

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

**PERMITTEE NAME**

Benton County, Arkansas Suburban Sewer District  
No 1 Villages of Cross Creek

**PERMITTEE ADDRESS**

PO Box 9299  
Fayetteville AR 72703

**FACILITY NAME (IF DIFFERENT)**

Villages of Cross Creek

**FACILITY ADDRESS**

3302 N Dixieland Rd  
Little Flock AR

**PERMIT NO.**

4811-WR-4

**AFIN NO.**

04-00899

**WASTEWATER EFFLUENT MONITORING PERIOD**

MM/DD/YYYY


11/1/2019

MM/DD/YYYY

11/30/2019

**TREATED WASTEWATER EFFLUENT SAMPLING**

PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	0.631140	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum	REPORT	0.025626	MGD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	30	19.5	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	30	16.4	mg/l		
Fecal Coliform Bacteria (FCB)	10,000	12	colonies/100ml		
pH	6.0 - 9.0	7.4	s.u.		
Total Phosphorus (TP)	REPORT		mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT		mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT		mg/l		
Nitrate Nitrogen ( NO3-N) + Nitrite Nitrogen ( NO2-N)	REPORT		mg/l		
Plant Available Nitrogen (PAN)	REPORT		mg/l		
Loading Rate	REPORT		gpd/ft 2	Daily	

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.	 <b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE	DATE
Kathy Bartlett			(479) 530-5926	12/16/2019
TYPED OR PRINTED				MM/DD/YYYY

**COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)**

Because of excessive storm and high wind damage trees and branches fell onto the drip field and damaged fences and dripfield. At the current time fences and field are scheduled to be repaired and replaced. Trees and branches have all been removed and cleared

Nov 2019 VILLAGES OF CROSS CREEK LOADING RATES

Daily Max	25626
Zone Identification	GPD/sq 2
1	2,895
2	2,895
3	2,895
4	2,895
5	2,895
6	2,895
7	3,433
8	3,997
9	Not used
10	Combined with 8
11	826
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: 1911020127  
Customer Name : DIXIELAND UTILITY LLC  
Customer/Permit No. : 1698 / 4811-WR-4 001  
Report Date : 12/02/19

Sample Date : 11/21/19  
Sample Time : 1440  
Sample Type : GRAB DIXIELAND  
Sample From : DOSE TANK EFFLUENT

Collected By: JE  
Delivery By : JE  
Work Order :  
Purchase Order :

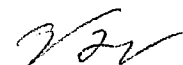
### Laboratory Analysis

Analysis						Quality Assurance			
<u>Date</u>	<u>Time</u>	<u>By</u>	<u>Parameter</u>	<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
								<u>% RPD</u>	<u>% Recovery</u>
11/21	1440	JEW	pH	7.4 S.U.			SM 2011 4500-H+ B		
11/22	1445	TSB	Phosphorous, Total (as P)	6.16 mg/L			EPA 365.3	0.58	108.0 *
11/26	1430	TSB	Solids, Total Suspended	16.4 mg/L			SM 2011 2540 D	5.00	N/A *
11/21	1712	TSB	Fecal Coliform (MPN/100mL)	12.4 /100ml			06/2012 Colilert18	0.00	0.0 *
11/22	1200	TSB	BOD, Carbonaceous	19.5 mg/L			SM 2001 5210 B	2.05	99.6

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

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.

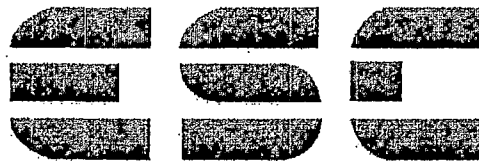
Signature \_\_\_\_\_



Environmental Services Co., Inc.

631,140  
25,626

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

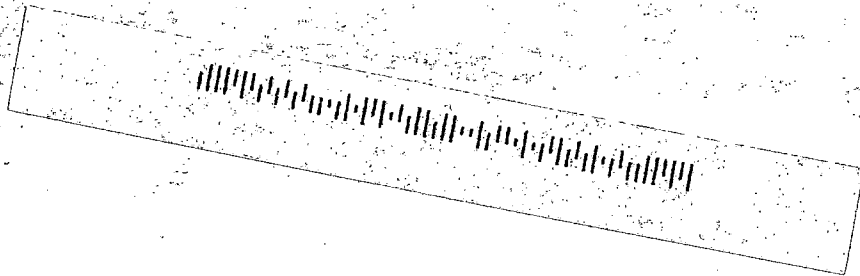
### CHAIN OF CUSTODY

Client Information						Project Information					Requested Parameters									
Company Name: Dixieland Utility LLC.						Permit/Project #:					pH(23)	Phos(25)	CBOD(70), TSS(28)	Fecal Coliform(43.1F)						
Address: 3302 N. Dixieland Rogers AR						Purchase Order #:														
Telephone: (479)936-0333 (Cell)						Sampler Name(s): <i>James W. White, James W. White</i>														
Telephone:						and Signature(s):														
ESC Client Number: 1698																				
Sample Identification		Sample Collection				Sample Containers				pH(23)	Phos(25)	CBOD(70), TSS(28)	Fecal Coliform(43.1F)							
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#											
Dose Tank/Effluent	1911020127	11-21-19	1440	GRAB	Water	Teflon	150 mL	None	1	X										
	1911020127			GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH<2	1	X										
	1911020127			GRAB	Water	Plastic	1 qt	None, Cool†	1		X									
	1911020127			GRAB	Water	Whirlpak	100 ml	Na <sub>2</sub> O <sub>4</sub> Cool†	1			X								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Custody Seals:		Used?	Intact?								
<i>James W. White, James W. White</i>		11-21-19	1700	<i>Tamen Brooks, Tamen Brooks</i>					Regular		X	Special								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Were samples properly preserved:		Yes	No								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)			Date	Time	Yes		X	No								
Comments:						FLOW DATA	Field Test	Time	Analyst	Result	Result	Units								
						Analyst:	pH:	1440	NEW	7.4	7.4									
						Time:	Temp.:	1440	NEW	20.3	20.3	(C)	°F							
						Reading:	DO:													
						Units:	Debris:													
Cool all samples to 6 degrees C.						Chlorinated? Yes No			This Document is Page <u>1</u> of <u>1</u>											

*JK*

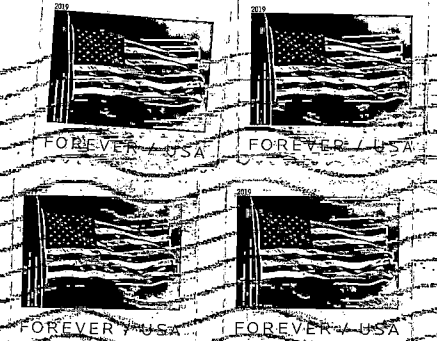
NWA UTILITY SERVICES, INC

PO Box 9299  
Fayetteville, AR  
72703



NWA PSDF 72703

FRI 20 DEC 2019 PM



ADEQ  
Water Division  
Permits Branch  
5301 Northshore Dr  
North Little Rock, AR  
72118