

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

PERMITTEE NAME
 First Asset Holdings, LLC

FACILITY NAME (IF DIFFERENT)
 Deer Haven

PERMIT NO.
 4908-WR-1

PERMITTEE ADDRESS
 PO Box 7
 Fort Smith, AR 72902

FACILITY ADDRESS
 Smith Ridge Rd Garfield, AR 72754

AFIN NO.
 04-01681

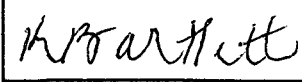
MAKE ADDITIONAL COPIES OF THIS FORM FOR FUTURE USE. INCLUDE A SITE MAP SHOWING LOCATION OF ALL LYSIMETERS AND MONITORING WELLS. ATTACH SAMPLING DATA FOR ADDITIONAL LYSIMETERS AND MONITORING WELLS, AS NECESSARY. SUBMIT LAB ANALYSES WITH THIS FORM.

LYSIMETER AND MONITORING WELL MONITORING PERIOD

MM/DD/YYYY	TO	MM/DD/YYYY
7/1/2012		09/31/2012

LYSIMETER AND MONITORING WELL SAMPLING						
	SAMPLING FREQUENCY	UNITS	PHOSPHOROUS, TOTAL (AS P) SAMPLE GROSS VALUE	NITROGEN, AMMONIA TOTAL (AS N) SAMPLE GROSS VALUE	NITRITE PLUS NITRATE TOTAL 1 DET. (AS N) SAMPLE GROSS VALUE	CHLORINE, TOTAL RESIDUAL SAMPLE GROSS VALUE
LYSIMETER 1	QUARTERLY	MG/L			no water to draw sample	
LYSIMETER 2	QUARTERLY	MG/L			no water to draw sample	
LYSIMETER 3	QUARTERLY	MG/L			no water to draw sample	
LYSIMETER 4	QUARTERLY	MG/L			no water to draw sample	
LYSIMETER 5	QUARTERLY	MG/L			no water to draw sample	
LYSIMETER 6	QUARTERLY	MG/L			no water to draw sample	
LYSIMETER 7	QUARTERLY	MG/L				
LYSIMETER 8	QUARTERLY	MG/L				
LYSIMETER 9	QUARTERLY	MG/L				
LYSIMETER 10	QUARTERLY	MG/L				
LYSIMETER 11	QUARTERLY	MG/L				
LYSIMETER 12	QUARTERLY	MG/L				
MONITORING WELL 1 (UP-GRADIENT)	QUARTERLY	MG/L				
MONITORING WELL 2 (UP-GRADIENT)	QUARTERLY	MG/L				
MONITORING WELL 1 (DOWN-GRADIENT)	QUARTERLY	MG/L				
MONITORING WELL 2 (DOWN-GRADIENT)	QUARTERLY	MG/L				
MONITORING WELL 3 (DOWN-GRADIENT)	QUARTERLY	MG/L				
MONITORING WELL 4 (DOWN-GRADIENT)	QUARTERLY	MG/L				
MONITORING WELL 5 (DOWN-GRADIENT)	QUARTERLY	MG/L				
MONITORING WELL 6 (DOWN-GRADIENT)	QUARTERLY	MG/L				

All Monitoring Wells DRY

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Kathy Bartlett TYPED OR PRINTED	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.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
			479 527-9880 AREA CODE NUMBER	10/31/12 MM/DD/YYYY

COMMENTS AND EXPLANATION OF VIOLATIONS (Reference all attachments here)

Greenfield Capital Development
PO Box 9299
Fayetteville, AR 72703

NORTHWEST AR POST
AR 727 2 L
05 NOV 2012 PM



ADEQ Water Division
Permits Branch
5301 Northshore Dr
N Little Rock, AR 72118-5317

721185317

