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
We	est side of CR 7002 in northern Marion County

PERMIT NO.	
4899-WR-2	
AFIN NO	$\overline{}$
45-00214	\neg
	4899-WR-2 AFIN NO.

MM/DD/YYYY MM/DD/YYYY FROM 9/1/2017 9/30/2017		
FROM 9/1/2017 9/30/2017		1
		FROM
TREATED WASTEWATER EFFLUENT SAMPLING	=	

PARAMETI	ER	PERMIT REQUIREMENT	SAMPLE MEAS	UREMENT	UNITS		QUENCY OF NALYSIS	SAMPLE TYPE
HOSPHOROUS, TOTAL (AS P) FFLUENT GROSS VALUE		REPORT	5.56	MG/L	1	ONCE/ MONTH	GRAB	
BOD, 5-DAY (20 DEG. C) FLUENT GROSS VALUE		15	2		MG/L	1	ONCE/ MONTH	GRAB
FLUENT GROSS VALUE		6 to 9	6.6	S.U.		ONCE/ MONTH	GRAB	
DLIDS, TOTAL SUSPENDED FLUENT GROSS VALUE		15	2		MG/L	MG/L		GRAB
TROGEN, AMMONIA TOTAL (AS N)		REPORT	0.54		MG/L		ONCE/ MONTH	GRAB
DLIFORM, FECAL GENERAL FLUENT GROSS VALUE		2,000	< 5	colonies/100ml		ONCE/ MONTH	GRAB	
TAL KJELDAHL NITROGEN FLUENT GROSS VALUE		REPORT	41.3		MG/L		ONCE/ MONTH	GRAB
TRATE NITROGEN FLUENT GROSS VALUE		REPORT		40.8			ONCE/ MONTH	GRAB
TRITE NITROGEN FLUENT GROSS VALUE		REPORT	0.138		MG/L		ONCE/ MONTH	GRAB
ANT AVAILABLE NITROGEN FLUENT GROSS VALUE		REPORT	54.03	3	MG/L		ONCE/ MONTH	GRAB
OW, THRU CONDUIT OR TREAT	MENT UNIT	REPORT	GPD	ONCE/ MONTH		TOTAL FLOW		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM						LEPHONE	DATE
Kathy Bartlett	INDIVIDUALS IMMEDIATELY RES	TED HEREIN; AND BASED ON MY IN SPONSIBLE FOR OBTAINING THE MATION IS TRUE, ACCURATE, AND	F BRINCIPAL	479	530-5926	10/4/2017		
TYPED OR PRINTED		IGNIFICANT PENALTIES FOR SUB OSSIBILITY OF FINE AND IMPRISONM	OFFICER OR ED AGENT	AREA NUMBER		MM/DD/YYYY		

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: 1709010083

Customer Name : CANE ISLAND ESTATES POA

Customer Number: 3859 Report Date: 09/20/17 Sample Date : 09/07/17

Sample Time : 1015 Sample Type : GRAB WWATER Sample From : FINAL EFFLUENT Collected By: CBJ Delivery By : CBJ

Work Order: Purchase Order:

		Laboratory Analysis			, Carrier	Assurance
Analysis					Precision	Accuracy
Date Time By	Parameter	Resultl	Notes Quantity	Method	% RPD	% Recovery
	Ammonia Nitrogen	0.54 mg/L		SM 1997 4500-NH3 F	0.81	103.1 *
09/08 1545 PJC		41.30 mg/L		SM 1997 4500-NorgB	1.97	97.8 *
09/13 1000 CLB	Kjeldahl Nitrogen Total	.		SM 2000 4500-NO3 E		97.3 *
09/11 1100 CLB	Nitrate Nitrogen	40.8000 mg/L				98.4
09/08 0900 CLB	Nitrite Nitrogen	0.1380 mg/L		SM 2000 4500-NO2 B		* * .
09/07 1015 CBJ	На	6.6 S.U.		SM 2000 4500-H+B	1.53	N/A
		5.560 mg/L		EPA 365.3	1.17	98.4 *
09/11 0930 CLB	Phosphorous, Total (as P)			SM 1997 2540 D	5.41	N/A *
09/11 0800 CLB		2.00 mg/L			1.83	99.7
09/13 1700 CLB	Nitogen, Plant Available	54.03 mg/L		33 MSA 2nd Ed		N/A *
•		< 5 /100ML		SM 1997 9222 D	0.00	
	·	2.00 mg/L		SM 2001 5210 B	0.00	93.4 *
09/08 0630 CLB		-		SM 1997 2540 G	0.00	N/A *
09/08 1000 CTB	Solids. % Total	0.041 %		0,1 2010 0		•

