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

| Society when a provide the second sec |
|--|
| PERMITTEE NAME |
| First Asset Holdings, LLC |
| PERMITTEE ADDRESS |
| PO Box 7 |
| Fort Smith, AR 72902 |

| 10000 | CONTRACTOR |
|-------|---|
| | FACILITY NAME (IF DIFFERENT) |
| L | Deer Haven Subdivision |
| | FACILITY ADDRESS Smith Ridge Rd Garfield AR 72752 |
| L | |

| 1,9 | PERMIT NO. |
|------------|------------|
| | 4908-WR-1 |
| 美 落 | AFIN NO. |
| | 04-01681 |

| | WASTEWATER EFFLU | ENT MONITORING PERIOD |
|------|------------------|-----------------------|
| | MM/DD/YYYY | MM/DD/YYYY |
| FROM | 12/1/2012 | 12/31/2012 |

| PARAMETER | | PERMIT REQUIREMENT | SAMPLE MEASUREMENT | | UNITS | PREQUENCY OF | SAMPLE TYPE |
|--|----------------------------------|--------------------|-------------------------------|-----------|----------------|-------------------|-------------|
| PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE | | REPORT | 7.2 | | MG/L | ANALYSIS ONCE/ | GRAB |
| BOD, 5-DAY (20 DEG. C) FFLUENT GROSS VALUE | | 15 | < 2.0 | | MG/L | MONTH ONCE/ | GRAB |
| PH EFFLUENT GROSS VALUE | | 6 to 9 | 6.8 | | S.U. | MONTH ONCE/ | |
| SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE | | . 15 | < 2.0 | | MG/L | MONTH ONCE/ | GRAB |
| NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE | | REPORT | 7.8 | | MG/L | MONTH ONCE/ | GRAB |
| COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE | | 10,000 | 50 | | | MONTH ONCE/ | GRAB |
| OTAL KJELDAHL NITROGEN FFLUENT GROSS VALUE | | REPORT | 12 | | colonies/100ml | MONTH ONCE/ | GRAB |
| IITRATE NITROGEN FFLUENT GROSS VALUE | | REPORT | 18.32 | | <u> </u> | MONTH ONCE/ | GRAB |
| ITRITE NITROGEN FFLUENT GROSS VALUE | | REPORT | | | MG/L | MONTH ONCE/ | GRAB |
| PLANT AVAILABLE NITROGEN | | REPORT | 0.082 | | MG/L | MONTH | GRAB |
| FFLUENT GROSS VALUE LOW, THRU CONDUIT OR TREATMENT UNIT | | REPORT | 27.4 MONTHLY TOTAL DAILY MAX | | MG/L | ONCE/ MONTH | GRAB |
| FFLUENT GROSS VALUE | | REPORT | 49,444 | 33,280 | GPD | ONCE/ MONTH | TOTAL FLOW |
| NAME/TITLE PRINCIPAL EXECUTIVE OFFICER | CAMINED AND AM | 2 4 5 1 6 | | TELEPHONE | DATE | | |
| 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 WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE EXECUTIVE OFFICER OR | | | | | 479 530-5926 | 1/15/2013 | |
| TYPED OR PRINTED (1) OMMENTS AND EXPLANATION OF | SCIPILITY OF CIME AND IMPOUNDED. | EXECUTIVE OF | | FFICER OR | AREA 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: 1212020359

