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

PERMITTEE NAME
Bethel Oaks Property Owners Association Inc
PERMITTEE ADDRESS
12531 Bethel Oaks Dr
Farmington AR 72730

 FACILITY NAME	
Bethel Oaks Subdivision	
FACILITY ADDRESS	

4875-WR-3

AFIN NO.

PERMIT NO.

72-01656

	WASTE	WATER EFFLUENT MONITORING PERIO	D
MM/DD/YYYY			MM/DD/YYYY
4/1/2021	•		4/31/2021

Flow, Monthly total  Flow, dally maximum *  Carbonaceous Biochemical Oxygen Demand (CBOD5)  Total Suspended Solids (TSS)  Fecal Collform Bacteria (FCB)  pH		Limit Sample Measurement Units			Monitoring	Reporting			
		REPORT	0.259,022	MG	Total Flow per calendar month				
		REPORT		GD	Daily .				
		30	< 2.0	mg/l					
		45	23.5	mg/l					
		7,800	< 5.0	colonies/100ml	Grab Sample once per month				
		6.0 - 9.0	7.4	s.u.		Prior to the 15th of the following Month			
Total Phosphorus (TP)		REPORT	8.37	mg/l		TOROUNING INICITAL			
Total Kjeldahl Nitrogen (TKN)		REPORT	55.2	mg/l					
Ammonia Nitrogen	nmonia Nitrogen		46.8	mg/l					
Nitrate Nitrogen ( NO3-N) + Nitrite Nitro	gen ( NO2-N)	REPORT	6.08	mg/l	Grab sample once per quarter	,			
Plant Available Nitrogen (PAN)		REPORT	55.4	mg/l					
NAME OF PRINCIPAL EXECUTIVE OFFICER  Kathy Bartlett	INFORMATION SUE	DER PENALTY OF LAW THAT I HAVE PER BMITTED HEREIN; AND BASED ON MY INC R OBTAINING THE INFORMATION, I BELIE	IMMEDIATELY	K Marth.	TELEPHONE (479) 530-592				
TYPED OR PRINTED	ACCURATE, AND C	OMPLETE. I AM AWARE THAT THERE AF NFORMATION, INCLUDING THE POSSIBIL	R SUBMITTING	SIGNATURE OF COGNIZANT OF	FICIAL DATE 5/14/2021				
COMMENTS AND EXPLANATION		(Reference all attachments here)	THE PART OF THE PART PROPERTY.						

* LOADING RATE BY ZONE									
Zone 1	992	Zone 5	992	Zone 9	992				
Zone 2	992	Zone 6	992	Zone 10	992				
Zone 3	992	Zone 7	992	Zone 11	992				
Zone 4	992	Zone 8	992	Zone 12	992				

## 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: 2104020062

Customer Name : BETHEL OAKS UTILITY, LLC

Customer/Permit No.: 1855 / 4875-WR-3

Customer/Permit No.: 1855 / Report Date: 04/30/21

Sample Date : 04/22/21

Sample Time : 1411 Sample Type : GRAB

Sample From : EFFLUENT

Collected By: HNS

Delivery By : HNS Work Order :

Purchase Order :

	Quality A	Assurance				
Analysis				j	Precision	Accuracy
<u>Date Time By</u>	Parameter	Result Note	s <u>Quantity</u>	Method	% RPD	% Recovery
04/26 1250 HNS	Ammonia as N, (HACH 10205)	46.80 mg/L	•	SM 2011 4500-NH3 F	2.87	100.0 *
04/30 1000 TWM	Total Kjeldahl Nitrogen	55.2 mg/L		02/2014 HACH 10242	0.68	101.0
04/22 1414 HNS	pH .	7.4 S.U.		SM 2011 4500-H+ B	0.00	N/A *
04/26 1130 HNS	Phosphorous, Total (as P)	8.37 mg/L		EPA 365.3	2.74	101.0 *
04/26 1050 HNS	Solids, Total Suspended	23.5 mg/L		SM 2011 2540 D	66.67	N/A *
04/22 1645 HNS	Fecal Coliform (MPN/100mL	< 5.0 /100ml		06/2012 Colilert18	1.94	N/A *
04/22 1745 NTR	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	33.96	105.3 *
04/26 1340 HNS	Nitrate + Nitrite	6.08 mg/L	•	01/2013 HACH 10206	2.02.	101.0 *
04/30 1330 TWM	Nitrogen, Plant Available	55.4 mg/L		SM 1997 4500-N		:

\* 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

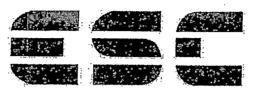
Environmental Services Co., Inc.

269022 11904

## 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					Pr	oject inf	formation	1			T	Re	que	sted	Pa	ram	eter	rs	
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ESC Client Nu	mber:	1855			1							(25)	Fecal Coliform (43.IF)	(70),		1	'	'	
San	nple Iden	itification	1	Sample	e Collection			Sample (	Containers	s		Phos	) E	0	(23)		'	'	
Identifica	tion	ESC Control #	Date	Time	Type	Matrix	Type	Volume			#		Fe	CBOD	Ha Ha	1 '	'		
EFFI	LUENT	2104020062	4 122/71	1411	GRAB	Water	Plastic		H₂SO₄,pH<		1	x	<del>                                     </del>	<u> </u>					-
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	Manager and the second					Analyst:								***************************************	_		J11114-		
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HNS .	•	Cool all samples to 6 deg	grees C.					Chlorinated?	? Yes No	lo	T.	This	Doci	ımer	nt is F	-age		of /	

3:WF )CIFORMSICHAIN.XLS

NWA Utility Services Inc PO Box 9299 Fayetteville, AR 72703

ADEQ WATER DIVISION/PERMITS BRANCH 5301 Northshore Drive N Little Rock, AR 72118-5317



