ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION NO DISCHARGE MONTHLY MONITORING REPORT

| | PERMITTEE NAME | |
|-----|-------------------------|--|
| | Cane Island Estates LLC | |
| F 1 | PERMITTEE ADDRESS | |
| | Danny Hames | |
| | 39 Nottingham Lane | |
| | Rogers, AR 72758 | |

| | FACILITY NAME (IF DIFFERENT) | 4 |
|------|---------------------------------------|---|
| | Cane Island Subdivision | |
| 1.50 | FACILITY ADDRESS | |
| | CR 7002 Bull Shoals Rd. Marion County | |

| a d | PERMIT NO. | |
|-----|------------|--|
| , | 4899-WR-3 | |
| 100 | AFIN NO. | |
| | 45-00214 | |

| MONITORING PERIOD | | | | | | | | | | |
|-------------------|----|------------|--|--|--|--|--|--|--|--|
| MM/DD/YYYY | TO | MM/DD/YYYY | | | | | | | | |
| 2/1/2020 | | 2/29/2020 | | | | | | | | |

| | , , | | EFFL | UENT | LIMITS, MONITORING, | AND REPORTING | REQUIREMENT | 3 | | e . | |
|---|-------------------------------|-------------------------------|---|------------|-------------------------|---------------------|-------------------------|----------------|-------------|-------------|-----------|
| PARAMETER | | | PERMIT LIMIT | SAMPLE MEA | UNITS | FRE A | SAMPLE TYPE | | | | |
| CARBONACE | OUS BIOCHE | MCAL OXYG | SEN DEMAND (CBOD5) | | 30 | < 2.0 | 00 | MG/L | | | |
| TOTAL SUSPI | ENDED SOLID | S (TSS) | | | 45 | < 2. | .5 | MG/L | | | |
| FECAL COLIF | ORM BACTER | RIA (FCB) | | | 2000 | 2.0 |) | COLONIES/100ml | | th / Grab | |
| pН | | | | | 6.0 - 9.0 | 8.3 | 3 | s.u | | | |
| TOTAL PHOS | PHOROUS (1 | P) | | | Report | 6.0 | 3 | MG/L | | | |
| TOTAL KJELI | DAHL NITROG | EN (TKN) | · · · · · · · · · · · · · · · · · · · | | Report | \\\ | | MG/L | | | |
| NITROGEN A | I AMMONIA NITROGEN (NH 3 - N) | | - N) | Report | | | | MG/L | | | |
| NITRITE NITROGEN (NO 3 - N) + NITRATE NITROGEN (NO 2 - N) | | Report | | | | MG/L | Once per Quarter / Grab | | | | |
| PLANT AVAILABLE NITROGEN (PAN) | | | | Report | | | | MG/L | | | |
| TOTAL FLOW | | | | | | MONTHLY TOTAL | DAILY MAX | GPD | | | |
| TOTAL PLOW | | | | | | 12,167 | 623 | <u></u> | | | |
| | | | DRIP ZONES | LOADI | NG RATE LIMITS, MON | ITORING AND REP | ORTING REQUI | REMENTS | * , * | - G , | |
| Zone ID | Limit | Units | Maximum Volume Limit | Units | Monitoring | Reported n | naximum | | | | |
| Zone 1 | 0.62 | | 15,563 | gpd | Daily | 62: | 3 | | | | |
| Zone 2 | 0.62 | gpd/ft 2 | 37,529 | gpđ | Daily | Not Used | |] | | | |
| NAME/TITLE PE | RINCIPAL EXECUT | IVE OFFICER | I CERTIFY UNDER PENALTY OF I | | | | | 10 11 | TE | LEPHONE | |
| | | | WITH THE INFORMATION SUBMIT | | • | · I | KMM | Kliff | | | |
| | | | INDIVIDUALS IMMEDIATELY RES | | | · I | | | 479 | 530-5926 | 3/13/2020 |
| K | athy Bartlett | | BELIEVE THE SUBMITTED INFORM AWARE THAT THERE ARE SI | | • | 4 | SIGNATURE OF | | | | |
| TYPED OF PRINTER | | INFORMATION, INCLUDING THE PO | | | 4 | AUTHORIZE | | AREA CODE | NUMBER | MM/DD/YYYY | |
| COMMENTS | AND EXPLA | NATION O | F VIOLATIONS (Reference all | attach | ments here) | | | | | | |
| Lab allowed | the sample fo | r the fecal t | o sit too long before testing so | a sec | ond sample was drawn fo | or accurate testing | | | | | |
| | | | | | | | | | | | |
| | | | | | | | | | | | |

