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

PERMITTEE NAME				[	PERMIT NO.				
First Asset Holding				L	4908-WR-2				
PERMITTEE ADDRESS PO Box 7 Ft Smith AR 72902				<b>AFIN NO.</b> 04-01681					
TREATED WASTEWATER EFFLUENT SAME	PLING	WASTEWA MM/DD/YYYY 9/1/2019	DD   MM/DD/YYYY   9/30/2019						
Parameter		Limit	Sample Measurement	Units	Monitoring	Re	eporting		
Flow, Monthly total		REPORT	0.202574	MG	Total Flow per calendar month				
Flow, daily maximum *		REPORT	0.09268	GPD	Daily	1			
Carbonaceous Biochemical Oxygen Demand (CE	3OD5)	30	2	mg/l					
Total Suspended Solids (TSS)		45	13.3 m						
Fecal Coliform Bacteria (FCB)		4,000	Grab Sample once per month	1					
рН		6.0 - 9.0	7.5	7.5 s.u.		Prior to the 15th of th following Month			
Total Phosphorus (TP)		REPORT	7.04	mg/l					
Total Kjeldahl Nitrogen (TKN)		REPORT	No Report	mg/l					
Ammonia Nitrogen		REPORT	No Report	mg/l	Grab sample once per quarter				
Nitrate Nitrogen ( NO <sub>3</sub> -N) + Nitrite Nitrogen ( NO <sub>2</sub> -	-N)	REPORT	No Report	mg/l	Grab sample once per quarter	<u> </u>			
Plant Available Nitrogen (PAN)		REPORT	No Report	mg/l	]				
NAME OF PRINCIPAL EXECUTIVE OFFICER		PENALTY OF LAW THAT I HAVE PERS BMITTED HEREIN; AND BASED ON			100.11		TELEPHONE		
Kathy Bartlett	IMMEDIATELY RES	PONSIBLE FOR OBTAINING THE INFO	KROWHLH	7	(479) 530- 5926				
	1	RUE, ACCURATE, AND COMPLETE. I AM SUBMITTING FALSE INFORMATION, INCL		SIGNATURE OF COGNIZANT O	FFICIAL	DATE			
TYPED OR PRINTED				10/14/2019					
COMMENTS AND EXPLANATION O	F VIOLATIONS (Refer	ence all attachments here)							
* LOADING RAT	E BY ZONE								
Zone 1 0.01548 Zone 5	0.01548								

0.01548

0.01548 0.01548

Zone 2 Zone 3

Zone 4

Zone 6

0.01548

## 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: 1909020082

Customer Name : DEER HAVEN UTILITY LLC

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

Report Date : 10/03/19

Sample Date : 09/26/19

Sample Time : 1530

Sample Type : GRAB DEER HAVEN
Sample From : DOSE TANK EFFLUENT

Collected By: JEW

Delivery By : JEW

Work Order : Purchase Order :

	Quality Assurance						
Analysis						Precision	Accuracy
<u>Date Time By</u>	<u>Parameter</u>	Result	Notes _	Quantity	Method	% RPD	% Recovery
09/26 1535 JEW	·рН	7.5 S.U.			SM 2011 4500-H+ B	0.00	N/A
09/30 1330 TSB		7.040 mg/L			EPA 365.3	2.23	112.0
09/30 1030 TSB	Solids, Total Suspended	13.3 mg/L			SM 2011 2540 D	0.00	N/A *
09/26 1645 TSB	Fecal Coliform (MPN/100mL	120.0 /100ml			06/2012 Colilert18		0.0 *
09/27 0900 TSB	BOD, Carbonaceous	< 2.0 mg/L			SM 2001 5210 B	12.23	103.6 *

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.