Customer Name : GREENFIELD CAP DEV-DEER HAVEN

Customer/Permit No.: 1821 / 4908-WR-1

Report Date : 12/28/12

Sample Date : 12/19/12

Sample Time : 1115 Sample Type : GRAB W

Sample From : DOSE TANK/EFFLUENT

Collected By: SJI Delivery By : SJI

Work Order : Purchase Order :

| Date Time By Parameter Result Notes Quantity Method % RPD % Record Result 12/26 0930 KIK Ammonia Nitrogen 7.8 mg/L SM 18th 4500-NH3 H 11.43 86 12/20 0800 KIK Kjeldahl Nitrogen Total 11.76 mg/L SM 18th 4500-NorgB 10.86 85 12/26 1400 MNM Nitrate Nitrogen 18.32 mg/L SM 18th 4500-NorgB 6.06 10.7 12/21 1550 MNM Nitrite Nitrogen 0.082 mg/L SM 18th 4500 NO2 B 4.17 95 12/19 1120 SJI pH 6.8 S.U. SM 18th 4500-H+ B 0.00 N 12/28 1100 MNM Phosphorous, Total (as P) 7.2 mg/L SM 18th 4500-H+ B 0.00 N 12/21 1610 SJI Solids, Total Suspended < 2.0 mg/L SM 18th 2540D 0.00 N 12/19 1500 RHB Coliform, Fecal SM 18th 2540D 0.00 N | Analysis | | Laboratory Analysis | | Quality | y a an a succe |
|--|---|---|---|---|-----------|--|
| 12/19 1400 SJI BOD, Carbonaceous < 2.0 mg/L | Date Time By 12/26 0930 KIK 12/20 0800 KIK 12/26 1400 MNM 12/21 1550 MNM 12/19 1120 SJI 12/28 1100 MNM 12/21 1610 SJI 12/19 1500 RHB 12/19 1400 SJI | Ammonia Nitrogen Kjeldahl Nitrogen Total Nitrate Nitrogen Nitrite Nitrogen pH Phosphorous, Total (as P) Solids, Total Suspended Coliform, Fecal BOD, Carbonaceous | 7.8 mg/L 11.76 mg/L 18.32 mg/L 0.082 mg/L 6.8 S.U. 7.2 mg/L < 2.0 mg/L 50 /100ml < 2.0 mg/L | SM 18th 4500-NH3 H SM 18th 4500-NorgB SM 18th 4500-NO3 E SM 18th 4500 NO2 B SM 18th 4500-H+ B EPA 365.3 SM 18th 2540D SM 18th 9222D SM 18th 5210B | Precision | Accuracy Recover 86.2 89.7 107.9 95.9 N/A 105.0 N/A N/A 99.0 |

* 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 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



Environmental Services Company, Inc.
Northwest Branch
1107 Century
Springdale, AR 72764

CHAIN OF CUSTODY Phone: 501-221-2565 Fax: 501-221-1341 Phone 479-750-1170 Fax: 479-750-1172 Client Information **Project Information** Requested Parameters Company Name: Deer Haven Subdivision Permit/Project #: Address: PO Box 127 Purchase Order #: Avoca Ar 72711 Telephone: Sampler Name(s): CBOD, TSS, NO2, PAN Sam J. Isaacks Telephone: P, NH3-N, TKN, N03 5and Signature(s): F. COLIFORM **ESC Client Number:** 1821 Sample Identification Sample Collection Sample Containers Identification ESC Control # Date Time Type Volume | 돐 Matrix Type Preservative # Dose Tank/Effluent 12/2020 3 59 191 GRAR Water teflon 150 ml none X **GRAB** Water **Plastic** H₂SO₄,pH<2 1 qt X GRAR Water **Plastic** 1 qt none/ice X **GRAB** Water Whiripak 300ml none/ice Relinquished By: (Signature and Printed Name) Received By: (Signature and Printed Name) Custody Seals: Sam J. Isaacks /足口 Used? N Relinquished By: (Signature and Printed Name) Intact? Received By: (Signature and Printed Name) Date Turnaround Regular ~ Special Relinquished By: (Signature and Printed Name) Received for Leb By: (Signature and Printed Name) Date 12 pate Were samples properly preserved: 1360 X No Comments: FLOW DATA Field Test Time Analyst Result Result Units Analyst: pH: 1125 304 58 Time: Temp.: Reading: DO: Units: Debris: Cool all samples to 6 degrees C. This Document is Page 1 of Chlorinated? Yes No

syl