## ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

PERMITTEE NAME			PERMIT NO.	]						
Benton County, Arkansas Suburban Sewer District			Villages of Cross Creek							
No 1 Villages of Cross Cr		<del></del>	FACILITY ADDR	Ecc		AFIN NO.	1			
PERMITTEE ADDRES PO Box 9299	<u> </u>		04-00899	•						
Fayetteville AR 72703				1						
	1									
		MM/DD/YYYY	TEWATER EFFLUENT MC	<u></u>	MM/DD/YYYY	1				
		5/1/2019			5/31/2019	]				
TREATED WASTEWATER EFFLUE	NT SAMPLING					r	]			
PARAMETER		Limit	Sample Measurement	UNITS	Monitoring	Reporting				
Flow, Monthly total		REPORT	0.520351	MG	Total Flow per calendar month					
Flow, daily maximun		REPORT	0.019985	MGD	Daily					
Carbonaceous Biochemical Oxygen De	emand (CBOD5)	30	7.9	mg/l						
Total Suspended Solids (TSS)		30	31.5	mg/l						
Fecal Coliform Bacteria (FCB)		10,000	< 10	colonies/100ml	Grab Sample once per month					
рН		6.0 - 9.0	7.2	s.u.		Prior to the 15th of the				
Total Phosphorus (TP)		REPORT	7.06	mg/l		following Month				
Total Kjeldahl Nitrogen (TKN)		REPORT	No Report	mg/l						
Ammonia Nitrogen	Ammonia Nitrogen		No Report	mg/l	Grab sample once per quarter					
Nitrate Nitrogen ( NO3-N) + Nitrite Nitro	gen ( NO2-N)	REPORT	No Report	mg/l						
Plant Available Nitrogen (PAN)		REPORT	No Report	mg/l		_				
Loading Rate		REPORT	See Attached	gpd/ft 2	Daily					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PE	NALTY OF LAW THAT I HAVE PERSONAL	LY EXAMINED AND AM WITH TH	E INFORMATION		TELEPHONE	DATE			
	SUBMITTED HEREIN;	AND BASED ON MY INQUIRY OF THOSE	INDIVIDUALS IMMEDIATELY RE	SPONSIBLE FOR	Kanol Dagam	7				
	OBTAINING THE INF	ORMATION, I BELIEVE THE SUBMITTE	ED INFORMATION IS TRUE, A	CCURATE, AND	SIGNATURE OF PRINCIPA	(479) 530-	6/7/2019			
Kathy Bartlett	COMPLETE. I AM AWA	ARE THAT THERE ARE SIGNIFICANT PEN	5926							
TYPED OR PRINTED	INCLUDING THE POSS	SIBILITY OF FINE AND IMPRISONMENT.		AUTHORIZED AGENT	MM/DD/YYYY					
COMMENTS AND EXPLANATION C	OF VIOLATIONS (Re	eference all attachments here) Sc	olids were high due to slu	idge in settling t	ank. We are scheduling to he	ave tank and plant pum	ped. We will moite			
and report next month.										

May 2019 VILLAGES OF CROSS CREE	K LOADING RATES Max Day 19,985
Zone Identification	GPD/sq 2
1	2,258
2	2,258
3	2,258
4	2,258
5	2,258
6	2,258
7	2,678
8	3,118
9	Not used
10	Combined with 8
11	2,638
12	Not used
13	Not used
14	Not used
15	Not used
16	Not used
17	Not used

## Environmental Services Company, Inc.

Corporate Office
13715 West Markham
Little Rock, AR 72211
Tel. (501)221-2565 Fax (501)221-1341

Northwest Arkansas Branch
1107 Century Avenue
Springdale, AR 72762
Tel. (479)750-1170 Fax (479)750-1172

Control Number: 1905020065

Customer Name : DIXIELAND UTILITY LLC

Customer/Permit No. : 1698 / 4811-WR-4 001 Report Date : 05/21/19

Sample Date : 05/13/19

Sample Time : 1330 Sample Type : GRAB

Sample Type : GRAB
Sample From : DOSE TANK EFFLUENT

Collected By: VLP
Delivery By : VLP

Work Order :

Purchase Order :

