

**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 9/1/2015 MM/DD/YYYY 9/30/2015

| TREATED WASTEWATER EFFLUENT SAMPLING                         |                    |                    |           |                |                       |             |
|--|--------------------|--------------------|-----------|----------------|-----------------------|-------------|
| PARAMETER  | PERMIT REQUIREMENT | SAMPLE MEASUREMENT |           | UNITS          | FREQUENCY OF ANALYSIS | SAMPLE TYPE |
| PHOSPHOROUS, TOTAL (AS P)<br>EFFLUENT GROSS VALUE            | REPORT             | 3.21               |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| CBOD, 5-DAY (20 DEG. C)<br>EFFLUENT GROSS VALUE              | 15                 | <2                 |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| PH<br>EFFLUENT GROSS VALUE                                   | 6 to 9             | 6.67               |           | S.U.           | ONCE/<br>MONTH        | GRAB        |
| SOLIDS, TOTAL SUSPENDED<br>EFFLUENT GROSS VALUE              | 15                 | 6                  |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| NITROGEN, AMMONIA TOTAL (AS N)<br>EFFLUENT GROSS VALUE       | REPORT             | <0.1               |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| COLIFORM, FECAL GENERAL<br>EFFLUENT GROSS VALUE              | 2,000              | <2                 |           | colonies/100ml | ONCE/<br>MONTH        | GRAB        |
| TOTAL KJELDAHL NITROGEN<br>EFFLUENT GROSS VALUE              | REPORT             | 0.6                |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| NITRATE NITROGEN<br>EFFLUENT GROSS VALUE                     | REPORT             | 13.7               |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| NITRITE NITROGEN<br>EFFLUENT GROSS VALUE                     | REPORT             | 0.026              |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| PLANT AVAILABLE NITROGEN<br>EFFLUENT GROSS VALUE             | REPORT             | 13..90             |           | MG/L           | ONCE/<br>MONTH        | GRAB        |
| FLOW, THRU CONDUIT OR TREATMENT UNIT<br>EFFLUENT GROSS VALUE | REPORT             | MONTHLY TOTAL      | DAILY MAX | GPD            | ONCE/<br>MONTH        | TOTAL FLOW  |
|  |                    | 7,272              |           |                |                       |             |

|   |   |  |           |          |            |
|---|---|--|-----------|----------|------------|
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER<br><br>Kathy Bartlett            | 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. | <br><b>SIGNATURE OF PRINCIPAL<br/>EXECUTIVE OFFICER OR<br/>AUTHORIZED AGENT</b> | TELEPHONE |          | DATE       |
|   |   |  | 479       | 530-5926 | 10/8/2015  |
| 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: September 2, 2015

Collection Time: 12:00 PM

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 | Date / Time  | Date / Time |         |          | lb/dy   |         |         |        |             |       |
| CBOD                     | 09/02          | 4:15 PM     | 09/07        | 11:00 AM    | < 2.0   | mg/l     | NA      | KLB/EET | 105.8   | 0.64   | Grab        | 1     |
| TSS                      | 09/03          | 2:20 PM     | NA           |             | 6.0     | mg/l     | NA      | KLB     | NA      | 0.00   | Grab        | 2     |
| Fecal Coliform           | 09/02          | 4:00 PM     | 09/03        | 2:25 PM     | < 2     | N/100mls | NA      | THS/KLB | NA      | 5.30   | Grab        | 3     |
| pH                       | 09/02          | 12:00 PM    | NA           |             | 6.67    | S.U.     | NA      | THS     | NA      | 0.16   | Grab        | 4     |
| Ammonia Nitrogen         | 09/04          | 8:10 AM     | NA           |             | < 0.1   | mg/l     | NA      | KLB     | 103.9   | 0.00   | Grab        | 7     |
| Total Kjeldahl Nitrogen  | 09/04          | 8:10 AM     | NA           |             | 0.60    | mg/l     | NA      | KLB     | 103.9   | 0.00   | Grab        | 7     |
| Total Phosphorus         | 09/04          | 11:00 AM    | NA           |             | 3.21    | mg/l     | NA      | KLB     | 96.4    | 3.70   | Grab        | 8     |
| Nitrate Nitrogen         | 09/09          | 1:30 PM     | NA           |             | 13.70   | mg/l     | NA      | KLB     | 96.8    | 4.70   | Grab        | 9     |
| Nitrite Nitrogen         | 09/09          | 1:30 PM     | NA           |             | 0.026   | mg/l     | NA      | KLB     | 96.8    | 4.70   | Grab        | 9     |
| Nitrate + Nitrite        |                |             |              |             | 13.71   | mg/l     |         |         |         |        | CALC        |       |
| Solids, Percent (%)      | 09/03          | 3:40 PM     | NA           |             | 0.046   | %        | NA      | KLB     | NA      | 3.51   | Grab        | 10    |
| Plant Available Nitrogen |                |             |              |             | 13.90   | mg/l     |         |         |         |        | CALC        |       |

