ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION NO DISCHARGE MONTHLY MONITORING REPORT

PERMITTEE NAME	
CITY OF CAVE SPRINGS	
PERMITTEE ADDRESS	
PO Box 5	
Cave Springs AR 72718	

FACILITY NAME								
CAVE SPRINGS WASTEWATER TREATMENT PLANT								
FACILITY ADDRESS								
The Creeks Golf Course								

PERMIT NO.

4893-WR-3

AFIN NO.

04-01642

1499 S Main St Cave Springs AR 72718											
MONITORING PERIOD											
	MM/DD/YYYY	TC)	MM/DD/YYYY							
	10/1/2019		10/31/2019								

	EFFL	UENT LIMITS, MONITORING, A	ND REPORTING R	REQUIREMENT	S						
PARAMET	ER	PERMIT LIMIT	SAMPLE MEA		UNITS	FREQUENCY OF	SAMPLE TYPE				
			Plant 1	Plant 2		ANALYSIS					
CARBONACEOUS BIOCHEMICAL OXYC	GEN DEMAND (CBOD5)	30	3.2	< 2.0	· MG/L						
TOTAL SUSPENDED SOLIDS (TSS)		45	8	6.2	MG/L						
FECAL COLIFORM BACTERIA (FCB)		10,000	410.6	< 1.0	COLONIES/100ml	Once per Month / Grab					
н		6.0 - 9.0	6.4	6.6	s.u						
TOTAL PHOSPHOROUS (TP)		Report	4.84	5.71	MG/L						
TOTAL KJELDAHL NITROGEN (TKN)		Report	20	10	MG/L						
NITROGEN AMMONIA NITROGEN (NH 3	- N)	Report	9.93	9.62	MG/L	Once per Quarter / Grab					
NITRITE NITROGEN (NO 3 - N) + NITRA	TE NITROGEN (NO 2 - N)	Report	40.4	41.6	MG/L						
PLANT AVAILABLE NITROGEN (PAN)		Report	53.5	51.4	MG/L						
TOTAL FLOW			MONTHLY TOTAL	DAILY MAX	GPD						
TOTAL FLOW			4,883,585	260,568	G-D						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		AW THAT I HAVE PERSONALLY EXAM ITTED HEREIN; AND BASED ON MY		. 34- / - 1	1/11	TELEPHONE	DATE				
K W o Bowley	THOSE INDIVIDUALS IMMEDIA INFORMATION, I BELIEVE THE SU	ATELY RESPONSIBLE FOR OBTAINED INFORMATION IS TRUE, AC	AINING THE CURATE, AND	1/8 M	that -	479 530-5926	11/14/2019				
Kathy Bartlett		AT THERE ARE SIGNIFICANT PEN ON, INCLUDING THE POSSIBILITY O		SIGNATURE OF EXECUTIVE OF		AREA NUMBER					
TYPED OR PRINTED	IMPRISONMENT.	·		AUTHORIZE	D AGENT	CODE NUMBER	MM/DD/YYYY				
COMMENTS AND EXPLANATION O	F VIOLATIONS (Reference all	attachments here)				······································					

TABLE II DRIP ZONES LOADING RATE LIMITS. MONITORING AND REPORTING REQUIREMENTS	
DRIP ZONES LOADING RATE LIMITS. MONITORING AND REPORTING REQUIREMENTS	

