821 / 903-793-0610 EMAIL: phillips@txkusa.org		INSPECTION PARTICIPANTS			
CONTACTED DURING INSPECTION: No		NAME/TITLE/PHONE/FAX/EMAIL/ETC.: Ronald Ward/Operator (Lic. #008227)/903-798-3821			
AREA EVALUATIONS (S=Satisfactory, M=Marginal, U=Unsatisfactory, N=Not Applicable/Evaluated)					
S	PERMIT	S	FLOW MEASUREMENT	S	STORMWATER
S	RECORDS/REPORTS	M	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					
<p>1.) At the time of inspection, the Dissolved Oxygen (DO) meter calibration was being performed as a liquid saturation without the appropriate buffer and not an air saturation method. This is a violation of permit condition Part III. (C.) (3.).</p> <p>2.) The thermometer in the composite sampler has no recorded calibration (see Photo 21). This is a violation of permit condition Part III. (C.) (3.).</p> <p>3.) There are no written Standard Operating Procedures (SOPs) at the North Texarkana WWTP for the laboratory analyses that are conducted in the lab of the North Texarkana WWTP. This is a violation of permit condition Part III. (C.) (3.).</p> <p>4.) In February 2020, there was an exceedance of the 7-day average of flow and the non-compliance report (NCR) included did not have all the information required (see Photo 27). This is a violation of permit condition Part III. (D.) (7.).</p>					

GENERAL COMMENTS


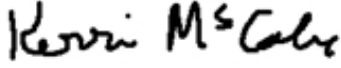
On April 29, 2020, I performed an inspection at the City of Texarkana – North Texarkana WWTP with the above participants in attendance. North Texarkana WWTP has a treatment system that consists of a lift station, bar screen, grit removal, aerated activated sludge, secondary clarification, post-aeration, and UV disinfection. Flow is measured through a Parshall flume with a secondary totalizer. Sampling is completed as grabs and composites by the staff of the WWTP, and there is a refrigerated automatic composite sampler at Outfall 001. Laboratory analysis is completed in the Texarkana Water Utilities (TWU) laboratory in Texas, which is under the jurisdiction of Texas Commission on Environmental Quality (TCEQ). This inspection consisted of a facility inspection and records review.

Facility Inspection:

I started the inspection at the influent lift station (see Photos 1-2) and continued to the aeration basins (see Photos 3-4). Only one aeration basin was in operation at the time of inspection. The operator, Donald Ward, stated that the system is operated with a single aeration basin and single clarifier each month; and on the 10th, the system alternates the treatment components. Following the aeration basin, wastewater enters the secondary clarification unit (see Photos 5-6) in which sludge is wasted from the clarifier to a pump station wet well and is pumped to the City of Texarkana WWTP in Texas (see Photos 7-8). I observed the second clarifier to be empty (see Photo 9) and Mr. Ward stated that he would initiate it into service on the 10th. Following clarification, wastewater enters a post-aeration basin (see Photo 10) and is then routed through UV disinfection (see Photos 11-12). Following disinfection, wastewater is routed through a Parshall flume that has a secondary totalizer (see Photos 13-18). Sampling is completed following step-aeration (see Photo 19) and there is a refrigerated composite sampler at the collection point for Outfall 001 (see Photos 20-21). Composite samples are collected as a 24-hour composite with equal aliquots collected every hour. Mr. Ward supplied evidence that the aliquots are then composited as a flow-weighted sample (see Photo 22). Laboratory analysis of Ammonia-Nitrogen (NH₃-N), pH, and DO are performed at the North Texarkana WWTP by Mr. Ward. NH₃-N is analyzed in a spectrophotometer and the correct reagents were in date (see Photos 24-25). I requested Mr. Ward to perform a calibration of the DO and pH meters and observed that the calibration for the DO meter was being completed in a setting that required a buffer. Mr. Ward was using the method to calibrate in a water-saturated air environment, and I showed him how to correctly select percent (%) saturation instead of mg/L (see Photos 26-27). The pH calibration is being completed correctly with buffers that are not expired (see Photo 28).

Records Review:

Sampling for composites and grab samples are collected by the North Texarkana WWTP. Composite samples are collected as a 24-hour composite with equal aliquots collected every hour. Mr. Ward supplied evidence that the aliquots are then composited as a flow-weighted sample (see Photo 22). I informed Mr. Ward that this facility is only required to perform a 3-hour composite according to the permit. Mr. Ward maintains all records in a very orderly fashion at the WWTP laboratory building. I reviewed entries in NetDMR, flow records, analysis information, and chain of custody (COC) forms for 2020. There were no issues identified in the records review.

INSPECTOR'S SIGNATURE:  Michael Young	DATE: 5/12/2020
SUPERVISOR'S SIGNATURE:  Kerri McCabe	DATE: 5/13/2020

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 checked="" type="checkbox"/> N <input 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

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 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 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: <u>Parshall Flume</u>	<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 type="checkbox"/> Y <input checked="" type="checkbox"/> N <input type="checkbox"/> NA <input type="checkbox"/> NE
a. LAB NAME:	
b. LAB ADDRESS:	
c. PARAMETERS PERFORMED:	
8. BIOMONITORING PROCEDURES ADEQUATE:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
a. PROPER ORGANISMS USED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
b. PROPER DILUTION SERIES FOLLOWED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
c. PROPER TEST METHODS AND DURATION:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE
d. RETESTS AND/OR TRE PERFORMED AS REQUIRED:	<input type="checkbox"/> Y <input type="checkbox"/> N <input checked="" type="checkbox"/> NA <input type="checkbox"/> NE

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: <u>Waste Activated Sludge (WAS) is pumped and piped to the WWTP in Texas.</u>							
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: **4/29/2020** Time: **11:54**

Head in Inches: **6.48** Feet: **0.54**

Type & Size of Primary Flow Measurement Device: **9" Parshall Flume**

Name & Model of Secondary Flow Measurement Device: **Endress+Hauser FMU90**

Date of last Calibration of Secondary Flow Device: **4/30/2019**

Recorded Flow at Date & Time Listed Above: **0.77 MGD** (Facility Flow Meter)

Calculated Flow at Date & Time Listed Above: **0.7729**

(Flow is calculated using flow charts in: ISCO Open Channel Flow Measurement Handbook-5th Edition)

% Error =	Recorded Value	-	Calculated Value	X 100
	Calculated Value			

% Error =	0.77	-	0.7729	X 100
	0.7729			

% Error =	-0.0029	X 100
	0.7729	

% Error =	-0.0037	X 100
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% Error =	0.3	%
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Comments: **Within 10%.**

DMR Calculation Check

Reporting Period: From 2020 02 01 To 2020 02 29
 Year Month Day Year Month Day

Parameter Checked: Flow

	Loading		Concentration	
	Mass		Monthly	
	Mo. Avg. - lbs/day/ 7-day Average		Mo. Avg. - mg/l	7-day Avg. - mg/l
Reported Value:	<u>0.732/1.23</u>		<u>N/A</u>	<u>N/A</u>
Calculated Value:	<u>0.732/1.23</u>		<u>N/A</u>	<u>N/A</u>
Permit Value:	<u>Report/0.95</u>		<u>N/A</u>	<u>N/A</u>

If calculated value does not equal reported value, explain:

Equal

Facility exceeded flow 7-day average requirement.

