

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

PERMITTEE NAME
Bethel Oaks Subdivision
PERMITTEE ADDRESS
PO Box 3008 Fort Smith AR 72901

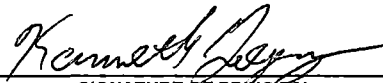
FACILITY NAME (IF DIFFERENT)
Bethel Oaks Subdivision
FACILITY ADDRESS
WA County Hwy 62 at Bethel Blacktop Rd Farmington AR

PERMIT NO.
4875-WR-1
AFIN NO.
72-01656

WASTEWATER EFFLUENT MONITORING PERIOD		
MM/DD/YYYY		MM/DD/YYYY
4/1/2017		4/30/2017

TREATED WASTEWATER EFFLUENT SAMPLING

PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	0.191946	MGD	Grab Sample once per month	Prior to the 15th of the following Month
Flow, daily maximum	REPORT	0.008163	MGD		
Carbonaceous Biochemical Oxygen Demand (CBOD5)	15	7.6	mg/l		
Total Suspended Solids (TSS)	15	18.9	mg/l		
Fecal Coliform Bacteria (FCB)	7,800	< 4	colonies/100ml		
pH	6.0 - 9.0	7.2	s.u.		
Total Phosphorus (TP)	REPORT	6.2	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	48.4	mg/l		
Ammonia Nitrogen	REPORT	38.4	mg/l		
Nitrate Nitrogen (NO3-N)	REPORT	4.65	mg/l		
Nitrite Nitrogen (NO2-N)	REPORT	0.104	mg/l		
Plant Available Nitrogen (PAN)	REPORT	46.2	mg/l		
Total Solids	REPORT	0.049	Percentage (%)		
Loading Rate	0.138	680	gpd/ft 2	Continuous	

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.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
Ken Gregory			(479) 530-5926	5/9/2017
TYPED OR PRINTED				MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here) Upon inspection this month, we noticed the floats in Post Treatment lift station had shorted out allowing pumps to run continuously, and not allow final settling tank to function properly. We have reworked this section, and it is now functioning properly. We will monitor and report on next month report.

BETHEL OAKS LOADING RATES .138

Zone Identification	GPD/sq 2
Zone 1	680.25
Zone 2	680.25
Zone 3	680.25
Zone 4	680.25
Zone 5	680.25
Zone 6	680.25
Zone 7	680.25
Zone 8	680.25
Zone 9	680.25
Zone 10	680.25
Zone 11	680.25
Zone 12	680.25

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: 1704020171	Sample Date : 04/19/17	Collected By: AEU
Customer Name : GREENFIELD CAP DEV-BETHEL OAKS	Sample Time : 0810	Delivery By : AEU
Customer/Permit No. : 1855 / 4875-WR-2	Sample Type : GRAB BETHEL OAKS	Work Order :
Report Date : 04/26/17	Sample From : EFFLUENT	Purchase Order :

<u>Laboratory Analysis</u>							<u>Quality Assurance</u>		
<u>Analysis</u>							<u>Precision</u>	<u>Accuracy</u>	
<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>% RPD</u>	<u>% Recovery</u>
04/20	0845	JCB	Ammonia Nitrogen	38.4 mg/L			SM 1997 4500-NH3 F	0.00	96.1 *
04/25	0730	TSB	Total Kjeldahl Nitrogen	48.40 mg/L			02/2014 HACH 10242	1.82	104.0 *
04/20	1030	TSB	Nitrate Nitrogen	4.65 mg/L			SM 2000 4500-NO3 E	1.09	99.2 *
04/19	1700	AEU	Nitrite Nitrogen	0.104 mg/L			SM 2000 4500 NO2 B	3.85	95.1 *
04/19	0814	AEU	pH	7.2 S.U.			SM 2000 4500-H+ B	1.36	N/A *
04/24	1325	TSB	Phosphorous, Total (as P)	6.2 mg/L			EPA 365.3	1.98	103.2 *
04/21	1310	JCB	Solids, Total Suspended	18.9 mg/L	(b)		SM 1997 2540 D	46.15	N/A *
04/19	1630	JCB	Coliform, Fecal	< 4 /100ml			SM 9222 D 1997	0.00	N/A *
04/19	1400	TSB	BOD, Carbonaceous	7.6 mg/L			SM 2001 5210 B	1.48	100.7 *
04/20	1400	AEU	Solids, % Total by mass	0.049 %			SM 1997 2540 G	0.57	N/A *
04/26	0915	RHB	Nitrogen, Plant Available	46.2 mg/L			SM 1997 4500-N		
04/19	0814	AEU	Sample Collection/Travel	1 each					

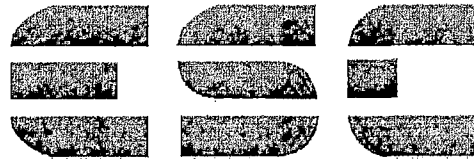
* QA data shown is from a different sample or standard on the same date.

(b) Exceeds Permit Limits for Maximum Concentration

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: Bethel Oaks				Permit/Project #:						pH(23)	P(25), NH ₃ -N(15-A), NO ₃ (18), TKN(16-A)	CBOD(70), TSS(28), NO ₂ (19)	F. COLIFORM(43)	%Solids (82), PAN(99.99)
Address: 1849 N. Trillium Lane				Purchase Order #:										
Fayetteville, AR 72704				Sampler Name(s): Amber Anderson										
Telephone: 479-790-3813				and Signature(s):										
Telephone:														
ESC Client Number: 1855														
Sample Identification		Sample Collection				Sample Containers								
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#					
EFFLUENT	F0402071	4/19/17	0810	GRAB	Water	teflon	150 ml	none	1	x				
EFFLUENT	I	I	I	GRAB	Water	Plastic	8 oz	H ₂ SO ₄ , pH<2	1	x				
EFFLUENT	I	I	I	GRAB	Water	Plastic	1 qt	none/ice	1		x	x		
EFFLUENT	I	I	I	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?			
		4/19/17	1120					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"/>	
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Yes		<input checked="" type="checkbox"/>	No	<input type="checkbox"/>		
Comments:				FLOW DATA		Field Test	Time	Analyst	Result	Result	Units			
				Analyst:		pH:	0814	AEL	7.2	7.2				
				Time:		Temp.:	I	L	30.3	30.3 (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>					