

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

**PERMITTEE NAME**  
Greenfield Capital Development

**FACILITY NAME (IF DIFFERENT)**  
Sloan Estates

**PERMIT NO.**  
4837-W

NEW PERMIT IN THE PROCESS OF BEING APPLIED FOR BY SLOAN ESTATES POA

**PERMITTEE ADDRESS**  
PO Box 9299  
Fayetteville, AR 72703


**FACILITY ADDRESS**  
5088 E Sagely  
WC AR

**AFIN NO.**  
72-01074

**WASTEWATER EFFLUENT MONITORING PERIOD**  
FROM MM/DD/YYYY TO MM/DD/YYYY  
1/1/2015 TO 1/31/2015

**TREATED WASTEWATER EFFLUENT SAMPLING**

PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	6.5		MG/L	ONCE/ MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	8		MG/L	ONCE/ MONTH	GRAB
PH EFFLUENT GROSS VALUE	6 to 9	6.8		S.U.	ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	2		MG/L	ONCE/ MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	*****	4.8		MG/L	ONCE/ MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	20		N/100 ML	ONCE/ MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	*****	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/ MONTH	TOTAL FLOW
		51,519				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  Kathryn Bartlett	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.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE
			479	530-5926	2/3/2015
TYPED OR PRINTED			AREA CODE	NUMBER	MM/DD/YYYY

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

# 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: 1501020295  
 Customer Name : GREENFIELD CAP DEV-SLOAN EST.  
 Customer Number : 1678  
 Report Date : 01/27/15

Sample Date : 01/21/15  
 Sample Time : 0830  
 Sample Type : GRAB SLOAN  
 Sample From : EFFLUENT

Collected By: WDS  
 Delivery By : WDS  
 Work Order :  
 Purchase Order :

### Laboratory Analysis

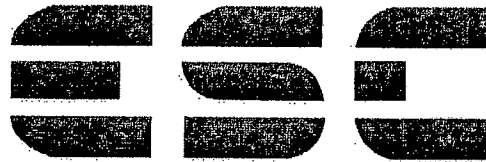
Analysis							Quality Assurance		
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
01/22	1600	TSB	Ammonia Nitrogen	4.8 mg/L			SM 1997 4500-NH3 F	6.14	94.0 *
01/21	0830	WDS	pH	6.8 S.U.			SM 2000 4500-H+ B	0.00	N/A *
01/22	1045	TSB	Phosphorous, Total (as P)	6.5 mg/L			EPA 365.3	0.00	100.0 *
01/26	1545	KIK	Solids, Total Suspended	2.0 mg/L			SM 1997 2540 D	40.00	N/A *
01/21	1510	KIK	Coliform, Fecal	20 /100ml			SM 1997 9222 D	0.00	N/A *
01/21	1506	VLP	BOD, Carbonaceous	8.0 mg/L			SM 2001 5210 B	0.00	115.0 *

\* 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 Richard Broom  
 Environmental Services Co., Inc.

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:		Greenfield Cap. Dev.-Sloan Estates				Permit/Project #:					pH (23)	Phos(25), NH <sub>3</sub> -N (15.A)	CBOD (70), TSS (28)	F. COLIFORM (43)							
Address:		1849 Trillium Lane Fayetteville, Ar 72704				Purchase Order #:															
Telephone:		(479)936-0333 (Cell)				Sampler Name(s):		Wade Schmitt													
Telephone:						and Signature(s):		[Signature]													
ESC Client Number:		1678																			
Sample Identification			Sample Collection			Sample Containers															
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#												
EFFLUENT	1501020295	1-21-15	8:30	GRAB	Water	teflon	150 ml	none	1	x											
EFFLUENT	[Signature]	[Signature]	[Signature]	GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH<2	1		x										
EFFLUENT	[Signature]	[Signature]	[Signature]	GRAB	Water	Plastic	1 qt	none/ice	1			x									
EFFLUENT	[Signature]	[Signature]	[Signature]	GRAB	Water	Whirlpak	125 ml	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	1				x								
Cool all samples to 6 degrees C.																					
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used? <input checked="" type="checkbox"/>		Intact? <input type="checkbox"/>									
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Turnaround:		Regular <input checked="" type="checkbox"/>		Special <input type="checkbox"/>									
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:		Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>									
Comments:						FLOW DATA	Field Test	Time	Analyst	Result	Result	Units									
						Analyst:	pH:	8:30	WDS	6.8											
						Time:	Temp.:														
						Reading:	DO:														
						Units:	Debris:														
Cool all samples to 6 degrees C.											Chlorinated? Yes No		This Document is Page ___ of ___								