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/,

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

Environmental Services Company, Inc. Corporate Office

13715 West Markham

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P.O. Box 55146

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Little Rock, AR 72215

website: www.esclabs.com

Fax: 501-221-1341



Springdale, Arkansas 479-750-1170

Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

Filone, 301-221-2303	Tax. 501-221-1541			17 (114 C				 								
	Client Information				Pro	oject Info	ormation		·		Red	<u> ues</u>	ted	Para	met	ers
Client:	· Cane Island Estate	es POA		Permit/Pro	ject #:					_ _	,					
Address:	39 Nottingham Lar	ne l		Purchase Order #:				Sol %(82)	-							
	Rogers, AR 72758			Work Orde	Work Order # 111816-AEG2			S		2						
Phone:	479-619-8450			Sampler N	Sampler Name(s): <u>Caleb Tines</u>				Total		(15./	ရွ				
Fax:	rhames@nwark.co	<u>om</u>			. 1			1 .	(19)	onia	P()					
Contact:	Mr. Rusty Hames		and Signat	ture(s):	Who				CBOD(70),	itrite	Ammonia(15.A)	Tota	m(43			
ESC Client Number:		3859								I	8 (8	3	Ñd	Coliform(43)		
Sample Ide	entification		Sample	Collection			Sample (Container	3	# TSS(28),	Nitrate(18), Nitrite(19)	TKN(16.A).	PAN(33.PN), Total P(25)	a C		
Identification	ESC Control#	Date	Time	Туре	Matrix	Туре	Volume	Preserva	ative	#] šš	Zit.	支	PA	Fecal		
Final Effluent	1709010083	9-7-17	1615	Grab	Wwater	Plastic	1/2 Gal	Cool ≤ 6° C	;	X	X					
			1	Grab	Wwater	Plastic	1 Liter	Cool ≤ 6° C, H2SO4 to pH <2				X	Х			
	1 1	1	1	Grab	Wwater	Whirlpak	4 oz.	Cool <10° C, Na2S2O3		+	-	├-		Х	+	\dashv
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					<u></u>					╬	╁	 			\dashv	\dashv
										-					7	1
Relinquished By: (Signature and Prin	nted Name)	Date	Time	Received By: (Si	gnature and Printe	d Name)	.	Date	Time	Cus	tody S	eals:	<u></u>	LL		
Relinquished By: (Signature and Prin	nted Name)	Date	Time	Received By: (Si	gnature and Printe	d Name)		Date	Time	1	ed? naroun gular	A/ id:	L <u>.</u> 1	Intacl	les 	4
Relinguisted By/ (Signature and Pring	nted Name) Tires	9-7-17	1635	Received for Lab.	By: (Signature an	avistina	<u>usrus</u>	Date 9-17	Time	We	re sam Yes	V	L	presei	ved: No	二
Comments: Site Address: 1364 Cane Island Road				Flow D	ata	Field Test pH:	Time 1015	Analysi		sult	Resi			Units SU		
Site Addres	ss: 1364 Cane Island Ro Flippin, AR 72634	au					Pr).	10/5	16	-15	هـ	10.	<u> </u>		- 30	
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