

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

PERMITTEE NAME
CANE ISLAND SUBDIVISION

FACILITY NAME (IF DIFFERENT)
Cane Island Subdivision

PERMIT NO.
4899-WR-2


PERMITTEE ADDRESS
DANNY HAMES
6800 SHADOW VALLEY ROAD
Rogers, AR 72756

FACILITY ADDRESS
west side of CR 7002 in northern Marion County

AFIN NO.
45-00214

WASTEWATER EFFLUENT MONITORING PERIOD
FROM MM/DD/YYYY 2/1/2017 TO MM/DD/YYYY 2/28/2017

TREATED WASTEWATER EFFLUENT SAMPLING						
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	6.69		MG/L	ONCE/MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	7		MG/L	ONCE/MONTH	GRAB
PH EFFLUENT GROSS VALUE	6 to 9	7.3		S.U.	ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	4		MG/L	ONCE/MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	REPORT	1.14		MG/L	ONCE/MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	2,000	< 5		colonies/100ml	ONCE/MONTH	GRAB
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE	REPORT	59.1		MG/L	ONCE/MONTH	GRAB
NITRATE NITROGEN EFFLUENT GROSS VALUE	REPORT	53.2		MG/L	ONCE/MONTH	GRAB
NITRITE NITROGEN EFFLUENT GROSS VALUE	REPORT	< 0.15		MG/L	ONCE/MONTH	GRAB
PLANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE	REPORT	71.88		MG/L	ONCE/MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	REPORT	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/MONTH	TOTAL FLOW
		10,671	630			

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.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE
Kathy Bartlett			479	530-5926	3/6/2017
TYPED OR PRINTED			AREA CODE	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

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: 1702010056
 Customer Name : CANE ISLAND ESTATES POA
 Customer Number : 3859
 Report Date : 02/16/17

Sample Date : 02/02/17
 Sample Time : 1115
 Sample Type : GRAB WWATER
 Sample From : FINAL EFFLUENT

Collected By: PDH
 Delivery By : PDH
 Work Order :
 Purchase Order : 111816-AEG2

<u>Laboratory Analysis</u>							<u>Quality Assurance</u>	
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>					<u>Parameter</u>	<u>% RPD</u>
02/06	1500	JJM	Ammonia Nitrogen	1.14 mg/L		SM 1997 4500-NH3 F	6.39	104.9 *
02/10	1230	CLB	Kjeldahl Nitrogen Total	59.10 mg/L		SM 1997 4500-NorgB	2.90	109.0 *
02/07	1500	CLB	Nitrate Nitrogen	53.2000 mg/L		SM 2000 4500-NO3 E	1.57	100.0 *
02/10	1500	CLB	Nitrite Nitrogen	< 0.1500 mg/L		SM 2000 4500-NO2 B	5.71	100.0
02/02	1120	PDH	pH	7.3 S.U.		SM 2000 4500-H+B	0.00	N/A *
02/07	0930	CBJ	Phosphorous, Total (as P)	6.69 mg/L		EPA 365.3	13.33	87.7 *
02/06	1200	CBJ	Solids, Total Suspended	4.00 mg/L		SM 1997 2540 D	44.44	N/A *
02/10	1300	CLB	Nitrogen, Plant Available	71.88 mg/L		33 MSA 2nd Ed		
02/02	1700	JJM	Coliform, Fecal	< 5 /100ML		SM 1997 9222 D	0.00	N/A *
02/03	0930	JJM	BOD, Carbonaceous	7.00 mg/L		SM 2001 5210 B	0.00	98.3 *
02/08	1040	PDH	Solids, % Total	0.092 %		SM 1997 2540 G	7.91	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.