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

Environmental Services Company, Inc. Northwest Arkansas 1107 Century Street Springdale, Arkansas 72762 website: www.esclabs.com

Phone: 479-750-1170



Corporate Office, Little Rock, Arkansas 501-221-2565

> Carlsbad, New Mexico 575-887-1ESC

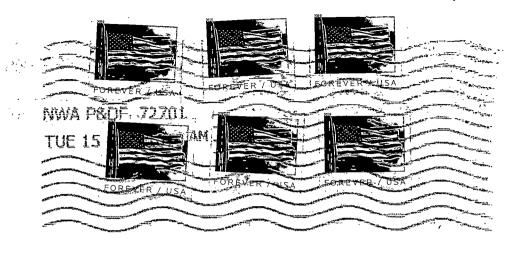
## CHAIN OF CUSTODY

Phone: 479-750-1170	Fax: 479-750-1172		Ch	HAIN (														
Client Information				Project Information								Rec	ues	ted	Par	ame	eters	
Company Name:	Deer Haven Utility LLC			Permit/Project #:								Π			T		П	
Address:	PO Box 127			Purchase	Purchase Order #:													
Avoca Ar 72711												1						
Telephone:				Sampler Name(s): James Wilt James Wilts										(i				
Telephone:		<del></del>	····	Sampler Name(s):  and Signature(s):  Collection  Sample Containers  Type  Matrix  Type  Sample Containers  Fecal Collection  Type  Matrix  Type  Volume  Preservative  # 43.143.1458									'					
reicpitone.					and Signature(s):								SS	E			[ ]	
ESC Client Number:	1821	<del></del>	<del></del>	ano Signa	ture(s):		· · · · · · · · · · · · · · · · · · ·			_		55		īģ				
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Sample Ider	<del></del>	ļ	Sample Co		Collection		Sample Containers		S	(23)		車	ğ	g				
Identification	ESC Control #	Date	Time	Туре	Matrix	Туре	Volume	Preserva	ative	#	摄	ို	2	П				
Dose Tank/Effluent	1909020082	9-26-19	1530	GRAB	Water	teflon	150 ml	None, C	ool <sup>†</sup>	1	X							
Dose Tank/Effluent				GRAB	Water	Plastic	8 oz	H₂SO₄,p	H<2	1		X						
Dose Tank/Effluent				GRAB	Water	Plastic	1 qt	None, Cool <sup>†</sup>		1			Х					
Dose Tank/Effluent		1	1	GRAB	Water	Whirlpak	100 ml	NaS <sub>2</sub> O <sub>4</sub> C	Cool <sup>†</sup>	1				х			$\Box$	
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Relipquished By: (Signature and Printed	Name)	Date	Time	Received By: /Sig	nature and Printer	(Name)		Date	1 Time		'ueto	dv Se	3/6:					
Relinfulished By: (Signature and Printed Name)  Land Wilt Tames Wiltse		9-26-19	1-26-19 1640		,			Dele	11110		Custody Seals; Used? N Intact?							
Relinquished By: (Signature and Printed Name)		Date Time		Received By: (Signature and Printed Name)			Date	te Tim			round:							
Relinquished By: (Signature and Printed Name) Date Time		Time /	Received for Lab By: (Signature and Printed Name)			1.	_ Daie				Regular X  Were samples proper			Special v preserved:				
\(\lambda\)		ment	Received for Lab By: (Signature and Printed Name)			9-26-19	1640			Yes		X		No				
Comments:						Field Test	Time	Analyst Resi						Units				
					Analyst: Time:		pH: Temp.:	1535 1535	YEW I		7. : 25.	5.5 7.8 5.5 25.1		5	(C) °F			4
					Reading:		DO:	1 = - /						<i>w</i>			<u> </u>	ᅱ
Cool all samples to 6 degrees C.					Units:		Debris:					$\Box$		$\Box$				
Cool an samples to 6 degrees C.							Chlorinated	? Yes No	)	]]	his	Doc	umer	nt is	Page	$\perp$	of <u>1</u>	

CVFORMS\CHAIN.XLS

NWA Utility Service
PO BOX 9299
FMATTEVILLE, AR
72703

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ADEQ Water DIVISION Permits Branch 5301 Northshore Drive-N. Little Rock, AR 72118-5317