

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

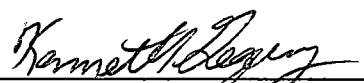
PERMITTEE NAME
First Asset Holdings, LLC
PERMITTEE ADDRESS
PO Box 7 Fort Smith, AR 72902

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 3/1/2016	3/31/2016.0

TREATED WASTEWATER EFFLUENT SAMPLING						
PARAMETER	PERMIT REQUIREMENT	SAMPLE MEASUREMENT		UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	8		MG/L	ONCE/MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	3.3		MG/L	ONCE/MONTH	GRAB
PH EFFLUENT GROSS VALUE	6 to 9	6.3		S.U.	ONCE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS VALUE	15	5		MG/L	ONCE/MONTH	GRAB
NITROGEN, AMMONIA TOTAL (AS N) EFFLUENT GROSS VALUE	REPORT	8.4		MG/L	ONCE/MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	364		colonies/100ml	ONCE/MONTH	GRAB
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE	REPORT	14.56		MG/L	ONCE/MONTH	GRAB
NITRATE NITROGEN EFFLUENT GROSS VALUE	REPORT	28		MG/L	ONCE/MONTH	GRAB
NITRITE NITROGEN EFFLUENT GROSS VALUE	REPORT	0.867		MG/L	ONCE/MONTH	GRAB
PLANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE	REPORT	39.1		MG/L	ONCE/MONTH	GRAB
FLOW, THRU CONDUIT OR TREATMENT UNIT EFFLUENT GROSS VALUE	REPORT	MONTHLY TOTAL	DAILY MAX	GPD	ONCE/MONTH	TOTAL FLOW
		55,892	2,028			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	Kathy Bartlett	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM AWARE 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 INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
				479	530-5926	4/7/2016
TYPED OR PRINTED				AREA CODE	NUMBER	MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

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: 1603020099
 Customer Name : DEER HAVEN UTILITY LLC
 Customer/Permit No. : 1821 / 4908-WR-1
 Report Date : 03/22/16

Sample Date : 03/16/16
 Sample Time : 1140
 Sample Type : GRAB DEER HAVEN
 Sample From : DOSE TANK EFFLUENT

Collected By: WDS
 Delivery By : WDS
 Work Order :
 Purchase Order :

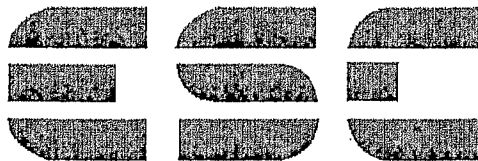
<u>Laboratory Analysis</u>							<u>Quality Assurance</u>	
<u>Analysis</u>			<u>Result</u>	<u>Notes</u>	<u>Quantity</u>	<u>Method</u>	<u>Precision</u>	<u>Accuracy</u>
<u>Date</u>	<u>Time</u>	<u>By</u>					<u>Parameter</u>	<u>% RPD</u>
03/17	0830	TSB	Ammonia Nitrogen	8.4 mg/L		SM 1997 4500-NH3 F	0.36	108.0 *
03/22	0830	TSB	Kjeldahl Nitrogen Total	14.56 mg/L		SM 1997 4500-NorgB	1.87	100.5 *
03/21	1445	TSB	Nitrate Nitrogen	28.00 mg/L		SM 2000 4500-NO3 E	0.90	98.7 *
03/17	1000	TSB	Nitrite Nitrogen	0.867 mg/L		SM 2000 4500 NO2 B	0.77	100.3
03/16	1140	WDS	pH	6.3 S.U.		SM 2000 4500-H+ B	0.00	N/A *
03/21	1330	TSB	Phosphorous, Total (as P)	8.0 mg/L		EPA 365.3	1.68	100.8 *
03/17	1345	TSB	Solids, Total Suspended	5.0 mg/L		SM 1997 2540 D	0.00	N/A *
03/16	1620	RHB	Coliform, Fecal	364 /100ml		SM 1997 9222 D	0.00	N/A *
03/16	1400	TSB	BOD, Carbonaceous	3.3 mg/L		SM 2001 5210 B	13.53	101.0 *
03/22	1630	TSB	Nitrogen, Plant Available	39.1 mg/L		SM 1997 4500-N		

* 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 Richard Brown
 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

Phone: 479-750-1170 Fax: 479-750-1172

CHAIN OF CUSTODY

Client Information				Project Information						Requested Parameters							
Company Name:		Deer Haven Subdivision		Permit/Project #:													
Address:		PO Box 127		Purchase Order #:													
		Avoca Ar 72711		Sampler Name(s):		Wade Schmitt											
Telephone:				and Signature(s):		<i>Wade Schmitt</i>											
Telephone:																	
ESC Client Number:		1821															
Sample Identification		Sample Collection				Sample Containers				pH(23)		TP(25),NH ₃ -N(15.A),TKN(16.A),NO ₃ (15.A)NO ₂ (19)		CBOD(70),TSS(28),PAN(99.99)		F. Coliform (43)	
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#								
Dose Tank/Effluent	1603020099	3-16-16	11:40	GRAB	Water	teflon	150 ml	none	1	X							
				GRAB	Water	Plastic	8 oz	H ₂ SO ₄ ,pH<2	1		X						
				GRAB	Water	Plastic	1 qt	none/ice	1			X					
				GRAB	Water	Whirlpak	100 ml	none/ice	1				X				
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Custody Seals:		Used? <input checked="" type="checkbox"/>		Intact? <input type="checkbox"/>					
<i>Wade Schmitt</i>		3-16-16	13:45	<i>Richard Brown</i>		3-16-16	13:45	Turnaround:		Regular <input checked="" type="checkbox"/>		Special <input type="checkbox"/>					
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Were samples properly preserved:		Yes <input checked="" type="checkbox"/>		No <input type="checkbox"/>					
Relinquished By: (Signature and Printed Name)		Date	Time	Received for Lab By: (Signature and Printed Name)		Date	Time										
				<i>Richard Brown</i>		3-16-16	13:45										
Comments:				FLOW DATA		Field Test		Time	Analyst	Result	Result	Units					
				Analyst:		pH:		11:40	WPS	6.3							
				Time:		Temp.:		11:40	WPS	14.9		°C °F					
				Reading:		DO:											
				Units:		Debris:											
Cool all samples to 6 degrees C.								Chlorinated? Yes No		This Document is Page ___ of ___							