ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY

MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION NO DISCHARGE MONTHLY MONITORING REPORT

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•	Cane Island Estates LLC		
1. 	PERMITTEE ADDRESS		· · · ·
	Danny Hames		
	39 Nottingham Lane		
	Rogers, AR 72758		

FACILITY NAME (IF DIFFERENT) Cane Island Subdivision FACILITY ADDRESS

CR 7002 Bull Shoals Rd. Marion County

```	PERMIT NO.	
	4899-WR-3	
4 D.	AFIN NO.	 1
	45-00214	

MÓI	NITORING PE	RIOD
MM/DD/YYYY	ТО	MM/DD/YYYY
3/1/2021		3/31/2021

PARAMETER     PERMIT LIMIT     SAMPLE MEASUREMENT     UNITS     FREQUENCY OF ANALYSIS     SAMPLE       CARBONACEOUS BIOCHEMICAL OXYGEN DEMAND (CBOD6)     30     <2.0     MG/L     MG/L       TOTAL SUSPENDED SOLIDS (TSS)     45     <2.5     MG/L     Once per Month / Grab       FECAL COLIFORM BACTERIA (FCB)     2000     53.0     COLONIES/100ml     Once per Month / Grab       pH     6.0 - 9.0     7.4     8.4     S.4     S.4       TOTAL KJELDAHL NITROGEN (TKN)     Report     5.880     MG/L     Once per Month / Grab       NITROGEN (MO 3 - N ) + NITRATE NITROGEN (NO 3 - N )     Report     MG/L     MG/L     Once per Quarter / Grab       TOTAL FLOW     Report     MG/L     MG/L     MG/L     Once per Quarter / Grab       Zone ID     Limit     Units     Maximum Volume Limit     Units     Monitoring     Reported maximum     GPD     IELEPHONE       Zone 1     0.62     gpd/t 2     15.663     gpd     Daily     Not Used     Mot Used     Mot Used     Mot Used     Mot Used     IELEPHONE     IELEPHONE     IELEPHONE		5	е к. ₆ ,	EFFL	UENT	LIMITS, MONITORING,	AND REPORT	ING RE	QUIREMENTS		e ba			
ORACURACE DOG DIGNEMENCE ON LEMAND (000 DD)   000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   1000   10000   1000   10000					PERMIT LIMIT	SAMPLE MEASUREMENT			UNITS			SAMPLE TYPE		
Initial Sour Exact Sour Exact Source (FGS)   Initial Source (FGS)   Initial Source (FGS)   Onco per Month / Grab     PFECAL COLIFORM BACTERIA (FCB)   6.0 - 9.0   7.4   s.u   Onco per Month / Grab     pH   6.0 - 9.0   7.4   s.u   Su   Onco per Month / Grab     TOTAL PHOSPHOROUS (TP)   Report   5.880   MG/L   MG/L     TOTAL KJELDAHL NITROGEN (NH - N)   Report   MG/L   MG/L     NITROGEN (NO 3 - N ) + NITRATE NITROGEN (NO 3 - N )   Report   MG/L   MG/L     PLANT AVAILABLE NITROGEN (NO 3 - N ) + NITRATE NITROGEN (NO 3 - N )   Report   MG/L   MG/L     TOTAL FLOW   Report   MONTHLY TOTAL   DAILY MAX   GPD   Once per Quarter / Grab     TOTAL FLOW   DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS   MG/L   MG/L   MG/L     Zone 1   0.62   gpd/rt 2   15.653   gpd   Daily   1.827   GPD   MCM     NAME/TTLE PRINCIPAL EXECUTIVE OFFICIER   (CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   MW   TELEPHONE   TELEPHONE     Xone 2   0.62   gpd/rt 2   37.529   gpd   Daily <td< td=""><td>CARBONACEC</td><td>OUS BIOCHEN</td><td>ICAL OXYG</td><td>EN DEMAND (CBOD5)</td><td></td><td>30</td><td colspan="3">&lt; 2.0</td><td colspan="3">MG/L</td><td></td></td<>	CARBONACEC	OUS BIOCHEN	ICAL OXYG	EN DEMAND (CBOD5)		30	< 2.0			MG/L				
Preck Coll Coll ONM BROTENA (FOB) 1000 0.00 7.4 S.U   pH 6.0 - 9.0 7.4 S.U   TOTAL PHOSPHOROUS (TP) Report 5.880 MG/L   TOTAL KJELDAHL NITROGEN (IKN) Report MG/L   NITROGEN AMMONIA NITROGEN (NH :- N) Report MG/L   NITROSEN (NO :- N ) + NITRATE NITROGEN (NO :- N ) Report MG/L   NITRITE NITROGEN (NO :- N ) + NITRATE NITROGEN (NO :- N ) Report MG/L   PLANT AVAILABLE NITROGEN (PAN) Report MG/L   TOTAL FLOW DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS GPD   Zone ID Limit Units Maximum Volume Limit Units   Zone 2 0.62 gpd/t 2 15,563 gpd Daily   Xomerrite Report ICERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM TELEPHONE   NAMERTITIE PRINCIPAL EXECUTIVE OFFICER ICERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM TELEPHONE   Kathy Bartlett BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPATELT E AND IMPRISONMENT. SIGNATURE OF PRINCIPAL   Kathy Bartlett PRORMATE IN REPORTING TERPERALTY OF REAND IMPRISONMENT. SIGNATURE OF PRINCIPAL   NUMBER NUMBER FINE AND IMPRISONMENT. AND AM	TOTAL SUSPE	INDED SOLID	S (TSS)	· · · · · · · · · · · · · · · · · · ·		45	< 2.5			MG/L				
