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	11/1/2017	11/30/2017								

		ASTEWATER EFFLUENT SAMPLING		T EDEOUENOY OF	
PARAMETER	PERMIT REQUIREMEN	SAMPLE MEASUREMENT	UNITS	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHOROUS, TOTAL (AS P) EFFLUENT GROSS VALUE	REPORT	7,9	MG/L	ONCE/ MONTH	GRAB
CBOD, 5-DAY (20 DEG. C) EFFLUENT GROSS VALUE	15	< 2.5	MG/L	ONCE/ MONTH	GRAB
H FFLUENT GROSS VALUE	6 to 9	6.9	S.U.	ONCE/ MONTH	GRAB
COLIDS, TOTAL SUSPENDED FFLUENT GROSS VALUE	15	3.3	MG/L	ONCE/ MONTH	GRAB
IITROGEN, AMMONIA TOTAL (AS N) FFLUENT GROSS VALUE	REPORT	19.6	MG/L	ONCE/ MONTH	GRAB
COLIFORM, FECAL GENERAL EFFLUENT GROSS VALUE	10,000	16	colonies/100ml	ONCE/ MONTH	GRAB
TOTAL KJELDAHL NITROGEN EFFLUENT GROSS VALUE	REPORT	22.4	MG/L	ONCE/ MONTH	GRAB
IITRATE NITROGEN EFFLUENT GROSS VALUE	REPORT	19.08	MG/L	ONCE/ MONTH	GRAB
IITRITE NITROGEN EFFLUENT GROSS VALUE	REPORT	7.72	MG/L	ONCE/ MONTH	GRAB
LANT AVAILABLE NITROGEN EFFLUENT GROSS VALUE	REPORT	47.2	MG/L	ONCE/ MONTH	GRAB
LOW, THRU CONDUIT OR TREATMENT UNIT	REPORT	MONTHLY TOTAL DAILY MA 76,045 2,895	X GPD	ONCE/ MONTH	TOTAL FLOW
THE STATE OF THE S	UNDER PENALTY OF LAW THAT I HAVE PERSONAL	1 : 1 /	1. 1	TELEPHONE	DATE
INDIVIDUALS Kathy Bartlett BELIEVE THE	NFORMATION SUBMITTED HEREIN; AND BASED ON S IMMEDIATELY RESPONSIBLE FOR OBTAINING E SUBMITTED INFORMATION IS TRUE, ACCURATE,	THE INFORMATION, I / OWNER AND COMPLETE, I AM SIGNATUR	E OF PRINCIPAL VE OFFICER OR	479 530-5926	12/4/2017
TYPED OR PRINTED	AT THERE ARE SIGNIFICANT PENALTIES FOI	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: 1711020117

Customer Name : DEER HAVEN UTILITY LLC

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

Report Date : 11/15/17

Sample Date : 11/10/17

Sample Time : 1307

Sample Type : GRAB DEER HAVEN

Sample From : DOSE TANK EFFLUENT

Collected By: RHB

Delivery By : HRB

Work Order : Purchase Order :

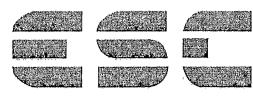
	Quality A	Assurance			
Analysis		Laboratory Analysis		Precision	Accuracy
Date Time By	Parameter	Result Notes Qu	uantity Method	% RPD	% Recovery
11/10 1100 TSB	Ammonia Nitrogen	19.6 mg/L	SM 1997 4500-NH3 F	0.00	106.4 *
11/14 0800 TSB	Total Kjeldahl Nitrogen	22.4 mg/L	02/2014 HACH 10242	2.60	100.6 *
11/14 1500 TSB	Nitrate Nitrogen	19.08 mg/L	01/2013 HACH 10206	0.55	99.5 *
•	Nitrite Nitrogen	7.720 mg/L	06/2017 HACH 10207	0.74	100.3
	-	6.9 S.U.	SM 2000 4500-H+ B	0.00	N/A
	Phosphorous, Total (as P)	7.9 mg/L	EPA 365.3	1.24	103.4 *
11/14 0910 JCB	Solids, Total Suspended	3.3 mg/L	SM 1997 2540 D	15.38	N/A
	Coliform, Fecal	16 /100ml	SM 9222 D 1997	0.00	N/A
11/10 1400 TSB	BOD, Carbonaceous	< 2.5 mg/L	SM 2001 5210 B	1.73	90.4 *
	Nitrogen, Plant Available	.	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.

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 (OF CU	STOI	ΣY										
Client Information				Project Information Reques						ted	Para	amet	ers				
Company Name: Deer Haven Utility LLC			Permit/Pro	oject#:							ଚ						
Address: PO Box 127 Avoca Ar 72711		Purchase Order #:							TP(25),NH ₃ -N(15.A),TKN(16.A),N03(15.A)NO2(19)								
												(5.A)	66:			İ	
Telephone:				and Signature(s): Richard Brown					NO3(CBOD(70),TSS(28),PAN(99.99)							
· ————				Sampler Name(s).		TIFY					16.A).	PA				- }	
Telephone:				-		2:10	.2 17					J.	(28)	(43)			
				and Signa	ture(s):	rich	Kand Shown					5.A).	SS		1		
ESC Client Number:	1821	,		<u></u>	 	· · · · · · · · · · · · · · · · · · ·			.,			L)N-E	[6 [6]	Coliform			
Sample Ide	ntification		Sample	Collection			Sample (Container	S		(23)	J. (2)	000	8			
Identification	ESC Control #	Date	Time	Туре	Matrix	Type	Volume	Preserva	ative	#)Hd	TP(2	CBC	IL.			
Dose Tank/Effluent	1711020117	11/10/17	13:07	GRAB	Water	teflon	150 ml	none		1	x						
				GRAB	Water	Plastic	8 oz	H₂SO₄,pH<	<2	1		х					
				GRAB	Water	Plastic	1 qt	none/ice		1		-	x				
		1		GRAB	Water	Whiripak	100 mi	none/ice		1				x		_	_
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Relinquished By: Signature and Printe	Name)	Date [1/10/17]	Time 140 9	Received By: (Signature and Printed Name) Received By: (Signature and Printed Name)		Date			Justo Jsed		ly Seals: / Intact?		t2 —	7			
Relinquished By: (Signature and Printe	ed Name)	Date	Time			nd Printed Name)		Date				around		i	IIII		
						Name) Date				Regu		[c_	Special Specia				
Relinquished By: (Signature and Printe	o name)	Date	Time	Received for Lab	By: (Signature and	ohn BY	rinted Name)		Tin			Yes	oles pr	openy		rvea: No	7
Comments:				FLOW D		Field Test	Time			Res≀		Resu			Units		
	,				Analyst:		pH:	1312	RHI		6.9		6.				
					Time: Reading:		Temp.: DO:	<u> </u>	1		Bic	2	18.	.0	20	°F	
·			,		Units:		Debris:		 		—		\vdash				
	Cool all samples to 6 d	egrees C.			L		Chlorinated	? Yes N	lo	1	This	Doc	ume	nt is	Page	e of)
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