Non-compliance report (NCR) was incomplete for this exceedance (see Photo 29).

DMR Calculation Check

Reporting Period: From 2020 01 01 To 2020 01 31
 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:	<u>47.2</u>	<u>13.9</u>	<u>22.8</u>
Calculated Value:	<u>47.2</u>	<u>13.9</u>	<u>22.8</u>
Permit Value:	<u>118.8</u>	<u>15</u>	<u>22.5</u>

If calculated value does not equal reported value, explain:

Equal.

TSS exceeded limits.

Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:43
		Photo #:	1
Description:	Influent wet well for WWTP.		



Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	
		Photo #:	2
Description:	Influent wet well for WWTP.		



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Time:	11:46	Witness:	
Photo #:	3		

Description: **Aerated activated sludge basin in operation.**



Photographer:	Michael Young	Date:	04/29/2020
Time:	11:46	Witness:	
Photo #:	4		

Description: **Aerated activated sludge basin in operation. Basin on right of photo not in operation.**



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP				
Photographer:	Michael Young	Date:	04/29/2020	Time:	11:50
Witness:				Photo #:	5
Description:	Secondary clarifier in operation.				



Photographer:	Michael Young	Date:	04/29/2020	Time:	11:50
Witness:				Photo #:	6
Description:	Secondary clarifier in operation.				



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:48
		Photo #:	7
Description:	WAS from the clarifier is pumped to main Texarkana WWTP in Texas.		



Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:48
		Photo #:	8
Description:	WAS from the clarifier is pumped to main Texarkana WWTP in Texas.		



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Time:	11:49	Witness:	
Photo #:	9		
Description:	Secondary clarifier not in operation during inspection.		



Photographer:	Michael Young	Date:	04/29/2020
Time:	11:51	Witness:	
Photo #:	10		
Description:	Post-aeration basin following secondary clarification.		



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:51
		Photo #:	11

Description: **UV lights in operation.**



Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:51
		Photo #:	12

Description: **Power units and ballasts for UV lights.**



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP				
Photographer:	Michael Young	Date:	04/29/2020	Time:	11:52
Witness:				Photo #:	13
Description:	Wastewater following UV treatment prior to sampling for flow.				



Photographer:	Michael Young	Date:	04/29/2020	Time:	11:52
Witness:				Photo #:	14
Description:	Primary flow measuring device				



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP				
Photographer:	Michael Young	Date:	04/29/2020	Time:	11:53
Witness:				Photo #:	15
Description:	Secondary flow measuring device				



Photographer:	Michael Young	Date:	04/29/2020	Time:	11:53
Witness:				Photo #:	16
Description:	Secondary flow measuring device				



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:53
		Photo #:	17
Description:	Secondary flow measuring device with calibration sticker		



Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:54
		Photo #:	18
Description:	Primary flow measuring device with staff gauge		



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:54
		Photo #:	19

Description: **Auto-sampler line at outfall**



Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:54
		Photo #:	20

Description: **Auto-sampler with aliquots**

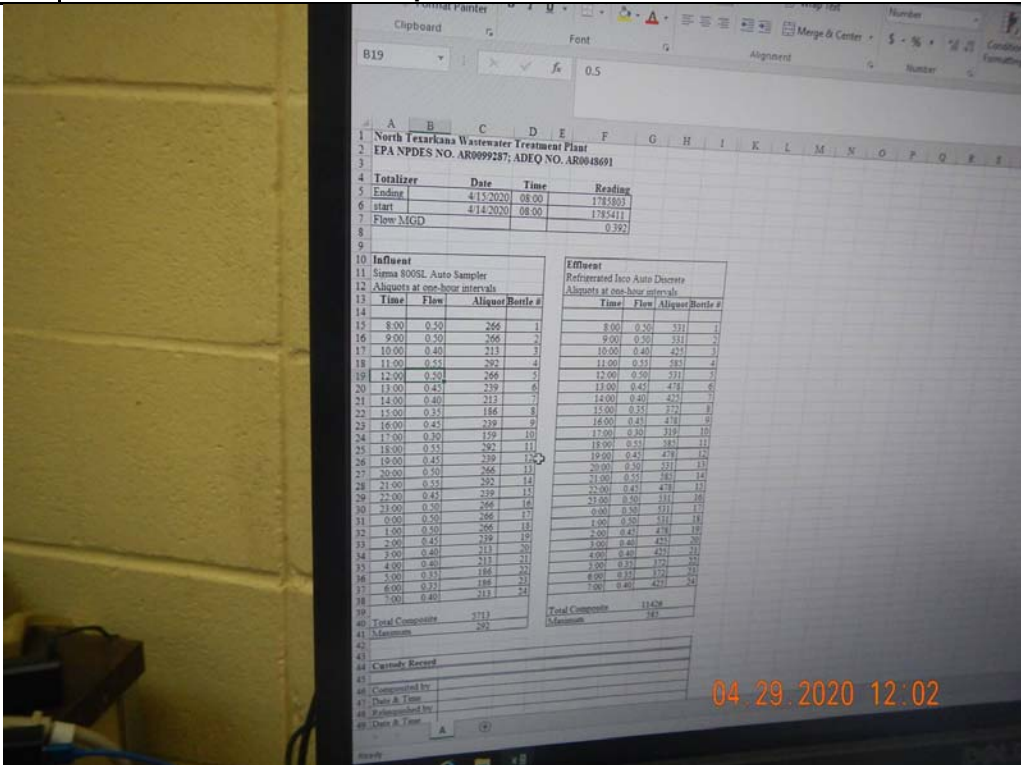


Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:54
		Photo #:	21
Description:	Thermometer in refrigerated auto-sampler		