TOTAL PHOSPHOROUS (TP)   Report   S.880   MG/L     TOTAL KJELDAHL NITROGEN (TKN)   Report   MG/L     NITROGEN AMMONIA NITROGEN (NH s - N)   Report   MG/L     NITROGEN (NO s - N) + NITRATE NITROGEN (NO s - N)   Report   MG/L     NITROGEN (NO s - N) + NITRATE NITROGEN (NO s - N)   Report   MG/L     PLANT AVAILABLE NITROGEN (PAN)   Report   MG/L     TOTAL FLOW   DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS   GPD     Zone 1   0.62   gpd/L2   15,563   gpd   Daily   1,827     Zone 2   0.62   gpd/L2   15,563   gpd   Daily   Not Used   MOMUMENTAL YERSPONSIBLE FOR OBTAINING THADE PERSONALLY EXAMINED AND AM   TELEPHONE     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE   TELEPHONE     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE   479   530-5926   4/13/L     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I VERDER THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/L	FECAL COLIFORM BACTERIA (FCB)		2000		53.0			COLONIES/100ml Once per Month / Grat			th / Grab			
Initial Production of the prosting of the prost	pH					6.0 - 9.0		7.4		s.u				
Introduct (nn)   Integer   MG/L     NITROGEN AMMONIA NITROGEN (NH s - N)   Report   MG/L     NITRITE NITROGEN (NO s - N ) + NITRATE NITROGEN (NO s - N )   Report   MG/L     PLANT AVAILABLE NITROGEN (PAN)   Report   MG/L     TOTAL FLOW   MONTHLY TOTAL   DAILY MAX   GPD     TOTAL FLOW   DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS   GPD     Zone ID   Limit   Units   Monitoring   Reported maximum     Zone 1   0.62   gpd/ft 2   15,563   gpd   Daily   1,827     Zone 2   0.62   gpd/ft 2   1 CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE     Kathy Bartlett   UNDER DENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE   479   530-5926   4/13/.     Kathy Bartlett   NYAREMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.   SIGNATURE OF PRINCIPAL   AREA CODE   NUMBER   AMARE	TOTAL PHOSE	HOROUS (T	P)	······		Report		5.880		MG/L	1			
NITROGEN (NO 3 - N ) + NITRATE NITROGEN (NO 2 - N )   Report   MG/L   Once per Quarter / Grab     PLANT AVAILABLE NITROGEN (NO 3 - N ) + NITRATE NITROGEN (NO 2 - N )   Report   MG/L   MG/L     PLANT AVAILABLE NITROGEN (PAN)   Report   MG/L   MG/L   MG/L     TOTAL FLOW   DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS   GPD   Image: Contemportal and the second	TOTAL KJELDAHL NITROGEN (TKN)					Report	<u></u>			MG/L				
NITRITE NITROGEN (N0 3 - N) + NITRATE NITROGEN (N0 2 - N)   Report   MG/L     PLANT AVAILABLE NITROGEN (PAN)   Report   MG/L     TOTAL FLOW   MONTHLY TOTAL   DAILY MAX   GPD     TOTAL FLOW     DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS     Zone 1D   Limit   Units   Maximum Volume Limit   Units   Monitoring   Reported maximum     Zone 1   0.62   gpd/ft 2   37,529   gpd   Daily   1,827   MMU     Zone 2   0.62   gpd/ft 2   37,529   gpd   Daily   Not Used   MUTH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I   TELEPHONE   TELEPHONE     MAME/ITTLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER LIMITED INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INFORMATION, I   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/.     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL   AREA   ANUMBER   AMME MIDIO     TYPE OR PRINTED   AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   SIGNATURE OF PRINCIPAL   AREA   ANUM	NITROGEN AN		DGEN (NH 3	- N)	Report					MG/L				
