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

	PERMITTEE NAME	
	First Asset Holdings, LLC	
<u> </u>	PERMITTEE ADDRESS	
	PO Box 7	
	Fort Smith, AR 72902	

FACILITY NAME (IF DIFFERENT)
Deer Haven Subdivision
 FACILITY ADDRESS
 Smith Ridge Rd Garfield AR 72752

PERMIT NO.	
4908-WR-1	
AFIN NO.	
04-01681	

	WASTEWATER EFFLUENT MONITORING PERIOD										
	MM/DD/YYYY	MM/DD/YYYY									
FROM	7/1/2017	7/31/2017									

	,	TREATED WASTE	WATER EFFLUENT	SAMPLING			•				
PARAMET	PERMIT REQUIREMENT	SAMPLE MEA	SUREMENT	UNITS	1	QUENCY OF ANALYSIS	SAMPLE TYPE				
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	8.7		MG/L		ONCE/ MONTH	GRAB				
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE		15	< 2	?	MG/L		ONCE/ MONTH	GRAB			
PH EFFLUENT GROSS VALUE		6 to 9	6.8	3	S.U.		ONCE/ MONTH	GRAB			
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE		15	3.3	3	MG/L		ONCE/ MONTH	GRAB			
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE		REPORT	11.	1	MG/L		ONCE/ MONTH	GRAB			
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE		10,000	colonies/100ml		ONCE/ MONTH	GRAB					
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE		REPORT	16.2	MG/L		ONCE/ MONTH	GRAB				
NITRATE NITROGEN EFFLUENT GROSS VALUE		REPORT	36.	3	MG/L		ONCE/ MONTH	GRAB			
NITRITE NITROGEN EFFLUENT GROSS VALUE		REPORT	0.08	32	MG/L		ONCE/ MONTH	GRAB			
PLANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE		REPORT	49	MG/L		ONCE/ MONTH	GRAB				
FLOW, THRU CONDUIT OR TREATI EFFLUENT GROSS VALUE	MENT UNIT	REPORT	MONTHLY TOTAL 46,040	DAILY MAX 1,842	GPD		ONCE/ MONTH	TOTAL FLOW			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		LAW THAT I HAVE PERSONALLY EX	1 2 -	^ /	.1	TI	ELEPHONE	DATE			
Kathy Bartlett	INDIVIDUALS IMMEDIATELY RES	WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM SIGNATURE OF PRINCIPAL									
TYPED OR PRINTED	EXECUTIVE OFFICER OR AUTHORIZED AGENT			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: 1707020160

Customer Name : DEER HAVEN UTILITY LLC

Customer/Permit No.: 1821 / 4908-WR-1 Report Date: 07/25/17 Sample Date : 07/14/17

Sample Time : 1245

Sample Type : GRAB DEER HAVEN Sample From : DOSE TANK EFFLUENT Collected By: JCB Delivery By : JCB

Work Order : Purchase Order :

		Laboratory Analysis		Quality	Assurance
Analysis				Precision	Accuracy
Date Time By	Parameter	Result Notes	Quantity Method	% RPD	% Recovery
07/14 1000 TSB	Ammonia Nitrogen	11.1 mg/L	SM 1997 4500-NH3	F 0.00	93.3 *
07/24 1330 TSB	Total Kjeldahl Nitrogen	16.24 mg/L	02/2014 HACH 102	42 3.29	109.0 *
07/17 1400 TSB	Nitrate Nitrogen	36.30 mg/L	SM 2000 4500-NO3	E 0.57	100.9 *
07/14 1030 TSB	Nitrite Nitrogen	0.082 mg/L	SM 2000 4500 NO2	B 0.59	100.0 *
07/14 1245 JCB	Нф	6.8 S.U.	SM 2000 4500-H+	B 0.00	n/a
07/18 1300 TSB	Phosphorous, Total (as P)	8.7 mg/L	EPA 365.3	1.38	101.2
07/20 1400 JCB	Solids, Total Suspended	$3.3~\mathrm{mg/L}$	SM 1997 2540 D	7.61	N/A *
07/14 1030 JCB	Coliform, Fecal	132 /100ml	SM 9222 D 1997	12.12	n/a
07/14 1400 TSB	BOD, Carbonaceous	< 2.0 mg/L	SM 2001 5210 B	5.80	91.0 *
07/25 1000 TSB	Nitrogen, Plant Available	49.0 mg/L	SM 1997 4500-N	,	
07/14 1245 JCB	Sample Collection/Travel	1 each		1	

* 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. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com



Corporate Office, Little Rock, Arkansas 501-221-2565

> Carlsbad, New Mexico 575-887-1ESC

East: 470 750 1173

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Priorie: 479-750-1170 Pax. 479-750-1172												سجس				وبسند			
Client Information				Project Information					Requested Parameters						3				
Company Name: Deer Haven Utility LLC			Permit/Project#:							£									
Address: PO Box 127 Avoca Ar 72711			Purchase Order #:								TP(25),NH5-N(15.4),TKN(16.4),N03(15.4)N02(19)								
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Telephone:					Sampler N	Sampler Name(s): John Byrd					P.NO.	6)N/6					ĺ		
Telephone:							Sh	· Bu	2000				N(16.	8),P.	8				
,					and Signa	ture(s):							A.	38(2	1(4)				
ESC Client Numb	oer:	1821											-N(15	CBOD(70),TSS(28),PAN(99.99)	Coliform (43)				
Samp	le Iden	ntification		Sample	Collection			Sample (Containers	3		(23)	5),NH,	2)	퉛				
Identification	n	ESC Control #	Date	Time	Туре	Matrix	Type	Volume	Preserva	ative	#	Ŗ Ĕ	TP(2	8	<u>т.</u>				
Dose Tank/Eff	luent	1707020160	7/14/12	1245	GRAB	Water	teflon	150 ml	none		1	х							
					GRAB	Water	Plastic	8 oz	H₂SO₄,pH<	2	1		x	,					
					GRAB	Water	Plastic	1 qt	none/ice		1			х	<u>. </u>				
					GRAB	Water	Whiripak	100 ml	none/ice		1	L			х				
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Relinquished By: (Signature	and Printed	Name) By	7/14/17	1420	Received By: (Signature and Printed Name) Data				Dete	Tim	Θ	Custo Used	ody Se	eais:	f	Intac	#? [, 1
Relinquished By: (Signature and Printed Name) Supply (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name) Date Time				around	<u> </u>		<u> </u>								
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab	Received for Lab By: (Signature and Printed Name) Kickaa Brown Richard Brow			. Date	Time Wei		Regu Were	samp	les pr	operly	Spec	ived:			
Comments:				Kichan	FLOW D	KICHAR	Field Test	7/14/17 Time	7 1420		Rest	Yes	Resu			No Units			
CONTINUENTIES.			· · · · · · · · · · · · · · · · · · ·	Analyst:		pH:	*****	Analys		69		Co			Units				
				Time;		Temp.:				OCA!		<u> </u>	,D	(C)		°F			
				·		Reading: Units:		DO: 1 Debris:			\dashv				\dashv				
1		Cool all samples to 6 de	egrees C.	****	 			Chlorinated	? Yes N	•		This	Doc	ume	nt is	Page	<u> </u>	of	
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