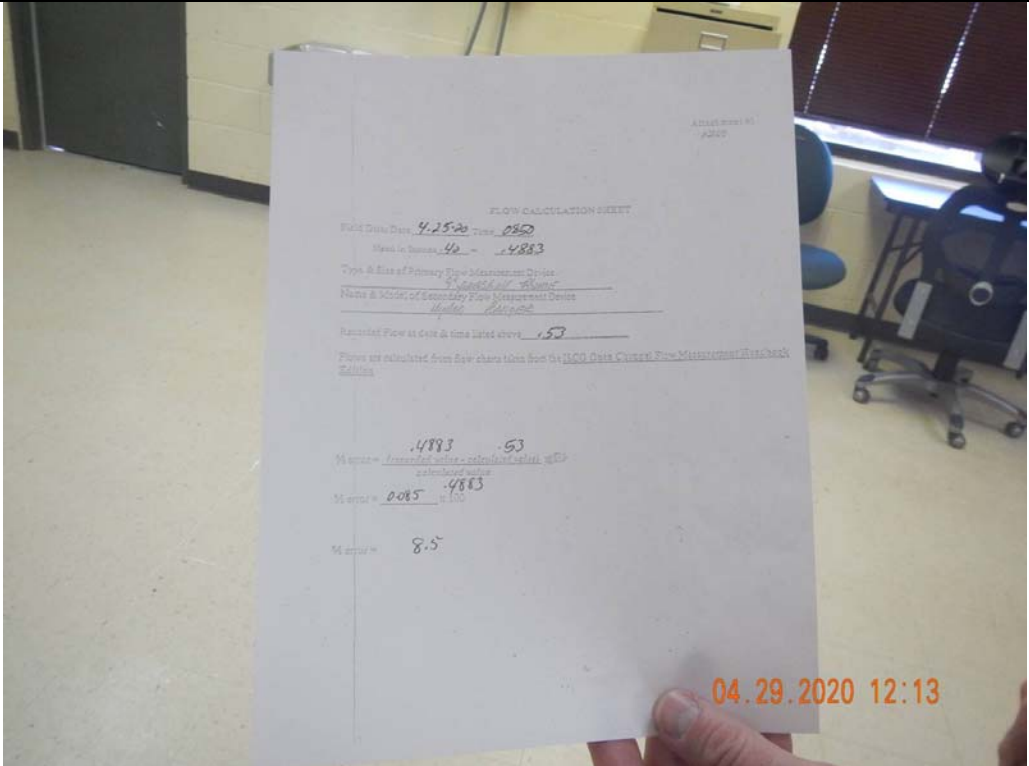


Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	12:02
		Photo #:	22
Description:	Influent/effluent flow data spreadsheet		



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	12:13
		Photo #:	23
Description:	Flow-weighted calculation sheet		



Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:21
		Photo #:	24
Description:	NH3-N reagents		



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:21
		Photo #:	25
Description:	NH3-N colorimeter		



Photographer:	Michael Young	Date:	04/29/2020
Witness:		Time:	11:22
		Photo #:	26
Description:	DO meter		

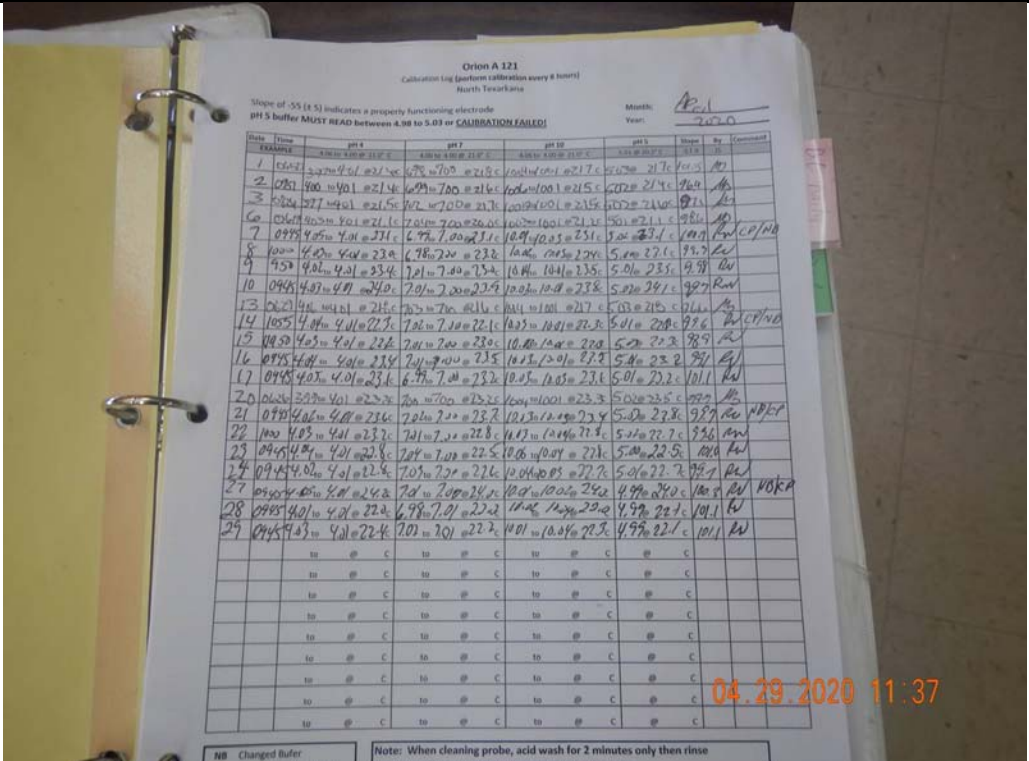


Water Division Photographic Evidence Sheet

Location: **City of Texarkana - North WWTP**
 Photographer: **Michael Young** Date: **04/29/2020** Time: **11:27**
 Witness: _____ Photo #: **27**
 Description: **DO meter set to mg/l setting**



Photographer: **Michael Young** Date: **04/29/2020** Time: **11:37**
 Witness: _____ Photo #: **28**
 Description: **pH calibration log**



Water Division Photographic Evidence Sheet

Location:	City of Texarkana - North WWTP		
Photographer:	Michael Young	Date:	05/12/2020
Witness:		Time:	11:30
		Photo #:	27
Description:	NCR for flow exceedance has "N/A" for corrective measures.		