			Oct-19		DAILY	WAXIMUM FLOW TOTAL	260,	
Zone ID	Limit	Units	Maximum Volume Limit	Units	Monitoring	Reported Maximum		
Leach Field 1	0.55		26,000			18761		
Zone 1	0.42] [19,524]	l f			
Zone 2	0.45	1 [19,309			zones not being used		
Zone 3	0.4	1 [16,424]	1	zones not being usea		
Zone 4	0.46	1 [10,811]	! L			
Zone 5	0.2] [13,059]	1 [9642		
Zone 6	0.2] [7,723		1 [5733		
Zone 7	0.2] [10,910		1 [7818		
Zone 8	0.3] [7,081		[5212		
Zone 9	0.4	1 [18,291	7	[13289		
Zone 10	0.3	1 [9,450	1	! [6775		
Zone 11	0.2	1 [4,110	7	l [3127		
Zone 12	0.4	1 [7,522	1	i [5472		
Zone 13	0.25	1 [5,717	7	ļ [4170		
Zone 14	0.15	1 [6,097	7	i l	4430		
Zone 15	0.2	gpd/ft2	8,378	gpd	Daily	6254		
Zone 16	0.4	1 [9,427		1 [6775		
Zone 17	0.23	1 [3,694	1	l F	2606		
Zone 19	0.35	1 [13,778]	! [9902		
Zone 20	0.2	1 [5,766]	1 Г	4170		
Zone 21	0.4	1 [17,040	7	I F	12508		
Zone 22	0.5	7 /	28,113	7	I F	20325		
Zone 23	0.25	1 F	15,640	1	i r	11205		
Zone 24	0.25	7 [9,547		}	7036		
Zone 25	0.2] [4,436		ļ	3127		
Zone 26	0.3	1 [9,334		l [6775		
Zone 27	0.31	7 [16,511		, F	11987		
Zone 28	0.31	1 「	13,018	7	F	9381		
Zone 29	0.2] [3,923		l l	2867		
Zone 30	0.55	1 [10,116		1	7296		
Zone 31	0.3	1	5,714	7	ı r	4170		

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: 1910020034

Sample Date : 10/02/19

Collected By: NTR

Customer Name : CAVE SPRINGS, CITY OF OUTFALL 2 Customer/Permit No. : 2379 / 4893-WR-3 002

Sample Time : 1136

Delivery By : NTR Work Order :

Report Date : 10/10/19

Sample Type : GRAB

Sample From : EFFLUENT DIVERTER BX

Purchase Order :

		Laboratory Analysis	poratory Analysis							
Analysis	•				Precision	Accuracy				
Date Time By	Parameter	Result Notes	Quantity	Method	% RPD	% Recovery				
10/03 1000 TSB	Ammonia as N, (HACH 10205)	9.62 mg/L		SM 2011 4500-NH3 F	0.20	98.0 *				
10/08 1000 TSB	Total Kjeldahl Nitrogen	10.2 mg/L		02/2014 HACH 10242	6.90	99.0 *				
10/02 1145 NTR	pН	6.6 S.U.		SM 2011 4500-H+ B	0.00	N/A *				
10/03 1400 TSB	Phosphorous, Total (as P)	5.710 mg/L		EPA 365.3	1.28	110.0 *				
10/04 1430 TSB	Solids, Total Suspended	6.2 mg/L		SM 2011 2540 D	5.24	N/A *				
10/02 1700 TSB	Fecal Coliform (MPN/100mL	< 1.0 /100ml		06/2012 Colilert18	0.00	0.0 *				
10/02 1630 TSB	BOD, Carbonaceous	< 2.0 mg/L		SM 2001 5210 B	1.52	95.8 *				
10/03 1300 TSB	Nitrate + Nitrite	41.60 mg/L		01/2013 HACH 10206	1.21	97.0 *				
10/09 1030 TSB	Nitrogen, Plant Available	51.4 mg/L		SM 1997 4500-N						

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.

^{*} QA data shown is from a different sample or standard on the same date.