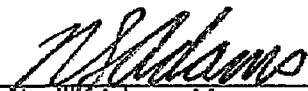
**Quality Assurance:** All Parameters include 10% duplication studies by random selection. The following equipment is checked and calibrated daily: pH meter, balance, incubators, water baths, drying oven and sterilizing apparatus. Ammonia Nitrogen and Oil & Grease Analysis include duplication and spike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

**Notes:** Samples iced at collection. Preserved with H<sub>2</sub>SO<sub>4</sub> to pH<sub>2</sub>: 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

NPDES Wastewater Monitoring  
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## CHAIN OF CUSTODY / ANALYSIS REQUEST FORM

|                                    |                                       |                  |                 |      |   |                |        |            |  |             |  |               |                          |                            |  |
|------------------------------------|---------------------------------------|------------------|-----------------|------|---|----------------|--------|------------|--|-------------|--|---------------|--------------------------|----------------------------|--|
| CLIENT: <b>Cane Island Estates</b> |                                       | <b>4899-WR-2</b> |                 |      |   |                |        |            |  | PARAMETERS  |  |               |                          |                            |  |
| SAMPLE MATRIX                      | SAMPLED BY: <i>JHS</i>                |                  |                 |      | FECAL COLIFORM                            |                |        |            | # = no of bottles Q, L, H = Qrt, Ltr, Half Gal P, G = Plastic, Glass |             |  |               |                          |                            |  |
|                                    |                                       |                  |                 |      | De-chlorinated w/ Na2S2O3 Preserved w/ice |                |        |            | CALIBRATION <i>384</i>   |             |  | PRESERVATIVES |                          |                            |  |
|                                    | W=H2O<br>S=SLUDGE<br>D=SOIL<br>C=WELL | DATE             | TIME            | Flow | Grab                                      | FECAL COLIFORM | DISH # | START-TIME | MLS  | pH          |  |               | NP                       | H2SO4                      |  |
| SAMPLE TYPE                        |                                       |                  |                 |      |   |                |        |            |  |             |  |               | CBOD, TSS<br>Tot. Solids | NH3, TKN<br>NO3, NO2<br>TP |  |
| Effluent                           | W                                     | <i>9/2/15</i>    | <i>12:00 PM</i> |      | X   |                |        |            | 1-120-P  | <i>6.67</i> |  |               | 1-H-P                    | 1-L-P                      |  |
|                                    |                                       |                  |                 |      |   |                |        |            |  |             |  |               |                          |                            |  |
|                                    |                                       |                  |                 |      |   |                |        |            |  |             |  |               |                          |                            |  |
|                                    |                                       |                  |                 |      |   |                |        |            |  |             |  |               |                          |                            |  |

Comments:

Number of bottles: \_\_\_\_\_  
 Sample on ice: \_\_\_\_\_

COLLECT:

|                    |                       |                    |                       |
|--------------------|-----------------------|--------------------|-----------------------|
| Relinquished by:   | Date/Time             | Received by:       | Date/Time             |
| <i>[Signature]</i> | <i>9/2/15 4:00 PM</i> | <i>[Signature]</i> | <i>9-2-15 4:00 PM</i> |