NON-COMPLIANCE REPORT

Arkansas Department of Environmental Quality
Office of Water Quality - Enforcement Branch
5301 Northshore Drive
North Little Rock, AR 72118

RE: Permit No. AP0045591 Discharge Number: 001-A
Facility: North Texarkana WWTP
Address: 8301 N. Sanderson Lane (PO Box 2008)
City: Texarkana State: AR Zip: 71054
Contact: J. D. Philips, Executive Director Phone: (501) 796-3821

Date of Non-Compliance	Parameter Exceeded	Quantity or Loading	Quality or Concentration	Permit Limit
Feb 9 - 16, 2020	7 Day Avg flow MGD	1.230		0.95

We feel this problem was due to:
5.72 inches of rainfall during this time period.

We plan on correcting the problem in this manner:
n/a

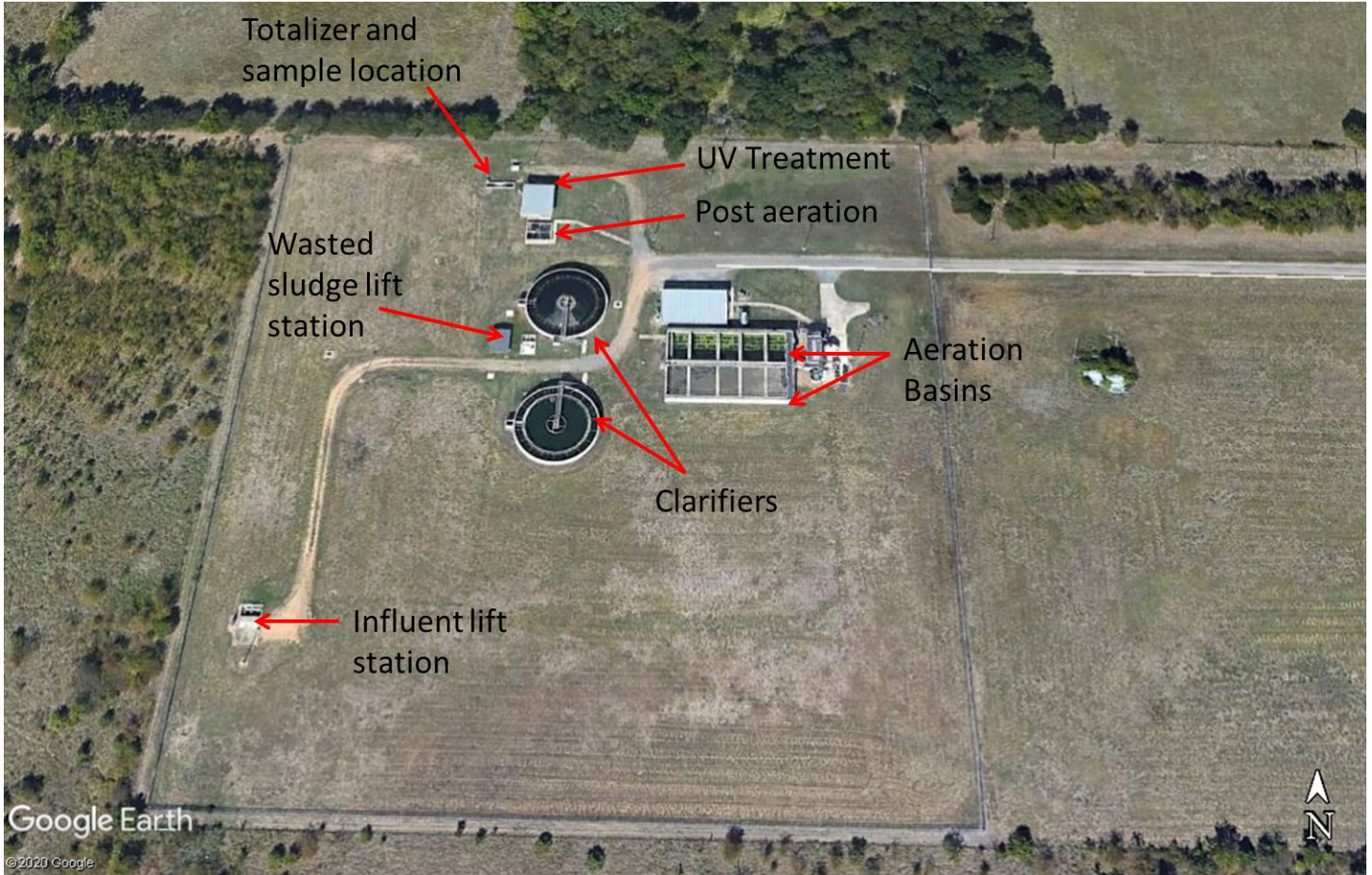
Time estimated that it will take to correct problem:
n/a

Sincerely,

J.D. Philips, Executive Director 05/10/2020
Submitted By: _____ Date
 Submitted electronically via NetDMR

Certification Statement: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the persons or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (Revised March 2016)

Figure 1. Overview of the grounds at the North Texarkana WWTP.



From: [TWU-White, Pamela](#)
To: [Water-Inspection-Report](#)
Cc: [TWU-McAllister, Sally](#)
Subject: City of Texarkana - North WWTP Inspections (Miller Co) Corrective Action
Date: Thursday, May 21, 2020 4:10:30 PM
Attachments: [ADEQ Corrective Action.pdf](#)
[Attachments Response Letter May 2020.pdf](#)

Letter and attachments providing corrective action for the four violations found during your April 29, 2020 inspection of our facility.

If additional information is needed, please contact J.D. Phillips at phillips@txkusa.org or (903) 798 3821.