Laboratory Analysis								Quality Assurance				
Analysis			_				Precision	Accuracy				
<u>Date Time By</u>	Parameter	Result	Notes	Quantity	Met	hod	% RPD	% Recovery				
05/13 1331 VLP	pН	7.2 S.U.				4500-H+ B	1.38	N/A				
05/20 1040 AKA	Phosphorous, Total (as P)	7.060 mg/L	eta waterwale ewe ewerg	in de gelene i i e e e e e e e e e e e e e e e e	EPA 365	.3	0.82	106.0 *				
	Solids, Total Suspended			and the second of the second of the second			11.87	··· N/A *				
	Fecal Coliform (MPN/100mL	•			•	Colilert18	0.00	0.0				
05/15 1500 AKA	BOD, Carbonaceous	7.9 mg/L			SM 2001	5210 B	19.44	109.1				

(b) Exceeds Permit Limits for Maximum Concentration

All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature

Environmental Services Co., Inc.

<sup>\*</sup> QA data shown is from a different sample or standard on the same date.

## Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com

Corporate Office, Little Rock, Arkansas 501-221-2565

Carlsbad, New Mexico 575-887-1ESC

Phone: 479-750-1170

Fax: 479-750-1172

## **CHAIN OF CUSTODY**

1 110110	Client Information			<del></del>	D,	cicot Inf	formation		-	<del></del>	Dar		400	Dor		10.00	
					Project Information						Keu	ues	teu	Par	anıe	ters	<u>;</u>
Company Name:	Dixieland Utility LL	.C.	<del></del>	Permit/Pro	•											1	.
Address:	3302 N. Dixieland			Purchase	Order #:												
Rogers AR					_				•								
Telephone:	(479)936-0333	(Cell)		Sampler Name(s):		/LIJAte											
Telephone:							V.L. PAte					<sub>@</sub>	3.1		}		
		<del></del>		•			7 17 7 0					TSS(28)	n(4:				
ESC Client Number:	4600			Janu Signa	and Signature(s):						1 0 1 1 1 V	[ '	j.	an a sec	a saaaa	et succut	an anadian
		<del></del>		<u> </u>		<del></del>	<del></del>			Į∑,	Phos(25)	CBOD(70),	Coliform(43.1F)				
Sample Ide		Sample Collection		_	Sample Contain		Containers	<del></del>	pH(23)	)so	00	Fecal (			,		
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preservative	#	표	P.	Ö	Fec				
Dose Tank/Effluent	1905020065	5/13/19	1330	GRAB	Water	teflon	150 mL	None	D	x							
		['		GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> ,pH<2	1		х						
\				GRAB	Water	Plastic	1 qt	None, Cool <sup>†</sup>	1			x					
				GRAB	Water	Whirlpak		NaS₂O₄ Cool <sup>†</sup>	1	<del>                                     </del>	<del>                                     </del>		x				
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Relinquished By: (Signature and Print	70-110-0V		ļ			<u> </u>											
remidustion by. (algument and Emm	.ed Name;	Date	Time	Received RA: (2)	gnature and Printe	d Name)		Date	lime	Custo Used	ody Se	als:		Intac	t2		
Relinquished By: (Signature and Printed Name) Date Ti		Time	Received By: (Signature and Printed Name) Date			Time		round			Hitas	<u></u>		$\dashv$			
Pallanulahad Str. / Clarathus and Printed Nama / O			Received for Ligh By: (Signature and Printed Name)  White Tanks Tanks 1505 5-13-19152				Regul				Spec						
Relinquished By: (Signature and Printed Name)  1 15 20, (Signature and Printed Name)			Mente	By: poignature an		18515	5-13-19/5.	Time ZO		samp Yes	ies pro	репу		ved: No	_	ľ	
Comments:					FLOW DATA Fie		Field Test	Time Ana	lyst	Resu	ılt	Resu	lt	Units			
					Analyst: Time:		pH:	1331 950		7.7	$\subseteq$	<i>7</i>	3	°C °F			
					Reading:		Temp.: DO:		-					<u></u>		<u> </u>	
					Units:		Debris:							<del></del>			$\neg$
Cool all samples to 6 degrees C.							Chlorinated	l? Yes No		This Document is Page of							