

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

<b>PERMITTEE NAME</b>
First Asset Holding
<b>PERMITTEE ADDRESS</b>
PO Box 7 Ft Smith AR 72902


<b>FACILITY NAME</b>
Deer Haven Subdivision
<b>FACILITY ADDRESS</b>
15046 Smith Ridge Rd Garfield AR 72732

<b>PERMIT NO.</b>
4908-WR-2

<b>AFIN NO.</b>
04-01681

WASTEWATER EFFLUENT MONITORING PERIOD		
MM/DD/YYYY		MM/DD/YYYY
10/1/2019		10/31/2049

TREATED WASTEWATER EFFLUENT SAMPLING					
Parameter	Limit	Sample Measurement	Units	Monitoring	Reporting
Flow, Monthly total	REPORT	0.346522	MG	Total Flow per calendar month	Prior to the 15th of the following Month
Flow, daily maximum *	REPORT	0.01353	GPD	Daily	
Carbonaceous Biochemical Oxygen Demand (CBOD5)	30	2	mg/l	Grab Sample once per month	
Total Suspended Solids (TSS)	45	8.3	mg/l		
Fecal Colliform Bacteria (FCB)	4,000	1	colonies/100ml		
pH	6.0 - 9.0	7.4	s.u.		
Total Phosphorus (TP)	REPORT	5.7	mg/l		
Total Kjeldahl Nitrogen (TKN)	REPORT	30.8	mg/l	Grab sample once per quarter	
Ammonia Nitrogen	REPORT	18.3	mg/l		
Nitrate Nitrogen ( NO3-N) + Nitrite Nitrogen ( NO2-N)	REPORT	4.99	mg/l		
Plant Available Nitrogen (PAN)	REPORT	27	mg/l		

NAME OF PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM 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 COGNIZANT OFFICIAL	<b>TELEPHONE</b> (479) 530-5926
Kathy Bartlett			<b>DATE</b>
TYPED OR PRINTED			11/14/2019

COMMENTS AND EXPLANATION OF VIOLATIONS <i>(Reference all attachments here)</i>

* LOADING RATE BY ZONE					
Zone 1	0.00226	Zone 5	0.00226		
Zone 2	0.00226	Zone 6	0.00226		
Zone 3	0.00226				
Zone 4	0.00226				

# 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: 1910020123  
Customer Name : DEER HAVEN UTILITY LLC  
Customer/Permit No. : 1821 / 4908-WR-1  
Report Date : 10/28/19

Sample Date : 10/17/19  
Sample Time : 1141  
Sample Type : GRAB DEER HAVEN  
Sample From : DOSE TANK EFFLUENT

Collected By: NTR  
Delivery By : NTR  
Work Order :  
Purchase Order :

## Laboratory Analysis

Analysis							Quality Assurance	
Date	Time	By	Parameter	Result	Notes	Quantity	Method	Precision
								% RPD
								% Recovery
10/17	1500	TSB	Ammonia as N, (HACH 10205)	18.30 mg/L			SM 2011 4500-NH3 F	0.38
10/21	1230	TSB	Total Kjeldahl Nitrogen	30.8 mg/L			02/2014 HACH 10242	2.11
10/17	1142	NTR	pH	7.4 S.U.			SM 2011 4500-H+ B	0.00
10/21	1544	TSB	Phosphorous, Total (as P)	5.70 mg/L			EPA 365.3	0.90
10/23	1430	TSB	Solids, Total Suspended	8.3 mg/L			SM 2011 2540 D	4.85
10/17	1630	TSB	Fecal Coliform (MPN/100mL)	< 1.0 /100ml			06/2012 Colilert18	0.00
10/18	0800	TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	6.84
10/21	1300	TSB	Nitrate + Nitrite	4.99 mg/L			01/2013 HACH 10206	1.82
10/22	1500	TSB	Nitrogen, Plant Available	27.0 mg/L			SM 1997 4500-N	

\* QA data shown is from a different sample or standard on the same date.

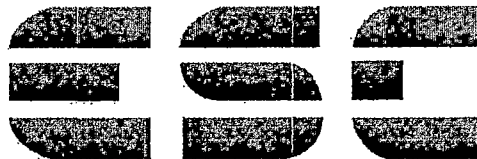
All equipment used is checked and/or calibrated daily. All NPDES testing is conducted in accordance with 40 CFR Part 136. A minimum of 10% spiked and duplicate samples is run on each parameter where applicable for Quality Assurance purposes. Quality Assurance Plan on file with Arkansas Department of Environmental Quality. Analysis time indicates the time of the start of the analytical batch in which the specific sample was included.

