

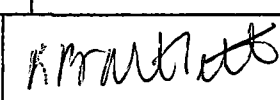
**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION  
MONTHLY MONITORING REPORT**

<b>PERMITTEE NAME</b>
Bethel Oaks Property Owners Association Inc
<b>PERMITTEE ADDRESS</b>
12531 Bethel Oaks Dr Farmington AR 72730

<b>FACILITY NAME</b>
Bethel Oaks Subdivision
<b>FACILITY ADDRESS</b>
CR 62 Farmington AR

<b>PERMIT NO.</b>
4875-WR-3
<b>AFIN NO.</b>
72-01656

<b>WASTEWATER EFFLUENT MONITORING PERIOD</b>	
MM/DD/YYYY	MM/DD/YYYY
9/1/2020	9/30/2020

TREATED WASTEWATER EFFLUENT SAMPLING					
Parameter	Limit	Sample Measurement	Units	Monitoring	Reporting
Flow, Monthly total	REPORT	0.231,131	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum *	REPORT	0.008460	GD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	30	< 2.0	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	45	39.2	mg/l		
Fecal Coliform Bacteria (FCB)	7,800	< 5.0	colonies/100ml		
pH	6.0 - 9.0	7.2	s.u.		
Total Phosphorus (TP)	REPORT	11.2	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT		mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT		mg/l		
Nitrate Nitrogen ( NO <sub>3</sub> -N ) + Nitrite Nitrogen ( NO <sub>2</sub> -N )	REPORT		mg/l		
Plant Available Nitrogen (PAN)	REPORT		mg/l		
NAME OF 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 COGNIZANT OFFICIAL	
Kathy Bartlett					(479) 530-5926
TYPED OR PRINTED				DATE	
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)					

* LOADING RATE BY ZONE					
Zone 1	705	Zone 5	705	Zone 9	705
Zone 2	705	Zone 6	705	Zone 10	705
Zone 3	705	Zone 7	705	Zone 11	705
Zone 4	705	Zone 8	705	Zone 12	705

# 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: 2009020078

Sample Date : 09/17/20

Collected By: TWM

Customer Name : BETHEL OAKS UTILITY, LLC

Sample Time : 1540

Delivery By : TWM

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

Sample Type : GRAB

Work Order :

Report Date : 09/23/20

Sample From : EFFLUENT

Purchase Order :

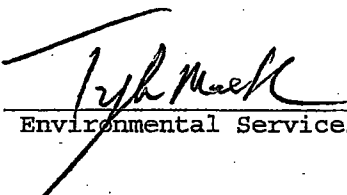
### Laboratory Analysis

Analysis			<u>Laboratory Analysis</u>				<u>Quality Assurance</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>Precision</u>	<u>Accuracy</u>
								<u>% RPD</u>	<u>% Recovery</u>
09/17	1545	TWM	pH	7.2	S.U.		SM 2011 4500-H+ B	0.00	N/A
09/21	1000	HNS	Phosphorous, Total (as P)	11.20	mg/L		EPA 365.3	0.97	103.0 *
09/21	1400	HNS	Solids, Total Suspended	39.2	mg/L		SM 2011 2540 D	0.00	N/A *
09/17	1745	HNS	Fecal Coliform (MPN/100mL)	< 5.0	/100ml		06/2012 Colilert18	0.00	N/A *
09/18	1430	TWM	BOD, Carbonaceous	< 2.0	mg/L		SM 2001 5210 B	0.00	98.0 *

\* 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.

RSW

231 131  
 8469

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



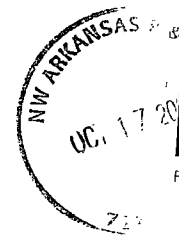
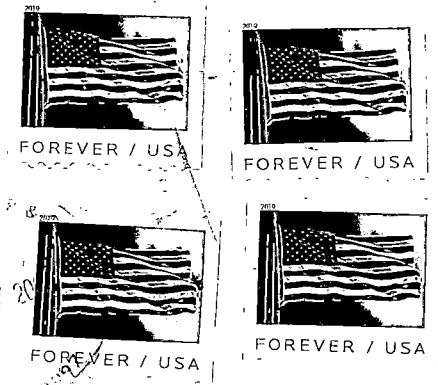
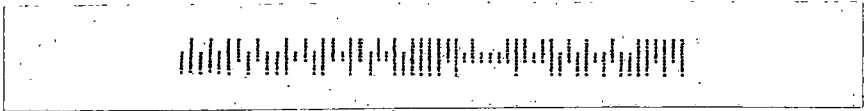
Corporate Office, Little Rock, Arkansas  
 501-221-2565


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 Utility, LLC		Permit/Project #:						T Phos (25)	Fecal Coliform (43.IF)	CBOD (70), TSS (28)	pH (23)						
Address:		6516 Mesa Street		Purchase Order #:															
		Fayetteville, AR 72704		Sampler Name(s):		<i>Typhreek Thom</i>													
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	2009020818	9/17/20	1540	GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH<2	1	X									
EFFLUENT	L	L	L	GRAB	Water	Sterile	100 ml	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	1		X								
EFFLUENT	L	L	L	GRAB	Water	Plastic	1 qt	none/ice	1			X							
EFFLUENT	L	L	L	GRAB	Water	Glass	150 ml	none	0				X						
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used? <input checked="" type="checkbox"/> N		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"/> X		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 <input checked="" type="checkbox"/> X		No <input type="checkbox"/>							
Comments:				FLOW DATA	Field Test	Time	Analyst	Result	Result	Units									
				Analyst:	pH:	1545	Thom	7.2	7.2										
				Time:	Temp.:														
				Reading:	DO:														
				Units:	Debris:														
HNS Cool all samples to 6 degrees C.				Chlorinated? Yes No		This Document is Page 1 of 1													



 ***NWA Utility Services Inc***  
***PO Box 9299***  
***Fayetteville, AR 72703***

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