## Environmental Services Company,

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: 1412020027

Customer Name : CAVE SPRINGS, CITY OF

Sample Date : 12/03/14 Sample Time : 1150

Collected By: WDS

Customer/Permit No. : 1826 / 4893-WR-2

Sample Type : GRAB

Delivery By : WDS

Report Date : 12/11/14

Work Order :

Sample From : EFFLUENT DOSE TANK

Purchase Order :

Analysis		Laboratory Analysis		,	Quality 1	
Date Time By	Parameter	Result Notes	Ouantity	Method	Precision	Accuracy
12/04 1430 TSB		12.0 mg/L		SM 1997 4500-NH3 F	% RPD	% Recovery
12/04 0900 TSB		16.80 mg/L		SM 1997 4500-NH3 F		106.0 *
12/04 1030 TSB	Nitrate Nitrogen	25.35 mg/L		SM 2000 4500-NO3 E		101.6 *
12/04 1030 TSB	Nitrite Nitrogen ,	1.450 mg/L		SM 2000 4500 NO2 B		100.2 *
12/03 1150 WDS		7 1 5 11		SM 2000 4500-H+ B		102.0 *
12/04 0930 TSB	Phosphorous, Total (as P)	6.3 mg/L		EPA 365.3	0.00	N/A *
12/05 0800 KIK	Solids, Total Suspended	21.0 mg/L (b)		SM 1997 2540 D	0.00	100.0
12/03 1330 VLP	Coliform, Fecal	6800 /100ml		SM 1997 9222 D	24.00	N/A *
12/03 1300 KIK	BOD, Carbonaceous	13.0 mg/L		SM 2001 5210 B	0.00	N/A *
12/09 1640 KIK	Solids, % Total	0.040 %		SM 1997 2540 G	2.53	112.0 *
12/08 1400 TSB	Nitrogen, Plant Available	40.2 mg/L		SM 1997 4500-N	7.59	N/A

(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.

Environmental Services Co., Inc.

<sup>\*</sup> QA data shown is from a different sample or standard on the same date.

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

PERMITTEE NAME  L'AVE SPINALS  DIANT H			<b>a</b>	PERMIT NO.							
PERMITTEE ADDRESS	FACILITY ADDRESS		<u> </u>	4873-WR-I							
Po. Box 36 Cave Springs, Ar 727/8	14991/2 S. Main			04-01642							
MAKE ADDITIONAL COPIES OF THIS FORM FOR	WASTEWATER EFFLUENT MONITORING PERIOD										
FUTURE USE. SUBMIT LAB ANALYSES WITH THIS FORM.	MM/DD/YYYY	MM/DD/YYY	Υ								
FROM 12-01-1314 TO 12-31-2014											
TREATED WASTEWATER EFFLUENT SAMPLING AND											
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE						
GROSS VALUE	****	63	MG/L	ONCE/ MONTH	GRAB						
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		13.0	MG/L	ONCE/ MONTH	GRAB						
PH EFFLUENT GROSS VALUE	6 to 9	7.1	S.U.	ONCE/ MONTH	GRAB						
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE		21.0	MG/L	ONCE/ MONTH	GRAB						
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE		6800	N/100 ML	ONCE/ MONTH	GRAB						
NITROGEN, TOTAL KJELDAHL (AS TKN) EFFLUENT GROSS VALUE	****	16.80	MG/L	ONCE/ MONTH	GRAB						
NITROGEN, AMMONIA TOTAL (AS NH₃N) EFFLUENT GROSS VALUE	*****	12.0	MG/L	ONCE/ MONTH	GRAB						
NITROGEN, NITRATE + NITRITE (AS NO <sub>3</sub> N + NO <sub>2</sub> -N) EFFLUENT GROSS VALUE	*****	26.80	MG/L	ONCE/ MONTH	GRAB						
PLANT AVAILABLE NITROGEN (AS PAN) CALCULATED VALUE		40.2	MG/L	ONCE/ MONTH	GRAB						
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE		MONTHLY TOTAL DAILY MAX  6.86 (9.03.3)	MGD	ONCE/ MONTH	TOTAL FLOW						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER I CERTIFY UNDER PENALTY OF LAW THAT											
1 * IMMEDIATELY RESPONSIBLE FOR OBTAINIA	ASED ON MY INQUIRY OF THOSE INDIVIDUALS THE INFORMATION, I BELIEVE THE SUBMITTED PLETE. I AM AWARE THAT THERE ARE SIGNIFICANT		(1.11)	TELEPHONE	DATE						
TO ATTO SOME SOME SALE INFORMATION IS TRUE, ACCURATE, AND COL			xupe	479 771-7529	11-020						
TYPED OR PRINTED	MATION, INCLUDING THE POSSIBILIT	Y OF FINE AND EXECUTIVE O	EXECUTIVE OFFICER OR		01-02-2015 MM/DD/YYY						
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all att	achments here)	W = 10 F 1 D = 1 1	1 - C - 1/	1 mi							
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)  TSS WENT BACK UP NOT SURE WHY, WE primped Close tank BACK To the Front of plant to SEE How much Slug was in bottom of tapill, I thruk our NEXT Step is to nave slugg tanks pumped out and have slugg thanlad off.											

ADEQ Form

CAVE SPRINGS WATER DEPARTMENT P.O. Box 5

Cave Springs, Arkansas 72718

NW ARKANSAS AR 727

02 JAN 2015 PM2 T -



ADEQ Enforcement Section/Water Div. 5301 Northshore Dr.

North Little Rock, AR 72118