

**ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY  
MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION  
NO DISCHARGE MONTHLY MONITORING REPORT**

<b>PERMITTEE NAME</b>
CITY OF CAVE SPRINGS
<b>PERMITTEE ADDRESS</b>
PO Box 5 Cave Springs AR 72718

<b>FACILITY NAME</b>
CAVE SPRINGS WASTEWATER TREATMENT PLANT
<b>FACILITY ADDRESS</b>
The Creeks Golf Course 1499 S Main St Cave Springs AR 72718

<b>PERMIT NO.</b>
4893-WR-3
<b>AFIN NO.</b>
04-01642

<b>MONITORING PERIOD</b>		
MM/DD/YYYY	TO	MM/DD/YYYY
9/1/2019		9/30/2019

EFFLUENT LIMITS, MONITORING, AND REPORTING REQUIREMENTS						
PARAMETER	PERMIT LIMIT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	
CARBONACEOUS BIOCHEMICAL OXYGEN DEMAND (CBOD <sub>5</sub> )	30	< 2.0		MG/L	Once per Month / Grab	
TOTAL SUSPENDED SOLIDS (TSS)	45	5.1		MG/L		
FECAL COLIFORM BACTERIA (FCB)	10,000	< 1.0		COLONIES/100ml		
pH	6.0 - 9.0	6.8		s.u		
TOTAL PHOSPHOROUS (TP)	Report	8.09		MG/L		
TOTAL KJELDAHL NITROGEN (TKN)	Report	No Report		MG/L	Once per Quarter / Grab	
NITROGEN AMMONIA NITROGEN (NH <sub>3</sub> - N)	Report	No Report		MG/L		
NITRITE NITROGEN (NO <sub>2</sub> - N) + NITRATE NITROGEN (NO <sub>3</sub> - N)	Report	No Report		MG/L		
PLANT AVAILABLE NITROGEN (PAN)	Report	No Report		MG/L		
TOTAL FLOW		MONTHLY TOTAL	DAILY MAX	GPD		
		3,555,193	220,854			
NAME/TITLE 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.			TELEPHONE	DATE	
Kathy Bartlett				479	530-5926	10/14/2019
TYPED OR PRINTED				AREA CODE	NUMBER	MM/DD/YYYY
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)						
repaired supply line that serves zones 13-24 repaired leak in zone 13 repaired leak in zone 24						

**TABLE II**

**DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS**

		Sep-19			DAILY MAXIMUM FLOW TOTAL		220,854
Zone ID	Limit	Units	Maximum Volume Limit	Units	Monitoring	Reported Maximum	
Leach Field 1	0.55	gpd/ft <sup>2</sup>	26,000	gpd	Daily	15902	
<b>Zone 1</b>	0.42		19,524			<i>zones not being used</i>	
<b>Zone 2</b>	0.45		19,309				
<b>Zone 3</b>	0.4		16,424				
<b>Zone 4</b>	0.46		10,811				
Zone 5	0.2		13,059			8172	
Zone 6	0.2		7,723			4859	
Zone 7	0.2		10,910			6626	
Zone 8	0.3		7,081			4418	
Zone 9	0.4		18,291			11264	
Zone 10	0.3		9,450			5743	
Zone 11	0.2		4,110			2651	
Zone 12	0.4		7,522			4638	
Zone 13	0.25		5,717			3534	
Zone 14	0.15		6,097			3755	
Zone 15	0.2		8,378			5301	
Zone 16	0.4		9,427			5743	
Zone 17	0.23		3,694			2209	
Zone 19	0.35		13,778			8393	
Zone 20	0.2		5,766			3534	
Zone 21	0.4		17,040			10601	
Zone 22	0.5		28,113			17227	
Zone 23	0.25		15,640			9497	
Zone 24	0.25		9,547			5964	
Zone 25	0.2		4,436			2651	
Zone 26	0.3		9,334			5743	
Zone 27	0.31		16,511			10160	
Zone 28	0.31		13,018			7951	
Zone 29	0.2		3,923			2430	
Zone 30	0.55		10,116			6184	
Zone 31	0.3		5,714			3534	

# 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: 1909020008	Sample Date : 09/04/19	Collected By: JEW
Customer Name : CAVE SPRINGS, CITY OF OUTFALL 2	Sample Time : 1430	Delivery By : JEW
Customer/Permit No. : 2379 / 4893-WR-3 002	Sample Type : GRAB	Work Order :
Report Date : 09/10/19	Sample From : EFFLUENT DIVERTER BX	Purchase Order :

