

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

<b>PERMITTEE NAME</b>
Cane Island Estates LLC
<b>PERMITTEE ADDRESS</b>
Danny Hames 39 Nottingham Lane Rogers, AR 72758


<b>FACILITY NAME (IF DIFFERENT)</b>
Cane Island Subdivision
<b>FACILITY ADDRESS</b>
CR 7002 Bull Shoals Rd. Marion County

<b>PERMIT NO.</b>
4899-WR-3
<b>AFIN NO.</b>
45-00214

<b>MONITORING PERIOD</b>		
MM/DD/YYYY	TO	MM/DD/YYYY
11/1/2018		11/30/2018

EFFLUENT LIMITS, MONITORING, AND REPORTING REQUIREMENTS					
PARAMETER	PERMIT LIMIT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS
CARBONACEOUS BIOCHEMICAL OXYGEN DEMAND (CBOD5)	30	3.5		MG/L	Once per Month / Grab
TOTAL SUSPENDED SOLIDS (TSS)	45	< 2.5		MG/L	
FECAL COLIFORM BACTERIA (FCB)	2000	33.6		COLONIES/100ml	
pH	6.0 - 9.0	8.1		s.u	
TOTAL PHOSPHOROUS (TP)	Report	6.04		MG/L	Once per Quarter / Grab
TOTAL KJELDAHL NITROGEN (TKN)	Report	50		MG/L	
NITROGEN AMMONIA NITROGEN (NH <sub>3</sub> -N)	Report	0.12		MG/L	
NITRITE NITROGEN (NO <sub>2</sub> -N) + NITRATE NITROGEN (NO <sub>3</sub> -N)	Report	37.3		MG/L	
PLANT AVAILABLE NITROGEN (PAN)	Report	52.35		MG/L	
TOTAL FLOW		MONTHLY TOTAL	DAILY MAX	GPD	
		17,377	941		

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 <sup>2</sup>	15,653	gpd	Daily	941
Zone 2	0.62		37,529	gpd	Daily	Not Used at this time

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.	 <b>SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE		
			479	790-3813	12/6/2018
TYPED OR PRINTED			AREA CODE	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (*Reference all attachments here*)

NOTE\*\*\* Zone 2 above is not being used due to the low system flow. As flow increase we will turn on the zone.

# 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: 1811010015  
 Customer Name : CANE ISLAND ESTATES POA  
 Customer Number : 3859  
 Report Date : 11/12/18

Sample Date : 11/01/18  
 Sample Time : 1240  
 Sample Type : GRAB WWATER  
 Sample From : FINAL EFFLUENT

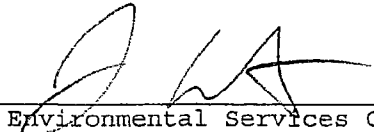
Collected By: TMO  
 Delivery By : TMO  
 Work Order : 111816-AEG2  
 Purchase Order :

<u>Laboratory Analysis</u>							<u>Quality Assurance</u>	
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>	<u>Parameter</u>				<u>% RPD</u>	<u>% Recovery</u>
11/07	1145	PJC	Ammonia as N, (HACH/SM)	0.12 mg/L		H/SM 11 10205/4500	6.27	98.8 *
11/03	1230	NTR	Total Kjeldahl Nitrogen	49.9 mg/L		02/2014 HACH 10242	1.13	91.1 *
11/01	1244	TMO	pH	8.1 S.U.		SM 2000 4500-H+B	0.00	N/A *
11/05	1100	PJC	Phosphorous, Total (as P)	6.040 mg/L		HACH 10209	0.90	100.9 *
11/05	1400	PJC	Solids, Total Suspended	< 2.50 mg/L		SM 1997 2540 D	6.17	N/A *
11/03	1600	NTR	Nitrogen, Plant Available	52.35 mg/L		33 MSA 2nd Ed		
11/01	1740	TMO	Fecal Coliform	33.6 /100ml		06/2012 Colilert18	0.00	N/A
11/02	0630	DWC	BOD, Carbonaceous	3.50 mg/L		SM 2001 5210 B	32.06	99.0 *
11/05	1400	PJC	Nitrate + Nitrite	37.30 mg/L		SM2000 4500-NO3 E	0.92	100.4 *

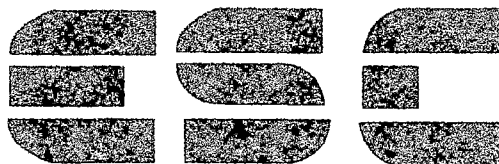
\* QA data shown is from a different sample or standard on the same date.

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.

Environmental Services Company, Inc.  
 Corporate Office  
 13715 West Markham P.O. Box 55146  
 Little Rock, AR 72211 Little Rock, AR 72215  
 website: www.esclabs.com



Springdale, Arkansas  
 479-750-1170

Carlsbad, New Mexico  
 575-887-1ESC

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

### CHAIN OF CUSTODY

Client Information				Project Information						Requested Parameters						
Client: Cane Island Estates POA				Permit/Project #:						TSS(28), CBOD(70), Fecal-Solids(82) Nitrate(18), Nitrite(19), NO <sub>3</sub> + NO <sub>2</sub> (17) TKN(16.A), Ammonia(15.A) PAN(33.PN), Total P(25) Fecal Coliform(43.IF) Oil & Grease(21) NML						
Address: 39 Nottingham Lane				Purchase Order #:												
Rogers, AR 72758				Work Order # 111816-AEG2												
Phone: 479-619-8450				Sampler Name(s): Timothy O'Neal												
Fax: rhames@nwork.com				and Signature(s): <i>Timothy O'Neal</i>												
Contact: Mr. Rusty Hames																
ESC Client Number: 3859																
Sample Identification		Sample Collection				Sample Containers										
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#	TSS(28)	Nitrate(18)	TKN(16.A)	PAN(33.PN)	Fecal Coliform(43.IF)	Oil & Grease(21)	
Final Effluent	18110/0015	11-1-18	1240	Grab	Wwater	Plastic	1/2 Gal	Cool < 6° C		X	*					
				Grab	Wwater	Plastic	1 Liter	Cool < 6° C, H2SO4 to pH < 2		X	X	X				
				Grab	Wwater	Whirlpak	4 oz.	Cool < 10° C, Na2S2O3					X			
				Grab	Wwater	Glass	1 liter	Cool < 6° C, H2SO4 to pH < 2						X		
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:								
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Used? <input checked="" type="checkbox"/> Intact? <input type="checkbox"/>								
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Turnaround: Regular <input checked="" type="checkbox"/> Special <input type="checkbox"/>								
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time	Were samples properly preserved: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>								
Comments:				Flow Data		Field Test		Time	Analyst	Result	Result	Units				
Site Address: 1364 Cane Island Road						pH:		1244	TM	8.1	8.1	SU				
Flippin, AR 72634																
Changes to new permit effective 11-1-18																
walk-in cooler																
						Fecal Start		1720	TM	This Document is Page 1 of 1						

*JA*