

Koon, Nancy

From: Koon, Nancy on behalf of Water Permit Application
Sent: Thursday, June 9, 2022 10:00 AM
To: Tristan Daniel
Subject: FW: Ashgrove Cement, AFIN 41-00001; NPDES Permit Renewal AR 0042846
Attachments: Ashgrove Cement NPDES Permit Renewal Application.pdf

From: Pennyne Bray [<mailto:PBray@eccci.com>]
Sent: Thursday, June 9, 2022 8:42 AM
To: Water Permit Application
Cc: Brooks, Matthew (Ash Grove)
Subject: Ashgrove Cement, AFIN 41-00001; NPDES Permit Renewal AR 0042846

To Whom It May Concern;

Attached you will find the permit renewal application for the Ash Grove Cement Company Facility in Foreman, Arkansas. Due to the size of the document, I will submit the final attachment (Attachment H – 2021 CRH Annual Report) in a separate e-mail to follow this one. Please feel free to contact me with questions.

Sincerely,

*Pennyne L. Bray, REM, REPA
Environmental Director, Water
ECCI
13000 Cantrell Road
Little Rock, AR 72223
(501) 975-8100 - Phone
www.eccci.com*



NPDES PERMIT RENEWAL APPLICATION

AFIN: 41-00001, Permit Number AR0042846

For



A CRH COMPANY

ASH GROVE CEMENT COMPANY

434 Highway 108

Foreman, Arkansas 71836

PREPARED BY:



13000 Cantrell Road
Little Rock, Arkansas 72223
Telephone: (501) 975-8100

June 2022

**NPDES PERMIT RENEWAL APPLICATION
AFIN: 41-0000, PERMIT NUMBER AR0042846**

For



A CRH COMPANY

ASH GROVE CEMENT COMPANY
434 Highway 108
Foreman, Arkansas 71836

June 2022

PREPARED BY:

PENNYE L. BRAY, REM, REPA
ECCI, ENVIRONMENTAL DIRECTOR, WATER

REVIEWED BY:

RODNEY K. BREUER, P.E.
ECCI, VICE-PRESIDENT

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Attachment B: EPA NPDES Form 2C

Attachment C: Wastewater Process Flow Diagram

Attachment D: EPA Form 2F

Attachment E: Schematic showing “funnel” design for Outfall 002

Attachment F: Stormwater Site Map

Attachment G:PPS Forms

Attachment H: 2021 Annual Report (in lieu of Disclosure statement)

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Ash Grove Cement Company

NPDES Permit Renewal Application

1.0 INTRODUCTION

Ash Grove Cement Company in Foreman, Arkansas was issued NPDES Permit AR0042846 with an effective date of January 1, 2018. The permit is set to expire on December 31, 2022. Part III, Section D.10 of the permit requires the permittee to reapply and obtain a new permit to continue the regulated activity beyond the expiration date of the permit. A complete permit application is to be submitted to the Arkansas Department of Energy and Environment, Division of Environmental Quality (DEQ) at least 180 days prior to the permit expiration. This application fulfills this requirement.

2.0 FACILITY DESCRIPTION

The Ash Grove Cement facility is engaged in the production of Portland and masonry cement using raw materials quarried from the underlying geological strata. The operations at the facility are classified under Standard Industrial Classification (SIC) Code 3241 (Hydraulic Cement Manufacturing).

The total acreage of the facility is in excess of 2,300 acres. The active plant site, including the quarry consists of approximately 1,300 acres. The facility is located in Section 28, Township 32 West, Range 12 South in Foreman, Little River County, Arkansas. The Ash Grove facility includes raw materials handling and storage areas, several buildings, structures, rotary kiln, process mills, storage areas, an office and maintenance building, roadways and a quarry.

Operations at the facility were initiated in 1958. Ash Grove utilizes hazardous waste derived fuel (HWDF) to supplement traditional fossil fuels. The facility is permitted by the Arkansas Department of Energy and Environment-Division of Environmental Quality (DEQ) as a hazardous waste storage and treatment facility (TSD), Hazardous Waste Division Permit 21-H-RN2.

The facility operates a quarry for the mining of various calcareous minerals, which are used in the production process.

