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

PERMITTEE NAME				PERMIT NO.	1					
First Asset Holding				4908-WR-2						
			FACILITY ADDRESS							
PERMITTEE ADDRESS PO Box 7	<u> </u>		and any and the second second second	AFIN NO. 04-01681						
Fort Smith AR 72902			<del></del>	04-01001	i					
1011 0111111711 72302	700									
		MM/DD/YYYY I	TEWATER EFFLUENT MC	MITORING PERIO	MM/DD/YYYY					
		2/1/2018		2/28/2018						
TREATED WASTEWATER EFFLUE	NT SAMPLING			- 2		1 · 1 · 2 · .	ı			
PARAMETER		Limit	Sample Measurement	UNITS	Monitoring	Reporting				
Carbonaceous Biochemical Oxygen Demand (CBOD5)		30	9.1	mg/l						
Total Suspended Solids (TSS)		45	11	mg/l						
Fecal Coliform Bacteria (FCB)		4,000	1,100	colonies/100ml	GRAB SAMPLE ONCE A MONTH					
рН		6.0 - 9.0	6.0 - 9.0 7.2 s.u.							
Total Phosphorus (TP)		REPORT	8.6	mg/l						
Total Kjeldahi Nitrogen (TKN)		REPORT	No Report	mg/i						
Ammonia Nitrogen		REPORT	No Report	mg/l	GRAB SAMPLE ONCE A					
Nitrate Nitrogen ( NO <sub>3</sub> -N) + Nitrite Nitrogen (NO <sub>2</sub> N)		REPORT	No Report	mg/l	QUARTER					
Plant Available Nitrogen (PAN)		REPORT	No Report	mg/l						
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PE	NALTY OF LAW THAT I HAVE PERSONAL			ļ					
	SUBMITTED HEREIN;	AND BASED ON MY INQUIRY OF THOSE	en degen	Telephone	Date					
	OBTAINING THE INF	ORMATION, I BELIEVE THE SUBMITT	SIGNATURE OF PRINCIPAL	(470) 520						
Ken Gregory	COMPLETE, I AM AW	ARE THAT THERE ARE SIGNIFICANT PE	NALTIES FOR SUBMITTING FALS	EXECUTIVE OFFICER OR	(479) 530- 5926	<del></del>				
TYPED OR PRINTED	INCLUDING THE POSS		AUTHORIZED AGENT	3320	3/8/2018					
COMMENTS AND EXPLANATION O		,								
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## 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: 1802020105

Customer Name : DEER HAVEN UTILITY LLC

Customer/Permit No.: 1821 / 4908-WR-1 Report Date: 02/16/18

Sample Date : 02/09/18

Sample Time : 1334

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

Work Order : Purchase Order :

	Quality Assurance					
Analysis					Precision	Accuracy
Date Time By	Parameter R	esult Notes	Quantity	<u> Method</u>	% RPD	% Recovery
02/09 1336 AEU pH		7.2 S.U.		SM 2000 4500-H+ B	0.00	N/A *
02/12 1200 TSB Phos	sphorous, Total (as P)	8.6 mg/L		EPA 365.3	1.60	103.3 *
02/14 1525 AEU Soli	ids, Total Suspended	11.0 mg/L		SM 1997 2540 D	17.54	N/A *
02/09 1700 JCB Coli	iform, Fecal	1100 /100ml		SM 9222 D 1997	36.36	n/a
02/09 1400 TSB BOD,	, Carbonaceous	9.1 mg/L		SM 2001 5210 B	14.60	113.0 *

\* 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 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

## **CHAIN OF CUSTODY**

Phone: 479-750-1170	Fax: 479-750-1172		Ch	HAIN C	OF CU	STO	DY											
Client Information				Project Information						Requested				Parameters				
Company Name:	Deer Haven Utility LLC			Permit/Project #:														
Address:	PO Box 127			Purchase Order #:						ŀ								
Avoca Ar 72711							Λ			了	、					Ì	}	
Telephone:				Sampler Name(s):		An	Wher Underwood			d	)							-
Telephone:					7 / / /											ì		
Tolophone.				and Signature(s):									(28)	(43)				- 1
ESC Client Number:	1821			and Olynai	idie(s).	معرميك	Carl	<del></del>	-	$\dashv$	-		TSS	Coliform (43)		ŀ		
Sample Ider			Sample	Collection		Sample Containers			<b>⊢</b>  .	ଳ		(02)	olifo					
Identification	ESC Control #	Date	Time	Type Matrix		7.470	Volume	· · · · · · · · · · · · · · · · · · ·		#	pH(23)	TP(25)	CBOD(70),TSS(28)	F. Cc				
Dose Tank/Effluent	1802020105		1334	GRAB		Туре		<u> </u>	live				٥	<u> </u>		$\dashv$		
Dose Tank/Effluent	110000000	3/4/10	1509	<del> </del>	Water	teflon	150 ml	none		-	X	<b>  </b>				∤		
	<del>                                     </del>	<del></del>	<del>                                     </del>	GRAB	Water	Plastic	8 oz	H₂SO₄,pH<2 1		<u> </u>		X				_		
Dose Tank/Effluent	<del></del>	<b></b>	-	GRAB	Water	Plastic	1 qt	none/ice 1		1			х					
Dose Tank/Effluent				GRAB	Water	Whirlpak 100 ml none/ice 1		1				х						
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Relinquished By: (Signature and Printed Name) Date Time			Received By: (Signature and Printed Name) Date Time					round:			III.ac	<u></u>		$\dashv$				
Pollon Wheel Du / Clarature and Delat d Name		Time	David and the PA (No. 1) and David No. A			Data /			Regula	ular X, Specia e samplés properly preserv								
Relinquished By: (Signature and Printed Name) Date Time		Tatte	William / La	eceweg for Lab By: (Signature and Printed Name)		ivrd	2/9/18	1445 W			Yes X.			y preserved: No			ł	
Comments:				FLOW DATA		Field Test	Time	Analyst Re		lesu.				Units				
					Analyst: . Time:		pH: Temp.;	1336	OAFLA			7.3 7.3			°C\ °F			$\dashv$
					Reading:		DO:	La	المعتملين.	+	1/15	₹-	1(1)	1-1	۳		<del>'</del>	
					Units:		Debris:					二						
Cool all samples to 6 degrees C.							Chlorinated	? Yes No	0	Ţ	his	Docu	umer	nt is	Parr	10	of ]	