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				j								
No 1 Villages of Cross Cre PERMITTEE ADDRES			FACILITY ADDR	Eee			AFIN NO.	1				
PO Box 9299	<u></u>			04-00899	1							
Fayetteville AR 72703				04-00099	1							
		WAST	1									
		MM/DD/YYYY	EWATER EFFLUENT MC		MM/DD/YYYY							
		9/1/2019			9/30/2019	j						
TREATED WASTEWATER EFFLUE	NT SAMPLING							1				
PARAMETER		Limit	Sample Measurement UNITS		Monitoring	R	Reporting					
Flow, Monthly total		REPORT	0.477862	MG	Total Flow per calendar month		· · · · · · · · · · · · · · · · · · ·					
Flow, daily maximun		REPORT	0.022456	MGD	Daily							
Carbonaceous Biochemical Oxygen Demand (CBOD5)		30	9.9	mg/l								
Total Suspended Solids (TSS)		30 177.5 mg/l										
Fecal Coliform Bacteria (FCB)		10,000	201 colonies		Grab Sample once per month							
рН		6.0 - 9.0 6.8 s.u.				Prior to	the 15th of the					
Total Phosphorus (TP)		REPORT	8.38	mg/l		folic	owing Month					
Total Kjeldahl Nitrogen (TKN)		REPORT	No Report	mg/l								
Ammonia Nitrogen		REPORT	No Report	mg/l	Grab sample once per quarter							
Nitrate Nitrogen (NO ₃ -N) + Nitrite Nitrogen (NO ₂ -N)		REPORT	No Report	mg/l	Grab sattiple office het quarter							
Plant Available Nitrogen (PAN)		REPORT	No Report	mg/l								
Loading Rate	pading Rate		No Report	gpd/ft 2	Daily							
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PE	NALTY OF LAW THAT I HAVE PERSONALL	Y EXAMINED AND AM WITH TH	E INFORMATION	1 200 1 1 1 1	,)	TELEPHONE	DATE				
•	SUBMITTED HEREIN;	AND BASED ON MY INQUIRY OF THOSE I	SPONSIBLE FOR	KMWHIL	+							
	OBTAINING THE INF	ORMATION, I BELIEVE THE SUBMITTED	ACCURATE, AND	SIGNATURE OF PRINCIPAL		(479) 530-	10/14/2019					
Kathy Bartlett	COMPLETE, I AM AW	ARE THAT THERE ARE SIGNIFICANT PENA	LTIES FOR SUBMITTING FALS	E INFORMATION,	EXECUTIVE OFFICER OR		5926					
TYPED OR PRINTED	INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.						AUTHORIZED AGENT					
COMMENTS AND EXPLANATION O	•	•										
Exceded TSS limit, the Pump Tan		solids removed. Work complete	d in October									
Repaired 2 supply/return line fittin	gs											

Sept 2019 VILLAGES OF CROSS CREEK LOADING RATES							
Daily Max	22456						
Zone Identification	GPD/sq 2						
1	2,537						
2	2,537						
3	2,537						
4	2,537						
5	2,537						
6	2,537						
7	3,009						
8	3,503						
9	Not used						
10	Combined with 8						
11	722						
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: 1909020083

Customer Name : DIXIELAND UTILITY LLC

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

Report Date : 10/03/19

Sample Date : 09/26/19

Sample Time : 1330

Sample Type : GRAB DIXIELAND Sample From : DOSE TANK EFFLUENT Collected By: JEW Delivery By : JEW

Work Order : Purchase Order :

	Quality Assurance					
Analysis					Precision	Accuracy
<u>Date Time By</u>	Parameter	Result Notes	Quantity	Method	% RPD	% Recovery
09/27 1330 JEW	рн	6.8 S.V.		SM 2011 4500-H+ B	0.00	N/A
09/30 1330 TSB	Phosphorous, Total (as P)	8.380 mg/L		EPA 365.3	2.23	112.0 *
09/30 1030 TSB	Solids, Total Suspended	177.5 mg/L (b)		SM 2011 2540 D	0.00	N/A *
09/26 1645 TSB	Fecal Coliform (MPN/100mL	201.0 /100ml		06/2012 Colilert18	19.59	0.0 *
09/27 0900 TSB	BOD, Carbonaceous	9.9 mg/L		SM 2001 5210 B	12.23	103.6 *

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.