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

Fax: 479-750-1172

website: www.esclabs.com

Phone: 479-750-1170



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

Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

	Client Information						Project Information								Rec	ines	sted	Par	amo	eters	3
Company Name:		Cave Springs	Plant	2			Permit/Pro	ject#:													
Address:		PO BOX 5					Purchase	Order #:] .				ਜ਼ਿ			ĺ
		Cave Springs	7	2718			1											PAN(99.99), NO3+NO2 (91)			
Telephone:		479 248-1040					Sampler N	lame(s):	Ned Rueison						Œ		NH3(15.A), P(25),TKN(16.A)	20			
FAX:		1702101010					i cannpion i			<u> </u>	744	<u> </u>		İ	13.	<u>@</u>	Ž	3+1	ĺ		
							and Ciana	h.m./n\.		11.1	Do		_	1	Ě	3(2	5).T	2			,
		0070					and Signa	ture(s).		VCO	My			ł	章	ET,	P(2	6		1 1	
ESC Client Number: 2379 Sample Identification Sample				,	1					<u>چ</u>	Fecal Coliform(43.IF)	CBOD(70),TSS(28)	\ \ \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\	99.5							
							Collection			, ' ' '	Container		·	pH(23)	<u>g</u>		33.1	Z		1 1	
Identification	1	ESC Control #	Da	ate	Tir	ne	Туре	Matrix	Type	Volume	Preserva	ative	#	흐	쁘	Ö	Ž_	P/			
Effluent Diverter	г Вох	1910020034	10/2	1-19	113	ط د	Grab	Water	Teflon	150 ml	none	_	1	х			L				
							Grab	Water	whirlpak	300 ml	none/ice		1		x						
						1	Grab	Water	Plastic	0.5 gal	none/ice		1			х					
				,			Grab	Water	Plastic	8 oz	H₂SO₄,pH	<2	1				x	х			_
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Kalitidoistiao bà: (piBusioia i	ento Filitieo h	anne)) Da		110	IG	Received by: (5)	Busine and Luner	i Name)		Date	Tìn	ПӨ	Used		AIS.	1	Intac	: 1?		
Relinquished By: (Signature a	and Printed N	iame)	Da	le	Tin	10	Received By: (Si	gnature and Printed	Name)		Date	Tin	ne		around		<u>.</u>				
Religiouished By ((Signature a	and Printed N	(ame)	Dat	te	Tin	18	Received for Lab	Bv: /Signature and	Printed Name	a) (L. Date -	Tim	ne .	Regul	lar samp	X)		Spec			
Relinquished By: (Signature a	- N	rd Kw -	102			004	ements	By: (Signature and	entro	3	10-2-19	168	کا		Yes	X	Decity		No.		
Comments:		0		- "				FLOW DA	\TA	Field Test	Time	Analy		Resu	ılt	Resu	ilt	:	Units		
								Analyst: Time:		pH: Temp.:	1145	W			اي.	6.			u	·F	
					· · · · ·			Reading:		DO:	1/43	W	-	36	, 82	26.	71	(C)	<u></u> -	<u></u>	
L								Units:		Debris:					一		\neg				
	(Cool all samples to (degrees C) .						Chlorinated	? Yes N	lo		This	Doc	ume	nt is	Page	3	of 1	

Environmental Services Company, Inc.

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Northwest Arkansas Branch 1107 Century Avenue Springdale, AR 72762

Tel. (479) 750-1170 Fax (479) 750-1172

Control Number: 1910020055

Customer Name : CAVE SPRINGS UTILITY, OUTFALL 1

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

Report Date : 10/10/19

Sample Date : 10/02/19 Sample Time : 1118

Sample Time : 1118
Sample Type : GRAB

Sample From : EFFLUENT DOSE TANK

Collected By: NTR Delivery By: NTR

Work Order :
Purchase Order :