MONTHLY TOTAL   DAILY MAX   GPD     TOTAL FLOW   DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS   GPD     Zone ID   Limit   Units   Maximum Volume Limit   Units   Monitoring   Reported maximum     Zone 1   0.62   gpd/ft 2   15,563   gpd   Daily   1,827   MONTHLY TOTAL   MAX     Zone 2   0.62   gpd/ft 2   37,529   gpd   Daily   1,827   MONTHLY TOTAL   MAX     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   Not Used   TELEPHONE     Kathy Bartlett   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, INDIVIDUALS IMMEDIATELY RESPONSIBILE FOR SUBMITTING FALSE   SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT   AREA CODE   NUMBER   MM/DDI	NITRITE NITROGEN (NO 3 - N ) + NITRATE NITROGEN (NO 2 - N )		Report		· · · · · · · · · · · · · · · · · · ·			MG/L	- Unce per Quarter / Grab					
TOTAL FLOW   24,120   1,827   GPD     DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS     Zone ID   Limit   Units   Maximum Volume Limit   Units   Monitoring   Reported maximum     Zone 1   0.62   gpd/ft 2   15,563   gpd   Daily   1,827   Model     Zone 2   0.62   gpd/ft 2   15,563   gpd   Daily   1,827   Motused   Motused     NAMETTILE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE   TELEPHONE     MUTH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE   TELEPHONE   479   530-5926   4/13/     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM     MUMBER   SIGNATURE OF PRINCIPAL     Kathy Bartlett   BELIEVE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE     INPORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.   SIGNATURE OF PRINCIPAL     Kathy Bartlett	PLANT AVAILABLE NITROGEN (PAN)		Report				MG/L	-						
24,120   1,827     DRIP ZONES LOADING RATE LIMITS, MONITORING AND REPORTING REQUIREMENTS     Zone ID   Limit   Units   Maximum Volume Limit   Units   Monitoring   Reported maximum     Zone 1   0.62   gpd/ft 2   15,563   gpd   Daily   1,827   Monitoring   Monitoring     Zone 2   0.62   0.62   15,563   gpd   Daily   1,827   Monitoring   Monitoring     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE   TELEPHONE     WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE   INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/.     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL   AREA   NUMBER   MM/DE     TYPED OR PRINTED   WARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   SIGNATURE OF FRINCIPAL   AREA   NUMBER   MM/DE					MONTHLY TO	OTAL DAILY MAX		GPD						
Zone ID   Limit   Units   Maximum Volume Limit   Units   Monitoring   Reported maximum     Zone 1   0.62   gpd/ft 2   15,563   gpd   Daily   1,827   MMMU   MMMU     Zone 2   0.62   0.62   1 CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   Not Used   MUTH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE   TELEPHONE   1 ELEPHONE     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/2     TYPED OR PRINTED   MWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   SIGNATURE OF PRINCIPAL   AREA   NUMBER   MM/DE										<u> </u>				
Zone 1   0.62   gpd/ft 2   15,563   gpd   Daily   1,827   MMMUL     Zone 2   0.62   0.62   37,529   gpd   Daily   Not Used   MMUL     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE   TELEPHONE     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE   479   530-5926   4/13/2     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/2     TYPED OR PRINTED   WARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   SIGNATURE OF PRINCIPAL   AREA   NUMBER   MM/DD	4 4 7 4 4		1997 - 1997 1997 - 1997 1997 - 1997	DRIP ZONES			····					the survey of the	a a sa sa	
