

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

<b>PERMITTEE NAME</b>
Bethel Oaks Subdivision
<b>PERMITTEE ADDRESS</b>
PO Box 3008 Fort Smith AR 72901

<b>FACILITY NAME (IF DIFFERENT)</b>
Bethel Oaks Subdivision

<b>PERMIT NO.</b>
4875-WR-1

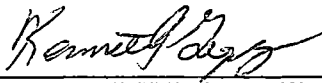
<b>FACILITY ADDRESS</b>
WA County Hwy 62 at Bethel Blacktop Rd Farmington AR

<b>AFIN NO.</b>
72-01656

<b>WASTEWATER EFFLUENT MONITORING PERIOD</b>	
MM/DD/YYYY	MM/DD/YYYY
7/1/2017	7/31/2017

**TREATED WASTEWATER EFFLUENT SAMPLING**

PARAMETER	Limit	Sample Measurement	UNITS	Monitoring	Reporting
Flow, Monthly total	REPORT	0.072172	MGD	Grab Sample once per month	Prior to the 15th of the following Month
Flow, daily maximum	REPORT	0.002681	MGD		
Carbonaceous Biochemical Oxygen Demand (CBOD5)	15	< 2	mg/l		
Total Suspended Solids (TSS)	15	28	mg/l		
Fecal Coliform Bacteria (FCB)	7,800	< 4	colonies/100ml		
pH	6.0 - 9.0	7.2	s.u.		
Total Phosphorus (TP)	REPORT	8.7	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	51.2	mg/l		
Ammonia Nitrogen	REPORT	40.8	mg/l		
Nitrate Nitrogen ( NO <sub>3</sub> -N)	REPORT	8.68	mg/l		
Nitrite Nitrogen ( NO <sub>2</sub> -N)	REPORT	0.33	mg/l		
Plant Available Nitrogen (PAN)	REPORT	52.9	mg/l		
Total Solids	REPORT	0.052	Percentage (%)		
Loading Rate	0.138	370	gpd/ft 2		

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.	 <b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE	DATE
Ken Gregory			(479) 530-5926	8/9/2017
TYPED OR PRINTED				MM/DD/YYYY

**COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)** We have scheduled trucks to pull sludge and scum solids from the tanks. We have also increased the recycle rate in the clarifier sludge pump to pull more solids from clarifier and send back to Primary Settling Tank. We will monitor and report with next months MMR.

July 2017 BETHEL OAKS LOADING RATES 2,681Max GPD

Zone Identification	GPD/sq 2
Zone 1	370
Zone 2	370
Zone 3	370
Zone 4	370
Zone 5	370
Zone 6	370
Zone 7	370
Zone 8	370
Zone 9	370
Zone 10	370
Zone 11	370
Zone 12	370

# 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: 1707020192	Sample Date : 07/19/17	Collected By: AEU
Customer Name : GREENFIELD CAP DEV-BETHEL OAKS	Sample Time : 0831	Delivery By : AEU
Customer/Permit No. : 1855 / 4875-WR-2	Sample Type : GRAB BETHEL OAKS	Work Order :
Report Date : 07/26/17	Sample From : EFFLUENT	Purchase Order :

### Laboratory Analysis

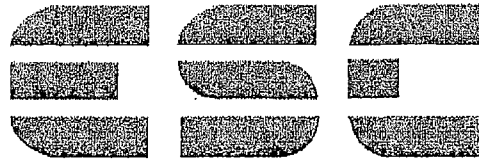
Analysis							Quality Assurance		
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
07/20	0930	TSE	Ammonia Nitrogen	40.8 mg/L			SM 1997 4500-NH3 F	0.00	101.5 *
07/24	1330	TSB	Total Kjeldahl Nitrogen	51.20 mg/L			02/2014 HACH 10242	3.29	109.0 *
07/25	0830	TSB	Nitrate Nitrogen	8.68 mg/L			SM 2000 4500-NO3 E	1.36	98.3 *
07/20	0850	TSE	Nitrite Nitrogen	0.330 mg/L			SM 2000 4500 NO2 B	5.41	95.4 *
07/19	0834	AEU	pH	7.2 S.U.			SM 2000 4500-H+ B	0.00	N/A
07/24	1400	TSB	Phosphorous, Total (as P)	8.7 mg/L			EPA 365.3	1.20	101.9 *
07/25	1122	AEU	Solids, Total Suspended	28.0 mg/L	(b)		SM 1997 2540 D	0.00	N/A *
07/19	1515	JCB	Coliform, Fecal	< 4 /100ml			SM 9222 D 1997	0.00	N/A
07/19	1400	TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	4.86	100.6 *
07/20	1200	JCB	Solids, % Total by mass	0.052 %			SM 1997 2540 G	1.94	N/A
07/25	1000	TSB	Nitrogen, Plant Available	52.9 mg/L			SM 1997 4500-N		
07/19	0834	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 <sub>3</sub> -N(15.A), NO <sub>3</sub> (18), TKN(16.A)	CBOD(70), TSS(28), NO <sub>2</sub> (19)	F. COLIFORM(43)	%Solids (82), PAN(99.99)						
Address:		1849 N. Trillium Lane Fayetteville, AR 72704				Purchase Order #:														
Telephone:		479-790-3813				Sampler Name(s):		Amber Underwood												
Telephone:						and Signature(s):		<i>[Signature]</i>												
ESC Client Number:		1855																		
Sample Identification		Sample Collection				Sample Containers														
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#											
EFFLUENT	70702012	7/19/17	0831	GRAB	Water	teflon	150 ml	none	1	x										
EFFLUENT	I	I	I	GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , 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 <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:												
<i>[Signature]</i> Amber Underwood		7/19/17	1057	<i>[Signature]</i> John Boyd		7/19/17	1057	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:												
				<i>[Signature]</i> John Boyd		7/19/17	1057	Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>										
Comments:				FLOW DATA		Field Test		Time		Analyst		Result		Result		Units				
				Analyst:		pH:		0831		AFU		7.2		7.2		°F				
				Time:		Temp.:		I		I		26.0		26.0		°C				
				Reading:		DO:														
				Units:		Debris:														
Cool all samples to 6 degrees C.										Chlorinated? Yes No		This Document is Page <u>1 of 1</u>								