Pamela J. White
Administrative Coordinator
Texarkana Water Utilities

Ph: (903) 798 3821

Fax: (903) 793 0610

pwhite@txkusa.org

www.txkusa.org/twu

Daily Air Calibration HQ40D North Texarkana

1. Press power button
2. Press tool button (shows LDO101 settings)
3. Press select
4. Scroll to modify current settings
5. Press select
6. Press Calibration Options
7. Press Calibration User
8. Press select
9. Scroll to user 100% and press ok
10. Press exit 4 times (main screen will display)
11. Press Calibrate and read
12. Screen will display. Dry probe and now place in DO btl. With $\frac{1}{4}$ Water. Press read.
13. Screen will display 100% and Calibration passed.
14. Press done record you slope for the day
15. Press store. Meter has been calibrated and return to main Screen display. You are ready for today samples
16. **The main Lab will calibrate once a month on the Labs HQ40 counter top meter Using the Winkler results as a set point to make sure the meter maintain a controlled calibration along with the air calibration. The result will be recorded and kept in the main Lab as QC results.**

pH Calibration

Orion Star A121 portable (North Texarkana)

1. Turn on **Power**.
2. Rinse probe and blot dry.
3. Place probe in first standard and press **Calibrate**. (Display will show the reading at the top and **Cal. 1** at the bottom.)
4. When the small **pH** in the top right corner stops flashing, the reading is stable and the display changes to read **04.01** and the small arrow beside pH/ISE (on the left) flashes. Press the button to the left of the arrow keys to change the cursor position, and the up and down arrows to change the numbers.
5. If the display is correct, press **Calibrate** again to move to the next standard.
6. Place the second standard under the probe. When the small **pH** in the top right corner stops flashing, the reading is stable and the display changes to read **10.00** and the small arrow beside pH/ISE (on the left) flashes. Press the button to the left of the arrow keys to change the cursor position, and the up and down arrows to change the numbers.
7. When the display is correct, press **Measure/save/print**. The meter will briefly display the slope.
8. Place the QC standard (7.00) under the probe. When **AR** in the top right corner stops flashing, the display will freeze and the reading is ready.

Reading a Sample

1. Rinse the probe and blot dry.
2. Place sample under probe, and press **Measure/save/print**.
3. When **AR** in the top right corner stops flashing, the display will freeze and the reading is ready.

Salicylate Method¹

Method 8155

0.01 to 0.80 mg/L NH₃-N

Powder Pillows

Scope and application: For water, wastewater and seawater.

¹ Adapted from Clin. Chim. Acta., 14, 403 (1966).



Test preparation

Before starting

The reagents that are used in this test contain sodium nitroferricyanide. **Keep cyanide solutions at pH > 11 to prevent exposure to hydrogen cyanide gas.** Collect the reacted samples for safe disposal.

Keep the samples sealed at all times to prevent ammonia contamination from the air.

Always do tests in sample cells. Do not put the instrument in the sample or pour the sample into the cell holder.

Make sure that the sample cells are clean and there are no scratches where the light passes through them.

Rinse the sample cell and cap with the sample three times before the sample cell is filled.

Make sure that there are no fingerprints or liquid on the external surface of the sample cells. Wipe with a lint-free cloth before measurement.

Cold waters can cause condensation on the sample cell or bubbles in the sample cell during color development. Examine the sample cell for condensation or bubbles. Remove condensation with a lint-free cloth. Invert the sample cell to remove bubbles.

Install the instrument cap over the cell holder before ZERO or READ is pushed.

After the test, immediately empty and rinse the sample cell. Rinse the sample cell and cap three times with deionized water.

If the test result is over-range, dilute the sample with high quality, ammonia-free deionized water and repeat the test. Multiply the result by the dilution factor. Refer to Sample dilution on page 2.

Review the Safety Data Sheets (MSDS/SDS) for the chemicals that are used. Use the recommended personal protective equipment.

Dispose of reacted solutions according to local, state and federal regulations. Refer to the Safety Data Sheets for disposal information for unused reagents. Refer to the environmental, health and safety staff for your facility and/or local regulatory agencies for further disposal information.

Items to collect

Description	Quantity
Ammonia Cyanurate Reagent Powder Pillow, 10-mL	2
Ammonia Salicylate Reagent Powder Pillow, 10-mL	2
Sample cells, 25-mm (10 mL)	2

Refer to Consumables and replacement items on page 6 for order information.

Sample collection and storage

- Collect samples in clean glass or plastic bottles.
- If the sample contains chlorine, add 1 drop of 0.1 N sodium thiosulfate to 1 liter of sample to remove each 0.3 mg/L of chlorine.
- To preserve samples for later analysis, adjust the sample pH to less than 2 with concentrated sulfuric acid (approximately 2 mL per liter). No acid addition is necessary if the sample is tested immediately.
- Keep the preserved samples at or below 6 °C (43 °F) for a maximum of 28 days.
- Let the sample temperature increase to room temperature before analysis.
- Before analysis, adjust the pH to 7 with 5 N sodium hydroxide solution.
- Correct the test result for the dilution caused by the volume additions.

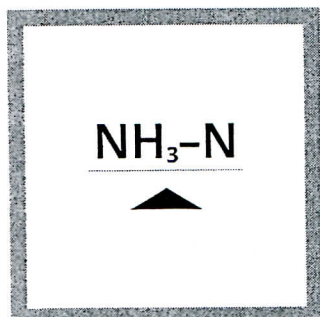
Sample dilution

Select the applicable sample volume from Table 1. The sample volume depends on the starting concentration of the sample. Put the sample in a graduated mixing cylinder, then dilute the sample to 25 mL with deionized water and mix fully.

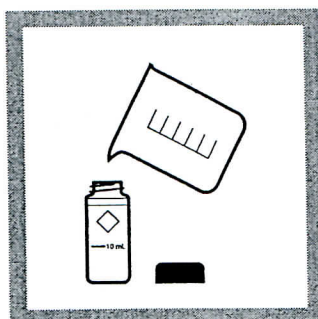
Table 1 Sample volumes for dilution

Starting concentration (mg/L NH ₃ -N)	Sample volume (mL)	Dilution factor
≤ 0.8	Dilution is not necessary.	—
≤ 2	10.0 mL	2.5
≤ 4	5.0 mL	5.0
≤ 8	2.5 mL	10.0
≤ 20	1.0 mL	25.0

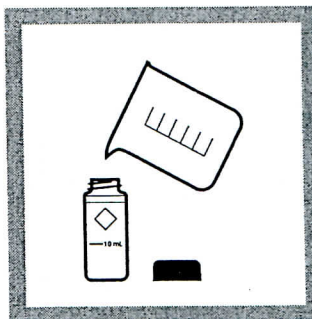
Powder pillow procedure



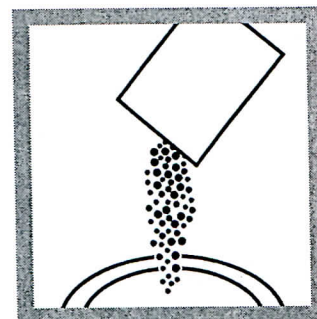
1. Set the instrument to NH₃-N.
For DR300, push the up arrow button. For PCII, push the menu button, checkmark button, then the menu button again.