Zone 2   0.62   gpd/ft 2   37,529   gpd   Daily   Not Used     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE     NAME/TITLE PRINCIPAL EXECUTIVE OFFICER   I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM   TELEPHONE     Kathy Bartlett   WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE   479   530-5926   4/13/2     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/2     TYPED OR PRINTED   AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   SIGNATURE OF PRINCIPAL   AREA   NUMBER   MM/DD     TYPED OR PRINTED   INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.   AUTHORIZED AGENT   AREA   NUMBER   MM/DD	Zone ID	Limit	Units	Maximum Volume Limit	Units		Repor		ximum	1 1 2	<u></u>	11 1	Ht.	
Zone 2   0.62   37,529   gpd   Daily   Not Used   I Construction   Construct	Zone 1	0.62	apd/ft 2		gpd					h/l'	A	AT 1		
WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE   479   530-5926   4/13/2     NDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I   530-5926   4/13/2     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/2     TYPED OR PRINTED   AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   EXECUTIVE OFFICER OR   AREA   ANUMBER   MM/DD						•			d					
INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I   479   530-5926   4/13/2     Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL   479   530-5926   4/13/2     TYPED OR PRINTED   AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   SIGNATURE OF FRINCIPAL   AREA   AREA   NUMBER   MM/DD	NAME/TITLE PR	RINCIPAL EXECUTI									T	ELEPHONE		
Kathy Bartlett   BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM   SIGNATURE OF PRINCIPAL     TYPED OR PRINTED   AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   EXECUTIVE OFFICER OR   AREA     INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.   AUTHORIZED AGENT   ODE   NUMBER									170	530-5926	4/13/2021			
TYPED OR PRINTED   AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE   EXECUTIVE OFFICER OR AUTHORIZED AGENT   AREA CODE   NUMBER   MM/DD						SIGNATURE OF	PRINCIPAL	4/5	330-3920	4/13/2021				
INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. AUTHORIZED AGENT CODE	AWARE THAT THERE ARE S		· · · · · · · · · · · · · · · · · · ·		*		AREA		MM/DD/YYYY					
COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)	TYPE	ED OR PRINT	ED	INFORMATION, INCLUDING THE P	OSSIBILI	TY OF FINE AND IMPRISONM	ENT.		AUTHORIZE	D AGENT	CODE	NUMBER		
	COMMENTS	AND EXPLA	NATION O	F VIOLATIONS (Reference al	l attach	ments here)		-	-					

ADEQ Form

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

Collected By: PDH

Delivery By : PDH

Purchase Order :

Work Order :

Control Number: 2103010144 Customer Name : CANE ISLAND ESTATES POA Customer Number : 3859 Report Date : 03/11/21 Sample Date : 03/04/21 Sample Time : 1340 Sample Type : GRAB WWATER Sample From : FINAL EFFLUENT

		Laboratory Analysis					Assurance
Analysis						Precision	Accuracy
Date Time By	Parameter	Result 1	<u>Notes</u>	Quantity	Method	<u> </u>	<u>% Recovery</u>
03/04 1345 PDH	Hq	7.4 S.U.			SM 2011 4500-H+B	0.00	N/A *
03/05 1525 KNM	Phosphorus, Total (as P)	5.880 mg/L			EPA 365.1	0.49	101.4 *
03/09 1005 AKA	Solids, Total Suspended	< 2.50  mg/L			SM 2011 2540 D	15.91	N/A *
· · · · · · · · · · · · · · · · · · ·	Fecal Coliform	53.0 /100ml			06/2012 Colilert18	0.00	N/A
	BOD, Carbonaceous	< 2.0 mg/L			SM 2011 5210 B	0.00	96.0 *

* 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 Serv Vices Co., Inc.

