## ARKANSAS DEPARTMENT OF ENVIRONMENTAL QUALITY MONITORING REPORT FOR DECENTRALIZED WASTEWATER TREATMENT FACILITIES VIA DRIP IRRIGATION MONTHLY MONITORING REPORT

PERMITTEE NAME	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
CANE ISLAND SUBDIVISION	
PERMITTEE ADDRESS	1
DANNY HAMES	
6800 SHADOW VALLEY ROAD	
Rogers, AR 72756	

5 11. L.S. #18 +	FACILITY NAME (IF DIFFERENT)
	Cane Island Subdivision
	FACILITY ADDRESS
west sid	le of CR 7002 in northern Marion County

	PERMIT NO	
	4899-WR-2	
-	AFIN NO.	3. July 1
	45-00214	

	WASTEWATER E	FFLUENT MONITORING PERIOD
_	MM/DD/YYYY	MM/DD/YYYY
FROM	10/1/2018	10/31/2018

		TREATED WASTE	WATER EFFLUENT	SAMPLING							
PARAMETE	ER .	PERMIT REQUIREMENT	SAMPLE MEAS	UREMENT	UNITS	ı	QUENCY OF NALYSIS	SAMPLE TYPE			
OSPHOROUS, TOTAL (AS P) FLUENT GROSS VALUE		REPORT	7.67	7.67			ONCE/ MONTH	GRAB			
OD, 5-DAY (20 DEG. C) FLUENT GROSS VALUE		15	4.2		MG/L		ONCE/ MONTH	GRAB			
FLUENT GROSS VALUE		6 to 9	7.4	S.U.	S.U. ONCE/ MONTH						
LIDS, TOTAL SUSPENDED FLUENT GROSS VALUE		15	< 2.5		MG/L		ONCE/ MONTH	GRAB			
TROGEN, AMMONIA TOTAL (AS N) FLUENT GROSS VALUE		REPORT	0.04	-	MG/L		ONCE/ MONTH	GRAB			
DLIFORM, FECAL GENERAL FELUENT GROSS VALUE		2,000	<1	colonies/100ml ONCE/ MONTH			GRAB				
OTAL KJELDAHL NITROGEN FFLUENT GROSS VALUE		REPORT         59.6           REPORT         42.2			MG/L		ONCE/ MONTH	GRAB GRAB			
TRATE NITROGEN					MG/L		ONCE/ MONTH				
TRITE NITROGEN		REPORT	REPORT         < 0.015				GRAB				
ANT AVAILABLE NITROGEN		REPORT					ONCE/ MONTH	GRAB			
LOW, THRU CONDUIT OR TREATI FFLUENT GROSS VALUE	MENT UNIT	REPORT	MONTHLY TOTAL 20,716	DAILY MAX 1,177 GPD			ONCE/ MONTH	TOTAL FLOW			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		LAW THAT I HAVE PERSONALLY E.		,	1	TE	ELEPHONE	DATE			
Kathy Bartlett	INDIVIDUALS IMMEDIATELY RE	WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I SIGNATURE OF KINCIPAL									
TYPES OF PRINTER	1	SIGNIFICANT PENALTIES FOR SU POSSIBILITY OF FINE AND IMPRISONI	1	EXECUTIVE O	AREA CODE	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: 1810010092

Customer Name : CANE ISLAND ESTATES POA

Customer Number : 3859
Report Date : 10/19/18

Sample Date : 10/04/18

Sample Time : 1220

Sample Type : GRAB WWATER
Sample From : FINAL EFFLUENT

Collected By: TMO Delivery By: TMO

Work Order : Purchase Order :

