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

PERMITTEE NAME	FACILITY NAME							
Bethel Oaks Property Owners Ass	ociation Inc		Bethel Oaks Subdivis	sion		L	4875-WR-3	
PERMITTEE ADDRESS 12531 Bethel Oaks Dr Farmington AR 72730				AFIN NO. 72-01656				
		MM/DD/YYYY 6/1/2019	OD MM/DD/YYYY 6/30/2019	YYY				
TREATED WASTEWATER EFFLUE	NT SAMPLING					- 1 2 A 8		
Parameter		Limit, The Limit	Sample Measurement	Units	Monitoring	R	Reporting	
Flow, Monthly total		REPORT	0.209767	MG	Total Flow per calendar month			
Flow, daily maximum *		REPORT	13,557	GD	Daily			
Carbonaceous Biochemical Oxygen Demand (CBOD5)		30	<2	mg/l		ĺ		
Total Suspended Solids (TSS)		45	12.3	mg/l		1		
Fecal Coliform Bacteria (FCB)		7,800	< 10	colonies/100ml	Grab Sample once per month			
рН		6.0 - 9.0	7.1	s.u.		Prior to the 15th of the following Month		
Total Phosphorus (TP)		REPORT	7.88	mg/l				
Total Kjeldahl Nitrogen (TKN)		REPORT	No Report	mg/l				
Ammonia Nitrogen		REPORT	No Report	mg/l	Grab sample once per quarter			
Nitrate Nitrogen (NO3-N) + Nitrite Nitro	gen (NO2-N)	REPORT	No Report	mg/l				
Plant Available Nitrogen (PAN)		REPORT	No Report	mg/l				
NAME OF PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER	PENALTY OF LAW THAT I HAVE PERS	h ()		TELEPHONE			
Ken Gregory	TINFORMATION SU	SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS ESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED HEN SUSPENSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED					(479) 530-5926	
	INFORMATION IS T	ON IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT SIGNATURE OF COGNIZANT OFFICIAL						
TYPED OR PRINTED	PENALTIES FOR S	SUBMITTING FALSE INFORMATION, INCL			7/1/2019			
COMMENTS AND EXPLANATIO		(Reference all attachments here)						
					. <u></u>			
*LOADING	DATE BY ZONE							

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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: 1906020103

Customer Name : BETHEL OAKS UTILITY, LLC Customer/Permit No. : 1855 / 4875-WR-3

Report Date : 06/28/19

Sample Date : 06/21/19 Sample Time : 0840

Sample Type : GRAB
Sample From : EFFLUENT

Collected By: JEW Delivery By : JEW

Work Order : Purchase Order :

	Quality A	ssurance				
Analysis					Precision	Accuracy
Date Time By	<u>Parameter</u>	Result Notes	Quantity	<u> Method</u>	% RPD	<pre>% Recovery</pre>
06/21 0845 JEW	рн	7.1 S.U.		SM 2011 4500-H+ B	0.00	N/A *
06/27 1015 TSB	Phosphorous, Total (as P)	7.880 mg/L		EPA 365.3	1.71	116.0 *
06/24 1230 TSB	Solids, Total Suspended	12.3 mg/L		SM 2011 2540 D	3.73	N/A *
06/21 1604 TSB	Fecal Coliform (MPN/100mL	< 10.0 /100ml		06/2012 Colilert18	11.41	0.0 *
06/21 1300 TSB	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	8.13	94.0 *
06/26 1605 TSB	Solids, % Total by mass	0.042 %		SM 1997 2540 G	0.00	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.

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com

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

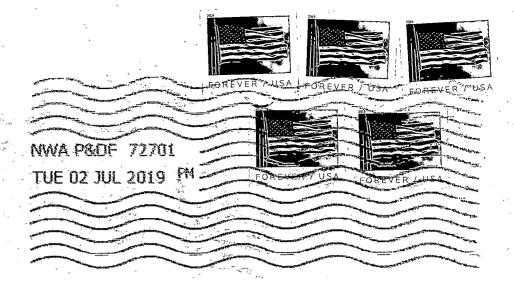
Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

Phone: 4/9-750-1170	Fax: 479-750-1172		OI.		// CO.									- Company of the last of the l	التحار المجرودة عدان	
Client Information				Project Information					Requested Parameters							
Company Name:	ame: Bethel Oaks Utility, LLC			Permit/Project #:							(82					
Address:	6516 Mesa Street			Purchase	Purchase Order #:							Solids				
Fayetteville, AR 72704				7							% Sc					
Telephone:	479-790-3813			Sampler Name(s): (smer With Tomes Wilks						(F)				1		
Telephone:				Sampler Name(s): James Wills Tomes Willse (87 88 88 88 88 88 88 88 88 88 88 88 88 8						i l						
\			and Signature(s):					1	Jrm	TSS						
ESC Client Number:	1855															
Sample Ider	ntification		Sample	nple Collection		1	Sample Containers			(23)	<u>a</u>) Q		Phos		
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva		핍	Fecal	CBOD		<u>-</u>		
EFFLUENT		6-21-19		GRAB	Water	teflon	150 ml	none	1	X						
EFFLUENT	1		7/-	GRAB	Water	Whirlpak		Na ₂ S ₂ O ₃	1		X		\neg			
EFFLUENT	 - - - - - - - - - - - - - - - 			GRAB	Water	Plastic	1 qt	none/ice	1	1		х				_
EFFLUENT				GRAB	Water	Plastic	8 oz.	H ₂ SO ₄ ,pH<	2 1				$\neg \uparrow$	x		\neg
	Ţ					1		1.24/								
						Cool all s	amples to	6 degrees C	:	†						
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Relinguished By: (Signature and Printed Name)		Date	Time	Received By: (S	ignature and Printe	d Name)	<u> </u>	Date	Time		ody Se	als:				
Solinguished By: (Signature and Printed Name)		6-21-19 Date	1140 Time	Received By: (Si	ignature and Printe	d Name)		Date	Time	Used	i? around	لــــا		Intact?		
, , , , , , , , , , , , , , , , , , , ,									Regu				Special			
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: Usignature and Printed Nam Ally John Hexis Av		nderson	Son 6-21-19 1/40		Were samples properl Yes		репу р	y preserved:				
Comments:			/ //	FLOW D	ATA	Field Test	Time	Analyst	Res		Resu		Uni	ts		
		Analyst: Time:		pH: Temp.:	0845	(Selv)	7,	13	7,/ 25,3 © °F		- oF					
				Reading:		DO:	2032		(AC)	<u>*e-7</u>	174.		<u> </u>	<u></u>	_	
					Units:		Debris:						\Box			
Cool all samples to 6 degrees C.							Chlorinated	? Yes N	lo	This	; Doc	umer	nt is F	age _	_of	

GCD P.O. Box 9299 Fayetteville, AR 72703

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ADEQ Water Division Permits Branch 5301 Northshore Dr N Little Rock, AR 72118-5317