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mental Services Company, Inc. Env. Corporate Office

13715 West Markham P.O. Box 55146 Little Rock, AR 72215 Little Rock, AR 72211 website: www.esclabs.com



## CHAIN OF CUSTODY

Springdale, Arkansas 479-750-1170

Carlsbad, New Mexico 575-887-1ESC

Phone: 501-221-2565	Fax: 501-221-1341		- CI	IAIN C			JI										
	<b>Client Information</b>			Project Information							Requested Parameters						
Client:	Cane Island Estates POA			Permit/Project #:													
Address:	2			Purchase Order #:									· ·		1		
				Work Order # 111816-AEG2			-AEG2										
Phone:	479-619-8450			Sampler Name(s): Pro Sten			ten H	"F									
Fax:	rhames@nwark.co	m		1							6	í	Ē				
Contact:	Mr. Rusty Hames			and Signat	ure(s):	7h	A				TSS(28), CBOD(70)		Fecal Coliform(43.IF)				
ESC Client Number:	3859	Monthly			•		•				Ö	<u>(</u> )					
Sample Ide	entification		Sample	Collection		1	Sample (	Containers	3		(28)	Total P(25)					
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	ative	#	TSS	Tots	Fec			l	
Final Effluent	2103010144	3-4-21	1340	Grab	Wwater	Plastic	1/2 Gal	Cool ≤ 6° C	;	1	x	1	1				
	/	1	1	Grab	Wwater	Plastic	Please	Cool <u>&lt;</u> 6° C, H2SO4 to pH <2		1		x					
	1	1	1	Grab	Wwater	Whirlpak		Cool <10° C, Na2S2O3		1			x				
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Relinquished By: (Signature and Prin	ted Name)	Date	Time	Received By: (Sig	phature and Printe	d Name)		Dale	Tim			ly Seals	s:		alanan T		
Relinguished By: (Signalure and Prin	ted Name)	Date	Time	Received By: (Signature and Printed Name)			Date	Tim		Jsed? Turnare		<u>4</u>	Intacl	?			
			1745					314121	1745		Regula		X	Spec			
Relinquished By: Signature and Prin	Received for Lab By: (Signature and Printed Name) Date			Date 315/21	3 Tim	<u> </u>	Were sam Yes		s properly preserved:			_					
Comments:						Field Test	Time	Analy	Analyşt Res					Units	-		
Site Address: 1364 Cane Island Road Flippin, AR 72634							pH:	1345	PD#		7-4	1-1-1	14	<b> </b>	SL	<u>ا</u>	
PDH Relinguis						<b> </b>	-+		+		<u> </u>						
t									二								
recieved busi	crue cooler 3151	21 0600 (	3×111		I		Fecal Start:	1750	ΨD	H	This D	)ocum	ent is P	age _	_ of <u>(</u>	<del></del>	

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NWA P&DF 72701 THU 15 APR 2021 USA

NWA Utility Services Inc PO Box 9299 Fayetteville, AR 72703

ADEQ WATER DIVISION/PERMITS BRANCH 5301 Northshore Drive N Little Rock, AR 72118-5317