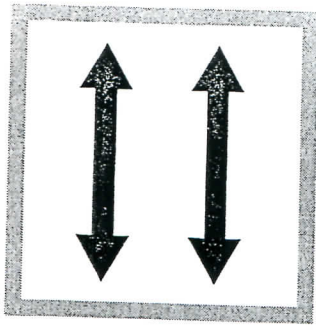
2. Prepare the blank: Fill a sample cell to the 10-mL mark with deionized water.



3. Prepare the sample: Fill a sample cell to the 10-mL mark with sample or diluted sample. Refer to Sample dilution on page 2.



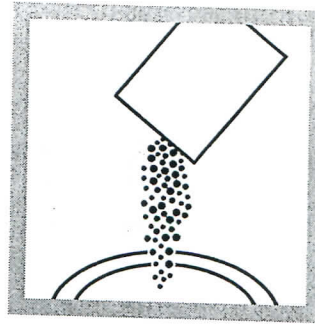
4. Add the contents of one Ammonia Salicylate Powder Pillow to each sample cell.



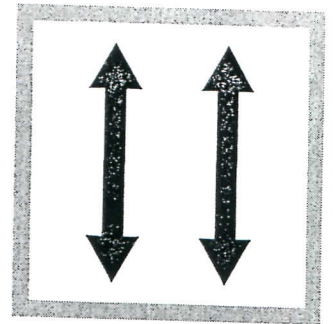
5. Put the stopper on the sample cell. Shake to dissolve the reagent.



6. Set and start a timer for 3 minutes. A 3-minute reaction time starts.



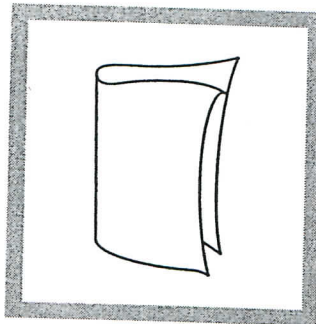
7. After the timer expires, add the contents of one Ammonia Cyanurate Powder Pillow to each sample cell.



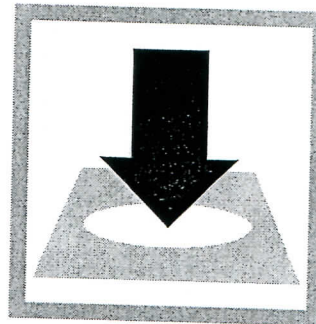
8. Put the stopper on the sample cell. Shake to dissolve the reagent.



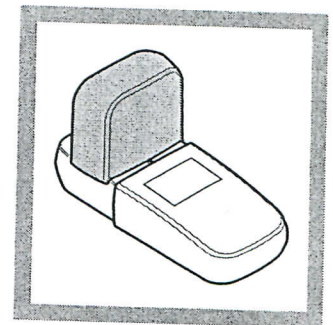
9. Set and start a timer for 15 minutes. A 15-minute reaction time starts.



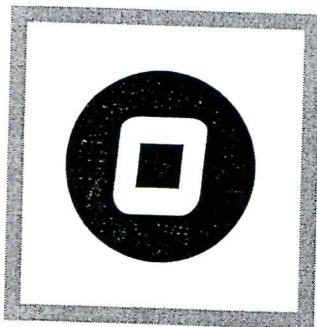
10. When the timer expires, clean the blank sample cell.



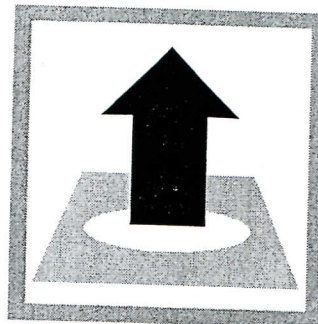
11. Insert the blank into the cell holder. Point the diamond mark on the sample cell toward the keypad.



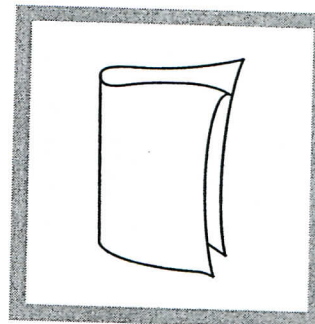
12. Install the instrument cap over the cell holder.



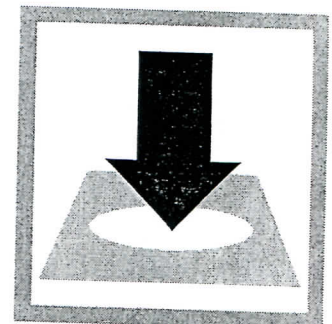
13. Push ZERO. The display shows "0.00".



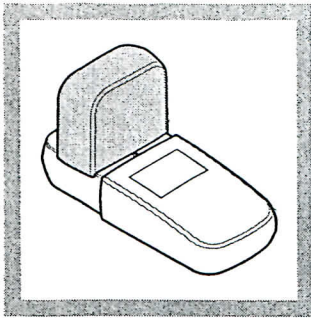
14. Remove the sample cell from the cell holder.



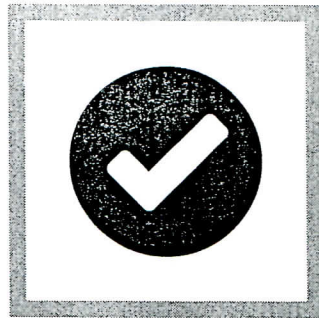
15. Clean the prepared sample cell.



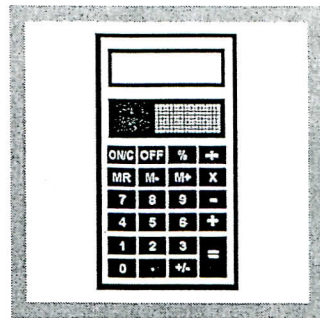
16. Insert the prepared sample into the cell holder. Point the diamond mark on the sample cell toward the keypad.



17. Install the instrument cap over the cell holder.



18. Push READ. Results show in mg/L ammonia as nitrogen ($\text{NH}_3\text{-N}$).



19. If the sample was diluted, multiply the result by the applicable dilution factor from Table 1 on page 2.

Note: To change the results to mg/L ammonia (NH_3), multiply the result by 1.22. To change the results to mg/L ammonium (NH_4^+), multiply the result by 1.29.