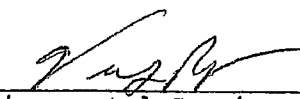
### Laboratory Analysis

Analysis						Quality Assurance			
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision % RPD	Accuracy % Recovery
09/04	1440	JEW	pH	6.8	S.U.		SM 2011 4500-H+ B		
09/10	0830	TSB	Phosphorous, Total (as P)	8.090	mg/L		EPA 365.3	0.69	110.0 *
09/06	1415	TSB	Solids, Total Suspended	5.1	mg/L		SM 2011 2540 D	5.87	N/A *
09/04	1705	JEW	Fecal Coliform (MPN/100mL)	< 1.0	/100ml		06/2012 Colilert18	0.00	0.0 *
09/04	1715	TSB	BOD, Carbonaceous	< 2.0	mg/L		SM 2001 5210 B	0.00	111.9 *

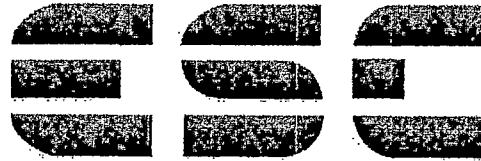
\* QA data shown is from a different sample or standard on the same date.

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

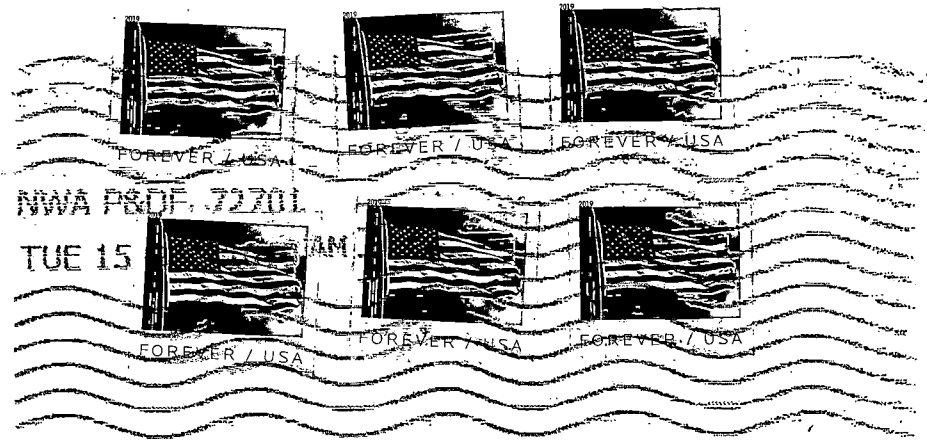
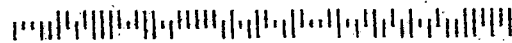
Phone: 479-750-1170 Fax: 479-750-1172

## CHAIN OF CUSTODY

Client Information				Project Information						Requested Parameters									
Company Name:		Cave Springs Plant 2		Permit/Project #:						pH(23)	Fecal Coliform(43.IF)	CBOD(70), TSS(28)	Total P (25)						
Address:		PO BOX 5		Purchase Order #:															
		Cave Springs 72718		Sampler Name(s):		James Wiltse, James Wiltse													
Telephone:		479 248-1040		and Signature(s):															
FAX:																			
ESC Client Number:		2379																	
Sample Identification		Sample Collection				Sample Containers													
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#										
Effluent Diverter Box	<del>190902008</del>	9-4-19	1430	Grab	Water	Teflon	150 ml	none	1	X									
	190902008 SL			Grab	Water	whirlpak	100 ml	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	1		X								
				Grab	Water	Plastic	1/2 gal	none/ice	1			X							
				Grab	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH <2	1				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"/>		Turnaround:		Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>		Were samples properly preserved:		Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
James Wiltse James Wiltse		9-4-19	1705	James Wiltse James Wiltse		9-4-19	1705												
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time												
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time												
James Wiltse James Wiltse				James Wiltse James Wiltse															
Comments:				FLOW DATA		Field Test		Time	Analyst	Result	Result	Units							
				Analyst:		pH:		1440	JEW	6.8	6.8	°C							
				Time:		Temp.:		1440	JEW	29.4	29.3	°C							
				Reading:		DO:													
				Units:		Debris:													
Cool all samples to 6 degrees C.						Chlorinated? Yes No						This Document is Page 1 of 1							

NWA Utility Service  
PO BOX 9299  
Fayetteville, AR

72703



ADEQ  
Water Division  
Permits Branch  
5301 Northshore Drive  
N. Little Rock, AR

72118-5317