The manufacturing facility utilizes a dry process, PH/PC system. Chalk is stored within the new raw material storage building located on the eastern side of the plant area. In addition to the raw material storage building, the facility includes four raw material storage bins, a roller mill, a dry kiln (replaced the three wet kilns), a limestone bin, gypsum bins, kiln feed blending and storage silo, and associated conveyors and material handling equipment. The facility utilizes fossil fuels, hazardous and non-hazardous fuels, coal, petroleum coke, natural gas, fuel oil, used oils, liquid derived fuels (LWDF), and solid waste-derived fuels (SWDF) as the primary fuel sources. The facility also uses bulk waste derived fuels (BWDF), both hazardous and non-hazardous, including spent pot-liner from the aluminum industry.

Ash Grove also operates a landfill for the disposal of cement kiln dust (CKD) generated as a by-product of the cement making process. The CKD is finely ground and partially calcined raw feed that becomes entrained in the combustion gases. The CKD is captured within the main and bypass baghouses. The CKD that is disposed of in the onsite landfill is wetted in the pug mill prior to transfer to the landfill. The landfill is permitted as a class 3N landfill.

3.0 AQUEOUS WASTESTREAMS

The process related wastewater associated with industrial operations at the facility are regulated by Federal Effluent Guidelines promulgated under 40 CFR Part 411 (Cement Manufacturing), Subpart C (materials storage piles runoff subcategory).

The facility discharge is permitted under the terms and conditions of NPDES Permit AR0042846 to discharge various facility related wastewaters via Outfalls, 001, 002 and 003 as described below. The facility has one outfall that is composed entirely of stormwater. The outfall, designated as SW-002, is composed of drainage from the SE portion of the quarry operations. Outfall 002 is comprised entirely of stormwater runoff from the facility. No process wastewater is discharged via Outfall 002.

3.1 Description of Facility Discharges

The facility utilizes three ponds to manage the process wastewater sources as well as the stormwater that comes into contact with the industrial activities at the facility.

3.1.1 Outfall 001 Waste Streams

Outfall 001 is the discharge point from the Fishing Lake. The water within the Fishing Lake is comprised of the active quarry dewatering and stormwater runoff from the west end of the quarry. It should be noted, that Ash Grove has sealed the discharge pipe from this outfall. In general, this outfall will function as a “no discharge” outfall. However, they are not requesting removal of the outfall in the event that circumstances require re-opening the outfall.

3.1.2 Outfall 002 Waste Streams

The discharge from Outfall 002 consists of the discharge from the Coal Sedimentation Pond. The water within the Coal Sedimentation Pond is comprised of the stormwater runoff from the waste fuels area and the north half of the inactive CKD landfill.

3.1.3 Outfall 003 Waste Streams

Outfall 003 is the discharge from the Process Water Pond. The majority of the facility industrial activities drain to this pond. The wastewater sources that drain to this pond include stormwater runoff from the former coal processing area and the coal washout pond, the sanitary wastewater treatment lagoon effluent, the sanitary wastewater package plant for the lab and office building, wash down water from the plant process area, salvage storage area, the inactive Cement Kiln Dust landfill area, the truck washout water, and the active Cement Kiln Dust (CKD) landfill leachate sedimentation pond.

3.1.4 Outfall SW-002 (Stormwater only)

The SW-002 drainage area includes approximately 45 acres along the eastern property boundary. The stormwater leaves the quarry at the SE corner of the current quarry where rock is exposed. It exits at the SE corner of the property further south from the active quarry (SW-002). Because this outfall is composed of stormwater only, the discharge is covered under the IGP ARR00A1101. The discharge flows into Sterling Branch, thence Walnut Bayou, ultimately discharging into the Red River.