Interferences

Interfering substance	Interference level
Calcium	1000 mg/L as CaCO_3
Iron	All levels. Correct for iron interference as follows: <ol style="list-style-type: none"> 1. Use one of the Iron, Total procedures to measure the iron concentration of the sample. 2. Use an iron standard solution to add iron to the deionized water blank so that the blank has the same iron concentration as the sample. The iron interference will be zeroed out from the test result.
Magnesium	6000 mg/L as CaCO_3
Monochloramine	Monochloramine that is in chloraminated drinking water interferes directly at all levels and gives high results. Use a Free Ammonia and Monochloramine method to determine free ammonia in these sample matrices.
Nitrate	100 mg/L as $\text{NO}_3^- \text{-N}$
Nitrite	12 mg/L as $\text{NO}_2^- \text{-N}$
pH	Adjust acidic or basic samples to approximately pH 7. Use 1 N sodium hydroxide standard solution for acidic samples and 1 N hydrochloric acid standard solution for basic samples.
Phosphate	100 mg/L as $\text{PO}_4^{3-} \text{-P}$
Sulfate	300 mg/L as SO_4^{2-}
Sulfide	Sulfide will intensify the color. Remove sulfide interference as follows: <ol style="list-style-type: none"> 1. Measure approximately 350 mL of sample in a 500-mL Erlenmeyer flask. 2. Add the contents of one Sulfide Inhibitor Reagent Powder Pillow. Swirl to mix. 3. Filter the sample through a folded filter paper and filter funnel. 4. Use the filtered sample in the test procedure.
Other substances	Less common interferences such as hydrazine and glycine cause intensified colors in the prepared sample. Turbidity and color will give incorrect high values. Samples with severe interferences require distillation. Use the distillation procedure that is supplied with the distillation set.

CHLORINE, TOTAL (0 to 5.00 mg/L)

For water, wastewater and seawater

DPD Test 'N Tube™ Method*

Note: This product has not been evaluated to test for chlorine and chloramines in medical applications in the United States.



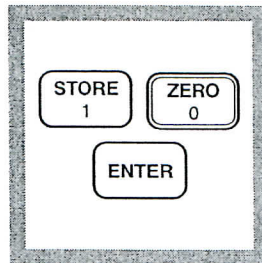
1. Enter the stored program number for Test 'N Tube total chlorine (Cl₂).

Press: **PRGM**

The display will show:

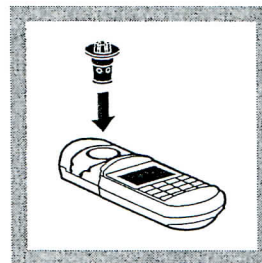
PRGM ?

Note: For most accurate results, perform a Reagent Blank Correction using deionized water (see Section 1).



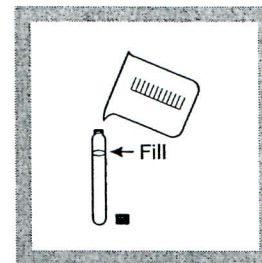
2. Press: **10 ENTER**

The display will show **mg/L, Cl₂** and the **ZERO** icon.



3. Insert the COD/TNT Vial Adapter into the cell holder by rotating the adapter until it drops into place. Then push down to fully insert it.

Note: For increased performance, a diffuser band covers the light path holes on the adapter. Do not remove the diffuser band.



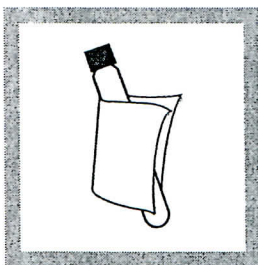
4. Fill an empty Test 'N Tube vial with sample (the blank).

Note: Fill to the top of the Hach logo "oval" mark.

Note: Samples must be analyzed immediately and cannot be preserved for later analysis.

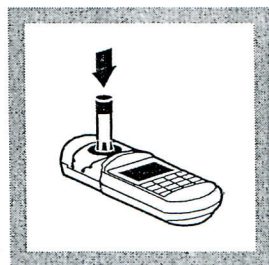
* Adapted from *Standard Methods for the Examination of Water and Wastewater*.

CHLORINE, TOTAL, continued



5. Wipe the outside of the blank vial with a towel.

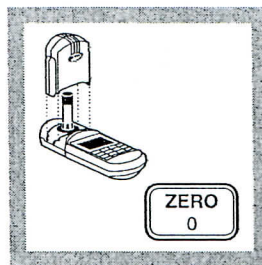
Note: Wiping with a damp cloth followed by a dry one removes fingerprints and other marks.



6. Place the blank in the adapter.

Push straight down on the top of the vial until it seats solidly into the adapter.

Note: Do not move the vial from side to side as this can cause errors.



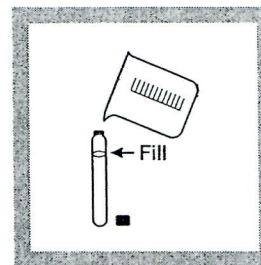
7. Cover the vial tightly with the instrument cap.

Press: **ZERO**

The cursor will move to the right, then the display will show:

0.00 mg/L Cl₂

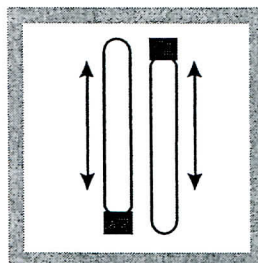
Note: If Reagent Blank Correction is on, the display may flash "limit". See Section 1.



8. Remove the cap from a Total Chlorine DPD-TNT tube. Add 10 mL of sample.

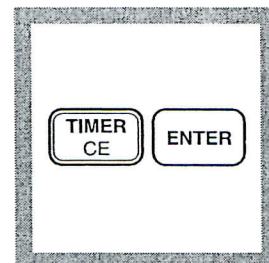
Note: Fill to the top of the Hach logo "oval" mark.

Note: A pink color will develop if chlorine is present.



9. Cap and invert at least 10 times to dissolve the powder. This is the prepared sample.

Note: Use slow, deliberate inversion for complete recovery. Ten inversions should take at least 30 seconds. One inversion equals turning the vial upside down, then returning it to an upright position.

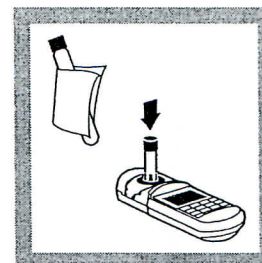


10. Press:

TIMER ENTER

A three-minute reaction period will begin.

