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

PERMITTEE NAME	
CANE ISLAND SUBDIVISION	
PERMITTEE ADDRESS	
DANNY HAMES	
6800 SHADOW VALLEY ROAD	
Rogers, AR 72756	

-	FACILITY NAME (IF DIFFERENT)
	Cane Island Subdivision
	FACILITY ADDRESS
west	side of CR 7002 in northern Marion County

PERMIT NO.	
4899-WR-2	
AFIN NO.	
45-00214	,

ſ	WASTEWATER EFFLUENT MONITORING PERIOD									
Ī	MM/DD/YYYY	MM/DD/YYYY								
FROM	3/1/2018	3/31/2018								

		TREATED WASTE	WATER EFFLUENT	SAMPLING				-		
PARAMET	ER	PERMIT REQUIREMENT	SAMPLE MEAS	UREMENT	UNITS	ł .	QUENCY OF NALYSIS	SAMPLE TYPE		
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE		REPORT	6.96	MG/L		ONCE/ MONTH	GRAB			
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		15	4		MG/L		ONCE/ MONTH	GRAB		
FFLUENT GROSS VALUE		6 to 9	6.7		S.U.		ONCE/ MONTH	GRAB		
DLIDS, TOTAL SUSPENDED FLUENT GROSS VALUE		15	2		MG/L		ONCE/ MONTH	GRAB		
TROGEN, AMMONIA TOTAL (AS N)	· · · · · · · · · · · · · · · · · · ·		5.24		MG/L		ONCE/ MONTH	GRAB		
OLIFORM, FECAL GENERAL FFLUENT GROSS VALUE		2,000	11	colonies/100ml		ONCE/ MONTH	GRAB			
OTAL KJELDAHL NITROGEN FFLUENT GROSS VALUE		REPORT	62.1	MG/L		ONCE/ MONTH	GRAB			
NITRATE NITROGEN EFFLUENT GROSS VALUE		REPORT	50.2		MG/L	ONCE/ MONTH		GRAB		
TRITE NITROGEN		REPORT	0.015		MG/L	ONCE/ MONTH		GRAB		
ANT AVAILABLE NITROGEN		REPORT	72.51		MG/L		ONCE/ MONTH	GRAB		
LOW, THRU CONDUIT OR TREAT FFLUENT GROSS VALUE	MENT UNIT	REPORT	MONTHLY TOTAL 15,071	DAILY MAX 1,068	GPD		ONCE/ MONTH	TOTAL FLOW		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		LAW THAT I HAVE PERSONALLY EX	· · · · · · · · · · · · · · · · · · ·	16	2	TI	ELEPHONE	DATE		
Kathy Bartlett	WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I INFORMATION INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM SIGNATURE OF PRINCIPAL 479 530-5926 3/7/2018									
TYPED OR PRINTED	AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. BEXECUTIVE OFFICER OR AREA CODE NUMBER MM/L									

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: 1803010029

Customer Name : CANE ISLAND ESTATES POA

Sample Date : 03/01/18

Collected By: TMO

Sample Time : 1150

Delivery By : TMO

Customer Number: 3859

Sample Type : GRAB WWATER

Work Order: 111816-AEG2

Report Date : 03/09/18

Sample From : FINAL EFFLUENT

Purchase Order :

•	Quality A	Assurance				
Analysis	•			į	Precision	Accuracy
Date Time By	<u>Parameter</u>	Result Notes	Quantity	<u> Method</u>	% RPD	% Recovery
03/06 1300 PJC	Ammonia Nitrogen	5.24 mg/L		HACH 10205	1.20	100.6 *
03/07 0900 CLB	Kjeldahl Nitrogen Total	62.10 mg/L		SM 1997 4500-NorgB	1.83	97.3 *
03/02 1020 TCF	Nitrate Nitrogen	50.2000 mg/L		SM 2000 4500-NO3 E	9.52	99.0 *
03/02 1050 TCF	Nitrite Nitrogen	0.0150 mg/L	,	HACH 10206	0.00	100.5 *
03/01 1154 TMO	рн	6.7 S.U.		SM 2000 4500-H+B	0.00	N/A *
03/07 0845 TCF	Phosphorous, Total (as P)	6.960 mg/L		HACH 10209	1.25	104.0 *
03/06 1600 TCF	Solids, Total Suspended	2.00 mg/L	,	SM 1997 2540 D	3.64	N/A *
03/08 1000 NTR	Nitogen, Plant Available	72.51 mg/L		33 MSA 2nd Ed		
03/01 1720 TMO	Fecal Coliform	10.8 /100ml		06/2012 Colilert18	0.00	N/A *
03/02 0630 DWC	BOD, Carbonaceous	4.00 mg/L	·	SM 2001 5210 B	0.00	91.5 *
03/05 0800 CLB	Solids, % Total	০.073 %		SM 1997 2540 G	0.00	N/A *

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.

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

Environmental Services Company, Inc. Corporate Office

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Phone: 501-221-2565 Fax: 501-221-1341



Springdale, Arkansas 479-750-1170

Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

Client Information			Project Information					T	Requested Parameters								
Client:	Cane Island Estate	e Island Estates POA Permit/F			ermit/Project #:					Ī							
Address:	39 Nottingham Lane			Purchase (Order#:					(82							Į.
	Rogers, AR 72758			Work Orde	Work Order # 111816-AEG2			7 8	1								
Phone:	479-619-8450			Sampler N	Sampler Name(s): Timothy O'Neal				Total Sol %(82)		Ammonia(15.A)	<u>6</u>					
Fax:	rhames@nwark.co	m		1						6	nia(P(2)	Ē				
Contact:	Mr. Rusty Hames			and Signature(s): Time of Vlas			7 6	ije (Ĕ	Potal	£3.						
ESC Client Numb		859		1			moy or way				Ž		ĝ	form			
	ole Identification		Sample	Collection			Sample (Containers	3	⊤ (8)	te(18	16.A	33.P	<u> </u>			
Identificatio		Date	Time	Туре	Matrix	Туре	Volume	Preserva		TSS(28), CBOD(70).	Nitrate(18), Nitrite(19)	TKN(16.A),	PAN(33.PN), Total P(25)	Fecal Coliform(43.IF)		. 1	
Final Effluent	18:0301 0029	3-1-18	1150	Grab	Wwater	Plastic	1/2 Gal	Cool ≤ 6° C			X						
	f	1	. 1	Grab	Wwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2				Х	х			\Box	
				Grab	Wwater	Whiripak	4 oz.	Cool <10° C, Na2S203		1	1			х			
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Reflectuished By: (Signature and Printed Name) Date Time 2-1-18 [710]			Received for Lab By: (Signature and Printed Name) Date Time Time 3-1-18 1710			Wer	e sam Yes	oles pr	operly		rved: No	=	\neg				
Comments					Flow Da	ata	Field Test	Time	Analyst	Res	sult	Resu	ilt		Units		
Site Address: 1364 Cane Island Road				ļ		pH:	1154	OMT	6	7				Sl	<u></u>	\Box	
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