

**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

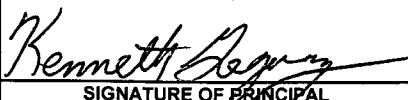
AFIN NO.
45-00214

WASTEWATER EFFLUENT MONITORING PERIOD
FROM

MM/DD/YYYY	6/1/2015
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MM/DD/YYYY	6/30/2015
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TREATED WASTEWATER EFFLUENT SAMPLING						
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	0.46		MG/L	ONCE/ MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	< 2		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	15	2		MG/L	ONCE/ MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	REPORT	< 0.1		MG/L	ONCE/ MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	2,000	< 2		colonies/100ml	ONCE/ MONTH	GRAB
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE	REPORT	0.48		MG/L	ONCE/ MONTH	GRAB
NITRATE NITROGEN EFFLUENT GROSS VALUE	REPORT	1.91		MG/L	ONCE/ MONTH	GRAB
NITRITE NITROGEN EFFLUENT GROSS VALUE	REPORT	1.92		MG/L	ONCE/ MONTH	GRAB
PLANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE	REPORT	2.09		MG/L	ONCE/ MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	REPORT	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/ MONTH	TOTAL FLOW
		9,295	38,400			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Kathy Bartlett	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND 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
			479 530-5926	7/1/2015
TYPED OR PRINTED			AREA CODE NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

Arkansas Testing Laboratories

3301 Langley Drive · Searcy, AR 72143 (501) 268-6431 f(501) 268-9314

NPDES Wastewater Monitoring
 Water and Wastewater Analysis
 Concrete, Asphalt, and Aggregate Testing
 Geotechnical Testing
 Industrial and Construction Quality Control

CANE ISLAND

Collection Date: June 3, 2015

Collection Time: 11:30 AM

Collected By: THS

Wastewater Analysis

Collection Place: Final Discharge Point

Parameter	Analysis Begin		Analysis End		Results	Unit	Loading	Analyst	% Spike	Rel %	Sample Type	Ref #
	Date / Time		Date / Time				lb/dy					
CBOD	06/03	4:15 PM	06/08	9:00 AM	< 2.0	mg/l	NA	KLB/EET	108.3	0.00	Grab	1
TSS	06/05	11:20 AM	NA		2.0	mg/l	NA	EET	NA	15.50	Grab	2
Fecal Coliform	06/03	3:00 PM	06/04	3:30 PM	< 2	N/100mls	NA	THS/KLB	NA	0.00	Grab	3
pH	06/03	11:30 AM	NA		7.10	S.U.	NA	THS	NA	0.16	Grab	4
Ammonia Nitrogen	06/04	9:00 AM	NA		< 0.1	mg/l	NA	KLB	88.3	4.47	Grab	7
Total Kjeldahl Nitrogen	06/04	9:00 AM	NA		0.48	mg/l	NA	KLB	88.3	4.47	Grab	7
Total Phosphorus	06/04	9:00 AM	NA		0.46	mg/l	NA	KLB	93.0	5.15	Grab	8
Nitrate Nitrogen	06/04	9:40 AM	NA		1.91	mg/l	NA	KLB	92.4	2.83	Grab	9
Nitrite Nitrogen	06/04	9:40 AM	NA		< 0.01	mg/l	NA	KLB	92.4	2.83	Grab	9
Nitrate + Nitrite					1.92	mg/l					CALC	
Solids, Percent (%)	06/04	9:15 AM	NA		0.018	%	NA	KLB	NA	3.28	Grab	10
Plant Available Nitrogen					2.09	mg/l					CALC	


Quality Assurance: All Parameters include 10% duplication studies by random selection. The following equipment is checked and calibrated daily: pH meter, balance, Incubators, water baths, drying oven and sterilizing apparatus. Ammonia Nitrogen and Oil & Grease Analysis include duplication and spike studies at a rate of at least 10%.

Notes: Samples iced at collection. Preserved with H₂SO₄ to pH₂: Oil & Grease, Ammonia, COD

References:

Analysis complies with 40 CFR Part 136:

- | | |
|-----------------|------------------|
| 1. SM 5210 B | 6. SM 4500-OG |
| 2. SM 2540 D | 7. SM 4500 NH3-G |
| 3. SM 9222 D | 8. SM 4500-P-E |
| 4. SM 4500-HB | 9. SM 4500NO3 E |
| 5. SM 4500-CI-G | 10. SM 2540 B |


 Neville Adams, Manager

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 arkatl@sbcglobal.net

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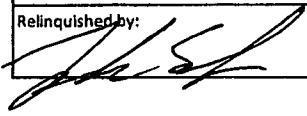
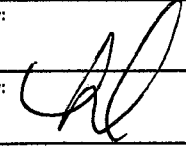
CHAIN OF CUSTODY / ANALYSIS REQUEST FORM

CLIENT: Cane Island Estates		4899-WR-2								PARAMETERS									
SAMPLE MATRIX	SAMPLED BY: JHS	FECAL COLIFORM										# = no of bottles Q, L, H = Qt, Ltr, Half Gal P, G = Plastic, Glass							
		De-chlorinated w/ Na2S2O3 Preserved w/ice										CALIBRATION 257T				PRESERVATIVES			
												pH / DO #				NP			
SAMPLE TYPE	W=H2O S=SLUDGE D=SOIL C=WELL	DATE	TIME	Flow	Grab	FECAL COLIFORM	DISH #	START-TIME	MLS	pH				CBOD, TSS Tot. Solids	NH3, TKN NO3, NO2 TP				
Effluent	W	6/3/15	11:30 AM		X				1-120-P	7.10				1-H-P	1-L-P				

Comments:

Number of bottles: _____
 Sample on ice: _____

COLLECT:

Relinquished by:	Date/Time	Received by:	Date/Time
	6/3/15 3:00 pm		6-3-15 3:00 pm