## 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		ĺ								
No 1 Villages of Cross Cre		<u> </u>	FACILITY ADDR			,	AFIN NO.	•			
PERMITTEE ADDRESS	S	* *	,								
PO Box 9299				04-00899							
Fayetteville AR 72703 Little Flock AR											
		WASTI									
		MM/DD/YYYY			MM/DD/YYYY						
		10/1/2016 10/31/2016									
TREATED WASTEWATER EFFLUE	NT SAMPLING										
PARAMETER		Limit	Sample Measurement	UNITS	Monitoring	R	eporting				
Flow, Monthly total		REPORT	0.598854	MG	Total Flow per calendar month						
Flow, daily maximun		REPORT	0.024783	MGD	Daily						
Carbonaceous Biochemical Oxygen De	mand (CBOD5)	30	11.8	mg/l							
Total Suspended Solids (TSS)		30	18	mg/l							
Fecal Coliform Bacteria (FCB)		10,000	228	colonies/100ml	Grab Sample once per month						
pH		6.0 - 9.0	7.1	s,u.		Prior to	the 15th of the				
Total Phosphorus (TP)		REPORT	5.9	mg/l		follo	wing Month				
Total Kjeldahi Nitrogen (TKN)		REPORT	29.12	mg/l							
Ammonia Nitrogen		REPORT	27.3	mg/l	Grab sample once per quarter						
Nitrate Nitrogen ( NO3-N) + Nitrite Nitrog	en ( NO2-N)	REPORT	5.6	mg/l	Glab cample shoo per quality						
Plant Available Nitrogen (PAN)		REPORT	33.4	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 PERSONALLY	EXAMINED AND AM WITH TH	HE INFORMATION	1.0		TELEPHONE	DATE			
	SUBMITTED HEREIN;	AND BASED ON MY INQUIRY OF THOSE IN	Comety Olyon	7							
	OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND SIGNATURE OF PRI						(479) 530-	11/12/2016			
Kathy Bartlatt		•		5926							
Kathy Bartlett	COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, EXECUTIVE OFFICER O						0020				
TYPED OR PRINTED	DE PRINTED INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.  DEXPLANATION OF VIOLATIONS (Reference all attachments here)							MM/DD/YYYY			
	•	-									
We are working on repairing leaking	g arıp tubing in our	drip field. Have made some progre	ess.								

VILLAGES OF CROSS CREEK LOADING RATES								
Zone Identification	GPD/sq 2							
1	2,800							
2	2,800							
3	2,800							
4	2,800							
5	2,800							
6	2,800							
7	3,321							
8	3,866							
9	Not used							
10	Combined with 8							
11	3,271							
12	Not used							
13	Not used							
14	Not used							
15	Not used							
16	Not used							

Not used

**17** 

## 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

## **CHAIN OF CUSTODY**

Phone: 479-750-1170	Fax: 479-750-1172		Gr	IAIN C	SE CO	2101	JY										
Client Information				Project Information						Requested Parameters							
Company Name: Dixieland Utility LLC.			Permit/Project #:														
Address:	ddress: 3302 N. Dixieland			Purchase Order #:									99				
Rogers AR										2		(99					
Telephone:				Sampler Name(s): Ama (un) aurac							15./		AN				
Telephone:										ļ	ž	91)	28),	(43)			
				and Signat	ture(s): /						]	풀	)N+	155(	l m		}
ESC Client Number:	1698				<i>ـــ</i>							Phos(25), NH <sub>3</sub> -N(15.A)	TKN(16.A)N+N(91)	CBOD(70), TSS(28),PAN(99.99)	-ecal Coliform(43)		-
Sample Ide	ntification		Sample	e Collection		Sample Containers				pH(23)	2)\$(	1(16		alC			
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	tive	# :	<u>L</u>	Ph	Ţ,	g	Fec		
Dose Tank/Effluent	1010020181	10/14/14	1150	GRAB	Water	tefion	150 ml	none		1	х						
				GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> ,pH<	2	1		х	х				
				GRAB	Water	Plastic	1 qt	none/ice		1				X		_	
				GRAB	Water	Whirlpak	300ml	NaS2O4		1					x		
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			# N														
Relinquished By: (Signature and Printed Name) Date Time			Received By: (Sig	gnature and Printe	d Name)		Date	Time		Justo Jseď	ody Se ?	als:	I	Intac	1?	7	
Relinquished By: (Signature and Printe	at Name)	Date Date	Time	Received By: (Sig	gnature and Printer	d Name)	~	Date	Time			round	d: -√!	 ĭ	Cnoc	ial	
Relinquished By: (Signature and Printed Name) Date Time		Received for Left BJ: (Signature and Printed Name)		10 12/16	I Ilme	Regular Ime Were sa Ye			nples properly								
			MANA TANA	WAR I	mlki,	Field Test		Analys	حق من خد	lesi		V Resi			No Units	Ц.,	
Comments:				FLOW D. Analyst:	AIA	pH:	1155	AFIL		7.	111	77,	i		Offics	······································	
					Time:		Temp.:	1155	AE		94	G	35	4	(C)	°F	
					Reading: DO: Units: Debris		DO: Debris:			$\dashv$							
Cool all samples to 6 degrees C.				* * * * * * * * * * * * * * * * * * *	Chlorinate			? Yes No T			his	Doc	cume	nt is	Page	e ⊥ of	

## 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: 1610020181

Customer Name : DIXIELAND UTILITY LLC

Customer/Permit No. : 1698 / 4811-WR-4 001

Report Date : 10/23/16

Sample Date : 10/14/16

Sample Time : 1150

Sample Type : GRAB

Sample From : DOSE TANK EFFLUENT

Collected By: AU
Delivery By : AU
Work Order :

Purchase Order :

	Quality Assurance					
Analysis		- <del> </del>			Precision	Accuracy
<u>Date Time By</u>	Parameter	Result Notes	Quantity	Method	_ % RPD	<pre>% Recovery</pre>
10/17 1500 TSB	Ammonia Nitrogen	27.3 mg/L		SM 1997 4500-NH3 F	0.00	100.0 *
10/18 1000 TSB	Kjeldahl Nitrogen Total	29.12 mg/L		SM 1997 4500-NorgB	2.25	101.5
10/14 1155 AEU	рН	7.1 S.U.		SM 2000 4500-H+ B	0.00	N/A *
10/17 1400 TSB	Phosphorous, Total (as P)	5.9 mg/L		EPA 365.3	2.94	103.0 *
10/20 1300 TCF	Solids, Total Suspended	18.0 mg/L		SM 1997 2540 D	20.00	N/A *
10/14 1610 AEU	Coliform, Fecal	228 /100ml		SM 9222 D 1997	0.00	N/A *
10/14 1400 TSB	BOD, Carbonaceous	11.8 mg/L		SM 2001 5210 B	1.52	90.4 *
10/18 0845 TSB	Nitrate + Nitrite	5.6 mg/L		SM 2000 4500-NO3 E	1.60	100.8 *
10/18 1600 TSB	Nitrogen, Plant Available	33.4 mg/L		SM 1997 4500-N		

.\* 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.