Signature

Environmental Services Co., Inc.

346,522  
13,520

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

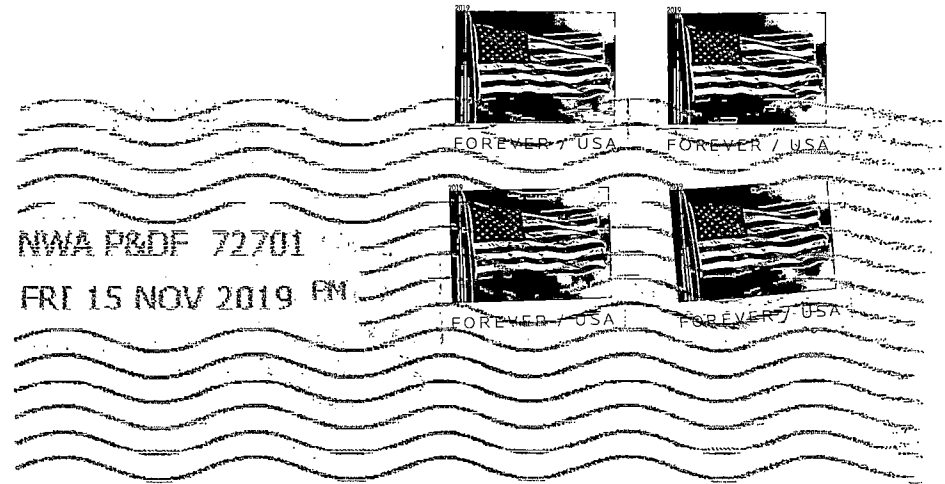
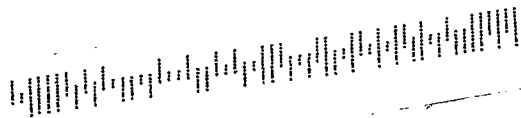
Phone: 479-750-1170 Fax: 479-750-1172

## CHAIN OF CUSTODY

Client Information						Project Information					Requested Parameters								
Company Name: Deer Haven Utility LLC						Permit/Project #:					pH(23) TP(25), NH <sub>3</sub> -N(15.A), s-TKN (16.C), NO <sub>3</sub> + NO <sub>2</sub> (91) CBOD(70), TSS(28), PAN(99.99) F. Coliform (43.IF)								
Address: PO Box 127						Purchase Order #:													
Avoca Ar 72711																			
Telephone:						Sampler Name(s): Ned Ryerson													
Telephone:						and Signature(s): <i>Ned Ryerson</i>													
ESC Client Number: 1821																			
Sample Identification		Sample Collection				Sample Containers													
Identification	ESC Control #	Date	Time	Type	Matrix	Type	Volume	Preservative	#										
Dose Tank/Effluent	1910020123	10/7-19	1141	GRAB	Water	Glass	150 ml	none	1	X									
Dose Tank/Effluent				GRAB	Water	Plastic	8 oz	H <sub>2</sub> SO <sub>4</sub> , pH<2	1		X	X							
Dose Tank/Effluent				GRAB	Water	Plastic	1 qt	none/ice	1				X						
Dose Tank/Effluent				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:											
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	Used? <input checked="" type="checkbox"/> Intact? <input type="checkbox"/>											
Relinquished By: (Signature and Printed Name)		Date	Time	Received By: (Signature and Printed Name)		Date	Time	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"/>											
Comments: <i>Ned Ryerson</i>		10/7/19	1320	<i>Tamara Brooks</i>		10/7/19	1320												
FLOW DATA						Field Test		Time	Analyst	Result	Result	Units							
Analyst:						pH:		1142	NTL	7.4	7.4	SU							
Time:						Temp.:		1142	NTL	18.3	18.2	°C °F							
Reading:						DO:													
Units:						Debris:													
Cool all samples to 6 degrees C.						Chlorinated? Yes No				This Document is Page 1 of 1									

NWA Utility Service  
PO BOX 9299  
Fayetteville, AR

72703



ADEG  
Water Division Permits Branch  
5301 Northshore Dr  
North Little Rock, AR

72118-5317