	Laboratory Analysis						
Analysis						Precision	Accuracy
<u>Date Time By</u>	Parameter	Result	Notes Qua	ntity _	Method	% RPD	% Recovery
10/10 1500 PJC	Ammonia as N, (HACH/SM)	$0.04~{ m mg/L}$		H	I/SM 11 10205/4500	7.45	101.4 *
10/16 1100 PJC	Total Kjeldahl Nitrogen	59.6 mg/L		C	2/2014 HACH 10242	0.97	102.7 *
10/05 1330 PJC	Nitrate Nitrogen	42.2000 mg/L		S	M 2000 4500-NO3 E	1.98	99.9 *
10/05 1400 PJC	Nitrite Nitrogen	< 0.0150  mg/L			HACH 10206	2.15	101.6
10/09 0930 TCF	Oil & Grease, Total	2.10 mg/L		E	PA 1664 B	4.72	101.0 *
10/04 1224 TMO	рН	7.4 S.U.		S	M 2000 4500-H+B	0.00	N/A *
10/10 1100 PJC	Phosphorous, Total (as P)	7.670 mg/L		H	ACH 10209	4.16	102.6 *
10/08 1400 PJC	Solids, Total Suspended	< 2.50 mg/L		S	M 1997 2540 D	0.00	N/A *
10/19 1212 NTR	Nitogen, Plant Available	60.12 mg/L		3	3 MSA 2nd Ed	l	
10/04 1825 TMO	Fecal Coliform	< 1.0 /100m	1	C	6/2012 Colilert18	0.00	N/A *
10/05 0630 DWC	BOD, Carbonaceous	4.20 mg/L		S	M 2001 5210 B	0.00	108.0 *
10/16 1200 PJC	Solids, % Total	0.080 %		S	M 1997 2540 G	0.00	N/A *

 $\ensuremath{^{\star}}$  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

Phone: 501-221-2565

P.O. Box 55146

Little Rock, AR 72211

Little Rock, AR 72215

Fax: 501-221-1341

website: www.esclabs.com

Springdale, Arkansas 479-750-1170

Carlsbad, New Mexico 575-887-1ESC

## **CHAIN OF CUSTODY**

Client Information				Project Information				Requested Parameters						;				
Client:		Cane Island Estate	s POA		Permit/Pro	Permit/Project #:												
Address:		39 Nottingham Lan	е		Purchase Order #:													
Rogers, AR 72758				Work Order # 11181		111816	316-AEG2			Sol		æ						
Phone:	479-619-8450			Sampler N		lame(s):	Timothis O'Neal			Total Sol %(82)		(15.	25)					
Fax:		rhames@nwark.co										(19)	Ammonia(15.A)	PAN(33.PN), Total P(25)	(F)	Grease (21.)		
Contact:		Mr. Rusty Hames			and Signa	ignature(s):		'Meal	CBOD(70),	litrite	\mr	Tota	n(43	se (				
ESC Client N	Number:	3	859			The state of the s			<u> </u>		8), N		PN),	Coliform(43.IF)	rea			
5	Sample Iden	tification		Sample	Collection		1	Sample	Containers		TSS(28)	Nitrate(18), Nitrite(19)	TKN(16.A),	(33.1	S I	8 6		
Identification ESC Control #			Date	Time	Туре	Matrix	Туре	Volume	Preservati	ve #	TSS	Nitra	IKN	PAN	Fecal	ö		
Final Effluent 1510010097		1810010092	10-4-18	1220	Grab	Wwater	Plastic	1/2 Gai	Cool ≤ 6° C		Х	X						
	1		1		Grab	Wwater	Plastic	1 Liter	Cool <u>&lt;</u> 6° C, H2SO4 to pH <2				Х	X				
					Grab	Grab Wwater Whirlpak 4 oz.		Cool <10° C, Na2S2O3						Х				
					Grab	Wwater	Glass	1 liter	Cool < 6° C, H2S0 to pH <2	04						Х		
1	1		]	, ,														
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								4										
Relinquished By: (S	ignature and Printed	Name)	Date	Time	Received By: (Signature and Printed Name) Date			Time	Custo	ody Se ?	als:		Intac	12	_			
Relinquished By: (S	ignature and Printed	Name)	Date	Time	Received By: (Si	Received By: (Signature and Printed Name) Date Time			Time	Turnaround:								
Refinquished By: (Signature and Pristed Name)			Time	Received for Lab By (Signature and Printed Name)			Date	Time Marc		egular // ere samples prope		perly	Special etly preserved:					
			1/ W				10-5-18 0	080		Yes		No		No				
Comments: 1364 Cane Island Road				<u>//                                   </u>	Flow L	ata	Field Test pH:	Time A	nalyst	Resu	.llt -4	Resu	1t 74		Units St			
		Flippin, AR 72634						pr 1.	1207	7 143	<del>                                     </del>			-71			<u></u>	
	Check	et mb /o	oler															
	VILLOR	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	0 K.					Fecal Start:	1825 7	Tmo	This	Docu	ment	is Pa	ige /	of		$\dashv$
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