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: 2002010160

Customer Name : CANE ISLAND ESTATES POA

Sample Date : 02/06/20 Sample Time : 1210

Collected By: TMO

Customer Number: 3859

Delivery By : TMO

Work Order :

Report Date : 02/17/20

Sample Type : GRAB WWATER Sample From : FINAL EFFLUENT

Purchase Order :

| | Quality A | ssurance | | | | |
|----------------|---------------------------|--------------|-----------------|--------------------|-----------|------------|
| Analysis | | | | | Precision | Accuracy |
| Date Time By | <u>Parameter</u> | Result Notes | <u>Quantity</u> | <u>Method</u> | % RPD | % Recovery |
| 02/06 1214 TMO | рН | 8.3 S.U. | | SM 2011 4500-H+B | 0.00 | N/A |
| 02/10 1130 TCF | Phosphorous, Total (as P) | 6.030 mg/L | | HACH 10209 | 2.15 | 93.6 * |
| 02/13 1312 ATL | Solids, Total Suspended | < 2.50 mg/L | | SM 2011 2540 D | 7.52 | N/A * |
| 02/06 1800 HMK | Fecal Coliform | 4.1 /100ml | | 06/2012 Colilert18 | 0.00 | N/A * |
| 02/07 0700 DWC | BOD, Carbonaceous | < 2.00 mg/L | | SM 2011 5210 B | 0.00 | 104.3 * |

* OA 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

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Environmental Services Company, Inc. ^ Corporate Office

13715 West Markham

P.O. Box 55146

Little Rock, AR 72211 Little Roc

Little Rock, AR 72215

website: www.esclabs.com

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 | | | | | | Red | queste | ed P | aram | eters |
|--|--------------------|----------|------------------|---|---------------------|------------|--------------|--|-------|----------|--------------------|-----------------------|----------------|---------|-------|
| Client: | Cane Island Estate | s POA | | Permit/Project #: | | | | | | | | | | | |
| Address: | 39 Nottingham Lane | | | Purchase | Order #: | 21.7 | | | | | | | | | |
| | Rogers, AR 72758 | | | Work Orde | er# | 111816 | -AEG2 | | | | | | | | |
| Phone: | 479-619-8450 | | | Sampler N | lame(s): | lime | the O | 'Neu(| | | ŀ | | | | |
| Fax: | rhames@nwark.co | <u>m</u> | | | | | 7 | Zi. | | ٦ | | (<u>F</u> | - | | |
| Contact: | Mr. Rusty Hames | | | and Signat | ture(s): | HINIM | 1/2/ | 26) | • | CBOD(70) | | n(43 | | | |
| ESC Client Number: | | Monthly | |] | , , | | J " | | | | | Forn | | | |
| Sample Ide | entification | | Sample | Collection | | 10 | Sample (| Container | 3 | TSS(28) | Total P(25) | Fecal Coliform(43.IF) | | | |
| Identification | | | Time | Туре | Matrix | Туре | Volume | Preserva | ative | # SST | Tota | Fecs | | | 11 |
| Final Effluent | 20020101100 | 2-16-25 | 1210 | Grab | Wwater | Plastic | 1/2 Gal | Cool ≤ 6° C | ; | ı x | | | | | |
| \ | | | | Grab | Wwater | Plastic | 1 Liter | Cool <u><</u> 6° C. H2SO4 to pH <2 | | | Х | | | | |
| | | | | Grab | Wwater | Whirlpak | 4 oz. | Cool < 10° C. Na2S2O3 | | , | | х | | | |
| | | | | | | | | | | | | | \neg | | |
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| | | X., | | | | | | | | | 1 | | | 1- | |
| | | Ţ. | | | | | | | | 丁 | | | \top | | |
| Relinquished By (Signature and Prin | led Name) | Date | Time | 1 1 1 | | | | Custody Seals: Used? | | | | | | | |
| Relinquished By: (Signature and Prin | ted Name) | Date | Time | Received By: (Signature and Printed Name) Date Time | | | Tur | aroun gular | d: 7 | | Intact? Special | | | | |
| Reinquished By, (Signature and Printed Name) Time Time | | | Received for Lab | By: (Signature an | Printed Name | Hour | Date 2-7-20 | Time | We | | ples prop | | reserved No | | |
| Comments— | | | l | Flow D | | Field Test | Time | Analyst | | | Result | | Unit | ts | |
| Site Address: 1364 Cane Island Road | | | | | | | pH: | 1214 | 7774 |) (% | ,3 | 8.2 | | | SU |
| · · · · · · · · · · · · · · · · · · · | Flippin, AR 72634 | | | | | | | | ļ | | | ├- | + | | |
| | | ſ; | | | | | | | - | + | | | - | | |
| | nece. | | ~~ <i>(36</i>) | ler Beur | l | | Fecal Start: | 1805 | HWI | ⟨ Thi | s Doc | ument i | s Pac | je / of | |