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

⁽b) Exceeds Permit Limits for Maximum Concentration

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

Fax: 479-750-1172

Phone: 479-750-1170



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

Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

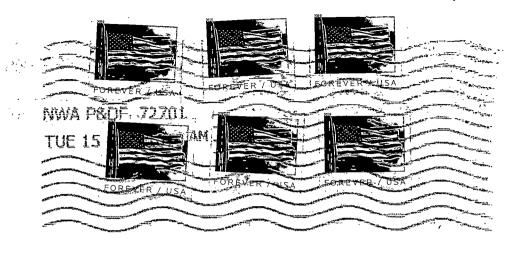
Client Information				Project Information					Requested Parameters									
Company Name:	ame: Dixieland Utility LLC.				oject #:		1 77/1/1/1/1				\top	Γ		Π	T]		Ī
Address:	dress: 3302 N. Dixieland				Purchase Order #:						1							
	Rogers AR			1							1							
Telephone:	(479)936-0333	(Cell)		Sampler N	Sampler Name(s): James Wilty James Wiltse						,			l,				
Telephone:		~~		The same of the same will se						100	ſ		=	声				
				and Signal	ture(s):						1		\$(28	n (4)				
ESC Client Number:	1698			Jana Olginat	and Signature(s):								, TS	lg.				
	dentification	T	Sample	Collection		T	Sample (Containors			ଳ	Phos(25)	CBOD(70), TSS(28)	Fecal Coliform(43.IF)				
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preservative		#	pH(23)	hos	BOC	ega				-
Dose Tank/Effluen		9-26-19	1330		 							<u> </u>	٦	뜨	╁┷┤	 		
DOSC TANKLINGEN	1 1909020003	1-20-11	1330	GRAB	Water	teflon	150 mL	None		1	Х	 		├				-
		 	 	GRAB	Water	Plastic	8 oz	H ₂ SO ₄ ,ph		1	 	Х						
	-			GRAB	Water	Plastic	1 qt	None, Co	 	1			Х		\sqcup			
-				GRAB	Water	Whirlpak	100 ml	NaS₂O₄ Co	ool†	1				X				
		1	 	<u> </u>				<u> </u>								<u> </u>		
		 '	<u> </u>	<u> </u>														
		<u>'</u>																
•				·														
Relinquished By: (Signature and Pri	inted Name) ownes Wilfse	Date 9-26-19	1640	i i i			Custody Seals:											
Relinquished By: (Signature and Printed Name)		Date	Time				Used' Turna	? round:	N		Intac	1?						
		0,0					Regul		lar	ar X		Special						
Relinquished By: (Signature and Printed Name) Date Time		Received for Vab B	Received for Vab By: (Signature and Printed Mame)			9-26-19 1646			Were samples properl			perly	ty preserved:					
Comments:		Art - way			Field Test	Time	Analys	st Resu					Units					
					Analyst:		pH:	/330	VEW.		6.8	1.8 6.8						
					Time:		Temp.:	1330	GEV	긔	28.	4	<u> 28,</u>	5	(C)		°F	
· · · · · · · · · · · · · · · · · · ·			Reading: Units:		DO: Debris:	——		-		—-}		\dashv						
^T Cool all samples to 6 degrees C.					Office.			? Yes No		+	This	<u></u>	···	at is	Page	$\overline{}$	~£ T	

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JCIFORMSICHAIN.XLS

NWA Utility Service
PO BOX 9299
FMATTEVILLE, AR
72703

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ADEQ Water DIVISION Permits Branch 5301 Northshore Drive-N. Little Rock, AR 72118-5317