

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

PERMITTEE NAME
Greenfield Capital Development
PERMITTEE ADDRESS
PO Box 9299 Fayetteville, AR 72703

FACILITY NAME (IF DIFFERENT)
Sloan Estates
FACILITY ADDRESS
5088 E Sagely WC AR

PERMIT NO.
4837-W
AFIN NO.
72-01074

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

WASTEWATER EFFLUENT MONITORING PERIOD	
FROM	TO
MM/DD/YYYY 9/1/2014	MM/DD/YYYY 9/30/2014

TREATED WASTEWATER EFFLUENT SAMPLING						
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	*****	6.6		MG/L	ONCE/MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	< 2		MG/L	ONCE/MONTH	GRAB
PH EFFLUENT GROSS VALUE	6 to 9	7		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	*****	4.9		MG/L	ONCE/MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	38		N/100 ML	ONCE/MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	*****	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/MONTH	TOTAL FLOW
		42,372				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.			TELEPHONE	DATE	
Kathryn Bartlett				479	530-5926	10/9/2014
TYPED OR PRINTED				AREA CODE	NUMBER	MM/DD/YYYY

Kenneth Deary
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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: 1409020289	Sample Date : 09/17/14	Collected By: KIK
Customer Name : GREENFIELD CAP DEV-SLOAN EST.	Sample Time : 0950	Delivery By : KIK
Customer Number : 1678	Sample Type : GRAB SLOAN	Work Order :
Report Date : 09/22/14	Sample From : EFFLUENT	Purchase Order :

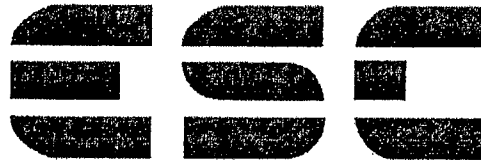
<u>Laboratory Analysis</u>							<u>Quality Assurance</u>	
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>					<u>Parameter</u>	<u>% RPD</u>
09/18	1000	TSB	Ammonia Nitrogen	4.9 mg/L		SM 1997 4500-NH3 F	0.00	102.3 *
09/17	0950	KIK	pH	7.0 S.U.		SM 2000 4500-H+ B	0.00	N/A *
09/18	0830	TSB	Phosphorous, Total (as P)	6.6 mg/L		EPA 365.3	0.00	97.0 *
09/18	1000	KIK	Solids, Total Suspended	< 2.0 mg/L		SM 1997 2540 D	0.00	N/A *
09/17	1210	RHB	Coliform, Fecal	38 /100ml		SM 1997 9222 D	0.00	N/A *
09/17	1400	TSB	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	6.82	85.6 *

* 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 Richard Brown
 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 ₃ -N (15.A)	CBOD (70), TSS (28)	F. COLIFORM (43)								
Address: 1849 Trillium Lane						Purchase Order #:																
Fayetteville, Ar 72704						Sampler Name(s): Kyle Krievens																
Telephone: (479)936-0333 (Cell)						and Signature(s):																
Telephone:																						
ESC Client Number: 1678																						
Sample Identification		Sample Collection				Sample Containers																
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#													
EFFLUENT	1409020289	9-17-14	0950	GRAB	Water	teflon	150 ml	none	1	x												
EFFLUENT	L	L	L	GRAB	Water	Plastic	8 oz	H ₂ SO ₄ , pH<2	1		x											
EFFLUENT	L	L	L	GRAB	Water	Plastic	1 qt	none/ice	1			x										
EFFLUENT	L	L	L	GRAB	Water	Whirlpak	125 ml	Na ₂ S ₂ O ₃	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?	Intact?											
		9-17-14	1100			9-17-14	1100	Turnaround:		<input checked="" type="checkbox"/>	<input type="checkbox"/>											
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	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	No	<input checked="" type="checkbox"/>	<input type="checkbox"/>									
Comments:						FLOW DATA	Field Test	Time	Analyst	Result	Result	Units										
						Analyst:	pH:	0950	KIK	7.0												
						Time:	Temp.:						°C	°F								
						Reading:	DO:															
						Units:	Debris:															
Cool all samples to 6 degrees C.										Chlorinated?	Yes	No	This Document is Page ___ of ___									