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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: 2002010606

Customer Name : CANE ISLAND ESTATES POA

Customer Number: 3859 Report Date: 02/17/20 Sample Date : 02/13/20

Sample Time : 1040

Sample Type : GRAB WWATER
Sample From : FINAL EFFLUENT

Collected By: HMK Delivery By : HMK

Work Order : Purchase Order :

| | | Laboratory Analysi | <u>.s</u> | | | Quality A | Assurance |
|----------------|----------------|--------------------|--------------|----------|--------------------|-----------|------------|
| Analysis | _ | | | | | Precision | Accuracy |
| Date Time By | Parameter | Result | <u>Notes</u> | Quantity | <u>Method</u> | % RPD | % Recovery |
| 02/13 1515 JGK | Fecal Coliform | 2.0 /100 | ml | | 06/2012 Colilert18 | 18.06 | 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

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Environmental Services Company, Inc.

Corporate Office

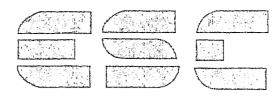
P.O. Box 55146

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Springdale, Arkansas 479-750-1170

Carlsbad, New Mexico 575-887-1ESC

CHAIN OF CUSTODY

| | Client Information | | | | Pr | oject Inf | ormation | on of fifth in Months | | F | Reques | sted | Param | eters | |
|---|--|-----------------|-------------|--------------------|-------------------|-----------|--------------|-------------------------|--------------|-----------------|----------|----------|-----------------|-------|-----------|
| Client: | Cane Island Estate | s POA | | Permit/Pro | Permit/Project #: | | | | | | | | | | ٦ |
| Address: | 39 Nottingham Lane Rogers, AR 72758 | | ine Purcha | | Order#: | | | | | 7 | | | | | |
| | | | | Work Orde | Work Order # 1 | | 111816-AEG2 | | | 7 | | | | | |
| Phone: | 479-619-8450 | | | Sampler N | ame(s): | Hard | In K | elly | | 그드 | | | | | |
| Fax: | rhames@nwark.co | m | - | 1 | , | 11576 | 127.1.7.9 | -17- | | 43 | | | | | |
| Contact: | Mr. Rusty Hames | | | and Signat | ure(s): | # | | | | - E | | | | | |
| ESC Client Nun | | Monthly | | | | | | | | Coliform(43.1F) | | | | | |
| San | nple Identification | | Sample | Collection | | | Sample (| Container | S | | | | | 1 | |
| Identificati | ion ESC Control# | Date | Time | Туре | Matrix | Туре | Volume | Preserva | ative # | Fecal | | | | | |
| Final Effluent | 20120101010 | 7-13-200 | 1040 | Grab | Wwater | Whirlpak | 4 oz. | Cool <10° C, Na2S2O3 | . 1 | х | | | | 1 | |
| | | | | | | | | | | | | | | | ٦ |
| | | | | | | | | 1 | | | | | | | |
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| Relinquished By: (Signati | ure and Printed Name) | Date | Time | Received By: (Sig | nature and Printe | d Name) | Date | | Time | | y Seals: | <u></u> | | | ᅦ |
| Relinquished By: (Signate | ure and Printed Name) | Date | Time | Received By: (Sig | nature and Printe | d Name) | | Date | Time | Used? Lumar | | <u> </u> | Intact? | | - |
| Delinevished Str. (Cianal | use and Distant Makes | D-1- | 70 | - No 1 - 1 - 1 - 1 | | 18:77.18 | | | | Regula | | | Special | | _ |
| Relinquished By: (Signation of the Hory Centre) | WILLY TO | Date ン/13/20 | 1505 (| Received for Lab | T. Kuse | Sheh L | 3 | Date 71、3 1 てい | Time りんしい | | es V | горепу | preserved No | | ŝ |
| Comments: | | | Flow D | ata | Field Test | | Analyst | Resul | | | Uni | | | | |
| Site Address: 1364 Cane Island Road Flippin, AR 72634 | | | | | | pH: | 1040 | HMI | 17.2 | 5 7 | 3 | | SU | - | |
| | | | | | | · | | | | | | | | | |
| | | | | | | | Fecal Start: | 16.00 | 11011 | This ! | | | | | |
| | | | | | | | recai Staft: | 1515 | [[]/4]/ | (I nis t | ocumen | t is Pa | ige <u>í</u> of | 4 | |



NWA UTILITY SERVICES, INC

PO Box 9299 Fayetteville, AR 72703











ADEQ Water DIV. Permits Branch 5301 Northshora Drive N. LITTLE ROCK, AR 72118