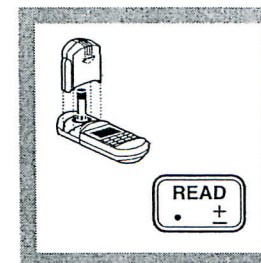
Note: A pink color will develop if chlorine is present.



11. When the timer beeps, wipe the prepared sample vial with a towel, then place it in the vial adapter.

Push straight down on the top of the vial until it seats solidly into the adapter.

Note: Do not move the vial from side to side as this can cause errors.



12. Cover the vial tightly with the instrument cap.

Press: **READ**

The cursor will move to the right, then the result in mg/L total chlorine will be displayed.

CHLORINE, TOTAL, continued

Sampling and Storage

Analyze samples for chlorine **immediately** after collection. Free and combined chlorine are strong oxidizing agents and are unstable in natural waters. They react rapidly with various inorganic compounds and more slowly oxidizes organic compounds. Many factors, including reactant concentrations, sunlight, pH, temperature and salinity influence decomposition of chlorine in water.

Avoid plastic containers since these may have a large chlorine demand. **Pretreat glass** sample containers to remove any chlorine demand by soaking in a dilute bleach solution (1 mL commercial bleach to 1 liter of deionized water) for at least 1 hour. Rinse thoroughly with deionized or distilled water. If sample containers are rinsed thoroughly with deionized or distilled water after use, only occasional pre-treatment is necessary.

A common error in testing for chlorine is obtaining an unrepresentative sample. If sampling from a tap, let the water flow for at least 5 minutes to ensure a representative sample. Let the container overflow with the sample several times, then cap the sample containers so there is no headspace (air) above the sample. Perform the analysis immediately.

Accuracy Check

Standard Additions Method

- a) Snap the top off a High Range Chlorine PourRite™ Ampule Standard Solution.
- b) Use a TenSette® Pipet to add 0.1 mL of the standard to 10 mL of sample (this is the spiked sample). Swirl to mix.
- c) Analyze the spiked sample, beginning at Step 8 of the procedure.
- d) Calculate the concentration of mg/L chlorine added to the sample:

$$\text{mg/L chlorine added} = \frac{0.1 (\text{vol. standard added}) \times \text{Label value (mg/L Cl}_2\text{)}}{10.1 (\text{sample} + \text{standard volume})}$$

- e) The spiked sample result (step c) should reflect the analyzed sample result + the calculated mg/L Cl₂ added (step d).
- f) If this increase does not occur, see *Standard Additions, Section 1* for more information.

NON-COMPLIANCE REPORT

Arkansas Department of Environmental Quality
 Office of Water Quality – Enforcement Branch
 5301 Northshore Drive
 North Little Rock, AR 72118

RE: Permit No: AR0048691 Discharge Number: 001-A

Facility: North Texarkana WWTP

Address: 8301 N. Sanderson Lane (PO Box 2008)

City: Texarkana State: AR Zip: 71854

Contact: J. D. Phillips, Executive Director Phone: (903) 798-3821

Date of Non-Compliance	Parameter Exceeded	Quantity or Loading	Quality or Concentration	Permit Limits
Feb 9 - 15, 2020	7 Day Avg flow MGD	1.230		0.95

We feel this problem was due to:

~~5.72 inches of rainfall during this time period.~~

We plan on correcting the problem in this manner:

~~Texarkana Water Utilities has an Inflow & Infiltration Program in place. They actively search out any I & I situations and report them for immediate repairs~~

Time estimated that it will take to correct problem:

~~On going every day.~~

Sincerely,

JD Phillips, Executive Director

03/10/2020, corrected 05/19/2020

Submitted By:

Date

Submitted electronically via NetDMR

Certification Statement: I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations. (Revised March 2016)



Texarkana Water Utilities

801 Wood Street, P.O. Box 2008, Texarkana, Texas 75504

(903) 798-3800 Phone

711 TTY

(903) 791-0724 Fax

May 21, 2020

Arkansas Department of Environmental Quality
Office of Water Quality (OWQ) Compliance Branch
5301 Northshore Drive
North Little Rock, AR 72118-5317

RE: City of Texarkana - North Texarkana WWTP Inspections (Miller Co.)

AFIN: 46-00237

NPDES Permit No.: AR0048691

ARR00C484

Dear Mr. Young:

During your April 29, 2020 inspection of our facility, you noted four violations in your summary. Corrective action has been taken and addressed below.

- 1) *Dissolved Oxygen meter calibration was being performed as a liquid saturation without the appropriate buffer and not an air saturation method.*

The main lab at South Regional WWTP has always performed a Winkler water calibration once a month on the DO meter. The calibration log is attached for your review. The plant operator performs a daily air calibration on the DO meter and the SOP is included with this response.

- 2) *The thermometer in the composite sampler has no recorded calibration.*

Temperature will be read daily and recorded. The thermometer will be brought to the main lab once a month and exchanged with another. The Lab will compare at a temperature that has been Factory Certified on the NIST Thermometer. The results will be recorded and kept in both laboratory locations.

Note: The thermometers will be replaced if they do not calibrate in the range for Sampler ($4^{\circ}\pm 2$). The NIST thermometer has been certified at 0, 4, 20, 37, 44.5, and 103 degree.

- 3) *There are no written Standard Operating Procedures (SOPs) for the laboratory analyses that are conducted in the lab of the North Texarkana WWTP.*

Standard Operating Procedures (SOPs) for laboratory analyses conducted at North Texarkana WWTP are included for pH, Ammonia Nitrogen, and Total Chlorine.

- 4) *In February 2020, there was an exceedance of the 7-day average of flow and the non-compliance report (NCR) included did not have all the information required.*

New information has now been added to the Non-Compliance Report (NCR) and is included with this response.

If additional information is needed, please contact me at phillips@txkusa.org or (903) 798-3821.

Sincerely,

J.D. Phillips, P.E.
Executive Director

ADEQ

ARKANSAS
Department of Environmental Quality

February 28, 2022

Joe Doss Phillips, Executive Director
City of Texarkana
PO Box 2008
Texarkana, TX 75504

RE: City of Texarkana - Response to Inspection (Miller Co)
AFIN: 46-00237 **NPDES Permit No.: AR0048691**
ARR00C484

Dear Mr. Phillips:

I have reviewed the response pertaining to my April 29, 2020 inspections of the North Texarkana WWTP. 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,



Michael Young
District 8 Field Inspector
Office of Water Quality