		Laboratory Analysis	Quality A	Assurance				
Analysis						j	Precision	Accuracy
<u>Date Time By</u>	Parameter	Result N	<u> lotes</u>	Quantity	Met	thod	% RPD	% Recovery
10/03 1000 TSB	Ammonia as N, (HACH 10205)	9.93 mg/L			SM 2011	4500-NH3 F	0.20	98.0 *
10/08 1000 TSB	Kjeldahl Nitrogen Total	20.45 mg/L			SM 1997	4500-NorgB	0.61	99.0 *
10/02 1119 NTR	рĦ	6.4 S.U.			SM 2011	4500-H+ B	0.00	N/A *
	Phosphorous, Total (as P)	4.840 mg/L			EPA 365.	. 3	1.28	110.0 *
10/04 1430 TSB	Solids, Total Suspended	8.0 mg/L			SM 2011	2540 D	11.61	N/A *
10/02 1700 TSB	Fecal Coliform (MPN/100mL	410.6 /100ml			06/2012	Colilert18	0.00	0.0 *
10/02 1630 TSB	BOD, Carbonaceous	3.2 mg/L			SM 2001	5210 B	1.52	95.8 *
10/03 1300 TSB	Nitrate + Nitrite	40.40 mg/L			01/2013	HACH 10206	1.21	97.0 *
10/09 1030 TSB	Nitrogen, Plant Available	53.5 mg/L			SM 1997	4500-N		

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

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^{*} QA data shown is from a different sample or standard on the same date.

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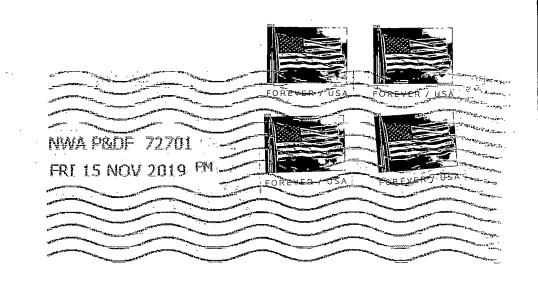
Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

	Client Information				Pro	oject Inf	ormation				Requested Par				ame	eters	;	
Company Name:	Cave Springs	Plant 1		Permit/Pro	oject#:		-	-						18)				
Address:	PO BOX 5		-	Purchase	Order #:								<u></u>	103(i
	Cave Springs	72718]									5	3,	82)			
Telephone:	479 248-1040			Sampler Name(s):			d Plus	0N 50V)				Ē	Q N	(16.	%Solids(82)			
FAX:	7102701010			1	` ,	, , , , , , , , , , , , , , , , , , ,	ed Ryerson WDOr					(43	28)	X	Soli			
				and Signa	ture(s):	1	Mil Ris					Ĕ	SS(25),				
ESC Client Number:	1826						0-2-1	8				≝	T,(0), P(99			
Sample Ide			Sample	Collection		T	Sample (Container			23)) m	L)Q(15.A	66)1			
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	·		#	pH(23)	Fecal Coliform(43.IF)	CBOD(70),TSS(28),NO2(19)	NH3(15.A), P(25),TKN(16.A), NO3(18)	PAN(99.99),			
Effluent/Dose Tank	1910020055	10-2-19		Grab	Water	Tefion	150 ml	none		1	X	1-2		-				
1	194000000	1	1	Grab	Water	whirlpak	300 ml	none/ice		1		x						
1		 		Grab	Water	Plastic	1 qt	none/ice	$\neg \neg$	1		 	×		х			
				Grab	Water	Plastic	8 oz	H₂SO₄,pH	-2	1			<u> </u>	х	Î			
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				S 1 12 16		10:00		5.7			Used		N)		Intac	t?		
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Comments:	Ned Pye-	10-2-19	1600	willing	FLOW D	ATA	Field Test	Time	Analy		Resu		Resi	ılt		No Units		\dashv
0	()				Analyst:		pH:	1119 NTR			Ġ		C			514	_	
					Time:		Temp.:	1119	N	Ne	`25′	3	25		でフ		٩F	
	······································				Reading:		DO:	ļ										
					Units:		Debris:				TLI-	Doo			<u> </u>	-	. É (
	Cool all samples to 6 degrees C.						Chlorinated	? Yes N	0		i NIS	DOC	ume	nt is	rage	<u>, </u>	of <u>L</u>	

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APEQ Water DIVISION Permits Branch 5301 Northshore Dr North LITTLE ROCK, AR 72118-5317