ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT J 🍎 **FACILITY NAME** PERMITTEE NAME PERMIT NO. Bethel Oaks Subdivision 4875-WR-3 Bethel Oaks Property Owners Association Inc. PERMITTEE ADDRESS **FACILITY ADDRESS** AFIN NO. 12531 Bethel Oaks Dr CR 62 Farmington AR 72-01656 Farmington AR 72730 WASTEWATER EFFLUENT MONITORING PERIOD MM/DD/YYYY MM/DD/YYYY 12/1/2019 12/31/2019 TREATED WASTEWATER EFFLUENT SAMPLING **Parameter** Limit Sample Measurement Units Monitoring Reporting Flow, Monthly total REPORT 0.238664 MG Total Flow per calendar month REPORT GD 0.012035 Daily Flow, daily maximum * Carbonaceous Biochemical Oxygen Demand (CBOD5) 30 < 3.5 mg/l Total Suspended Solids (TSS) 45 12 mg/l Fecal Coliform Bacteria (FCB) 7,800 < 10.0 colonies/100ml Grab Sample once per month Prior to the 15th of the 6.0 - 9.07.4 pН s.u. following Month Total Phosphorus (TP) REPORT 6.54 mg/l Total Kieldahl Nitrogen (TKN) REPORT mg/l Ammonia Nitrogen REPORT mg/l Grab sample once per quarter Nitrate Nitrogen (NO3-N) + Nitrite Nitrogen (NO2-N) REPORT mg/l Plant Available Nitrogen (PAN) REPORT mg/l

NAME OF PRINCIPAL EXECUTIVE OFFICER Kathy Bartlett

TYPED OR PRINTED

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.

TELEPHONE (479) 530-5926 SIGNATURE OF COGNIZANT OFFICIAL DATE 1/13/2020

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

* LOADING RATE BY ZONE										
Zone 1	0.001003	Zone 5	0.001003	Zone 9	0.001003					
Zone 2	0.001003	Zone 6	0.001003	Zone 10	0.001003					
Zone 3	0.001003	Zone 7	0.001003	Zone 11	0.001003					
Zone 4	0.001003	Zone 8	0.001003	Zone 12	0.001003					

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: 1912020093

Customer Name : BETHEL OAKS UTILITY, LLC

Customer/Permit No.: 1855 / 4875-WR-3 Report Date: 01/07/20 Sample Date : 12/19/19

Sample Time : 1020 (PH 1025)

Sample Type : GRAB
Sample From : EFFLUENT

Collected By: TWM

Delivery By : TWM Work Order : Purchase Order :

Analysis]	Laboratory Analysis			Quality Precision	
Date_ Time By	Parameter	Result Notes	Ouantity	Method		Accuracy
12/19 1025 TWM			Quantity	1	% RPD	% Recovery
· .	-	7.4 S.U.		SM 2011 4500-H+ B	0.00	N/A
12/27 1400 TWM	Phosphorous, Total (as P)	6.54 mg/L		EPA 365.3	0.90	111.0 *
	Solids, Total Suspended	12.0 mg/L		SM 2011 2540 D	2.47	N/A
12/19 1600 VLP	Fecal Coliform (MPN/100mL	< 10.0 /100ml		06/2012 Colilert18		0.0
	BOD, Carbonaceous	< 3.5 mg/L		SM 2001 5210 B	5.30	92.7 *
01/03 1300 TSB	Solids, % Total by mass	0.034 %		SM 1997 2540 G	3.64	N/A *

* 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.

238664

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762

website: www.esclabs.com

Phone: 479-750-1170 Fax: 479-750-1172



Corporate Office, Little Rock, Arkansas 501-221-2565

> Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

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Client Information			Project Information					Requested Parameters						s				
Company Name:	Bethel Oaks Utilit	, LLC Permit/P			oject #:							Π	(82)					Γ
Address:	6516 Mesa Street		Purchase	Purchase Order #:						Solids	l							
	Fayetteville, AR 72704										l	Sol		ļ				
Telephone:	e: 479-790-3813			Sampler Name(s):			er Mick II				Ē	%		'	1			
Telephone:			7						1	43	(28),				1			
				and Signature(s):						1	E	SS		'			l	
ESC Client Number:	1855			1 "	\						(25)	뜵	6	•				
Sample Identification		Sample Collection		Sample Containers				SO	ŭ	0	(23)				ĺ			
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume			#	T Phos	Fecal Coliform (43.1F)	CBOD (70), TSS) Hd				
EFFLUEN	T 1912020093	12/19/19	10120	GRAB	Water	Plastic	8 oz	H₂SO₄,pH		1	х	<u> </u>		۳			H	
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EFFLUEN	Г 1912020093		10:25	GRAB	Water	Teflon	150 ml	none		0	-			Х				
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Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name) Date Time			Used?		N		Intac	t?	\Box					
			()) 0				1906		Turnaround: Regular X Special							
Relinquished By: (Signature and Printed Name)		12/19/19	Time // 1/200 /	Received for Lav By: (Signature and Printed Name) Date Tim		В		samples properly preserved: Yes X No										
Comments:		JIN1 102 - 10	FLOW DATA Field Test			Analys				X No Result Units					\dashv			
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				Time:		Temp.:	10:25	TIM	~	14.	3	14,	12	$\overline{\mathbb{C}}$		°F	\Box	
				Reading: Units:		DO: Debris:			\dashv		\dashv			<u>:</u>				
Cool all samples to 6 degrees C.				-			Chlorinated	? Yes N		+	This	Docu	ımer	nt is	Daine	. 1	of	귀
													41101	17 10	ay"	<u> </u>	<u> </u>	-

NWA UTILITY SERVICES, INC

PO Box 9299 Fayetteville, AR 72703



FOREVER / USA



FOREVER / US



OREVER / USA



FOREVER / USA

ADEQ Water DIVISION / Permits Branch 5301 Northshore Dr. N. 21+1/2 Rock, AR 72118