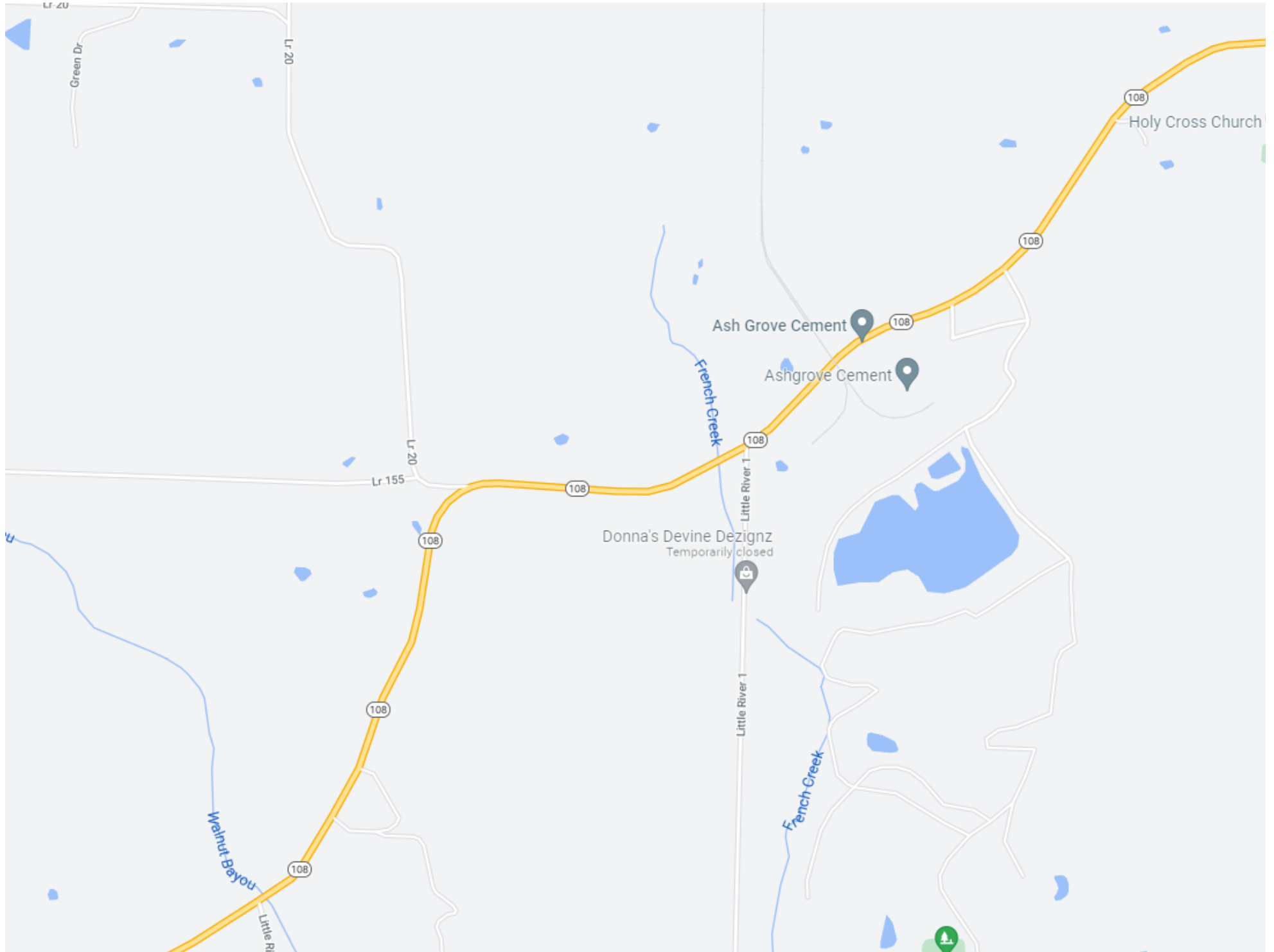
4.0 WASTEWATER TREATMENT SYSTEM

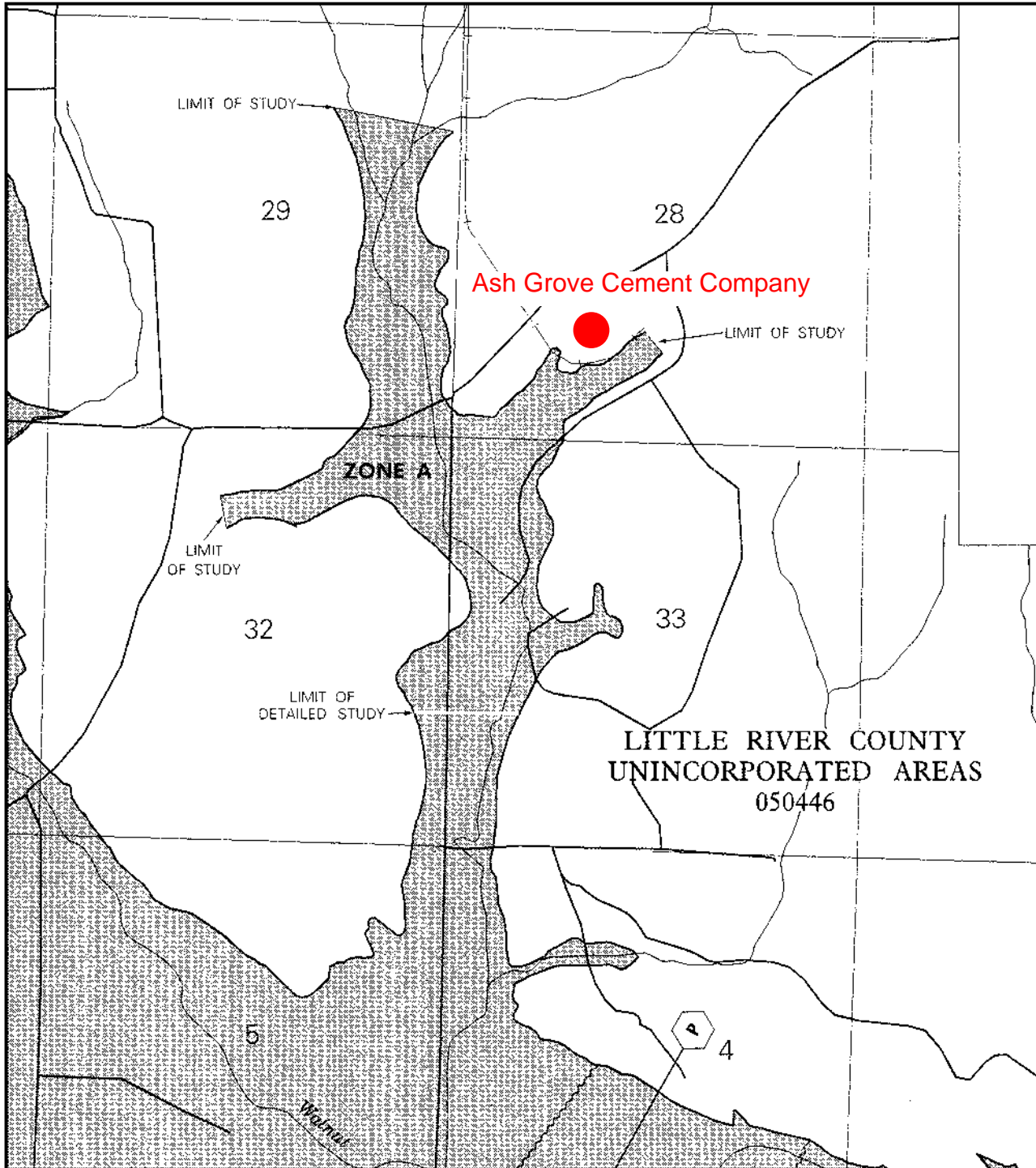
The primary treatment at the facility is sedimentation provided by the large ponds. However, prior to entering the Process water pond, the sanitary wastewater generated in the facility Core Building (lab and Offices) is treated in an AEROMIX Model A-5M24-SHC prefabricated steel extended aeration complete mix activated sludge treatment system. The sanitary wastewater flows from the Core Building through a 4-inch diameter pipe to a grinder/lift station to a manual bar screen for primary screening. The wastewater then enters a 5,000-gallon aeration chamber. The aeration chamber is provided air by two blower units, each with the capacity of 44 scfm at 5 psig and powered by a 2.4 horsepower TEFC motor. The coarse bubble diffused aeration is designed for 20 scfm. The wastewater then flows into an 833-gallon hopper bottom gravity clarifier. The clarifier effluent then flows through the clarifier outlet trough to a 130-gallon chlorine contact tank integral to the clarifier prior to discharge over a 22-1/2° effluent flow measuring weir through a 4-inch diameter outlet flange to a 4-inch diameter gravity flow sewer line to discharge into the process wastewater pond where settling takes place prior to discharge. The discharge from the process water pond exits the facility via Outfall 003. The sludge from the clarifier is then pumped via an airlift assembly to a 950-gallon sludge chamber/aerobic digester integral to the aeration tank. The chamber is equipped with a 2-inch diameter supernatant decant airlift assembly and a coarse bubble diffused aeration system designed for 4 scfm.

The clarifier is equipped with a 2-1/2-inch diameter airlift sludge return pump and piping and a 2-inch diameter airlift scum return pump and piping. The clarifier outlet trough is equipped with adjustable v-notched weir plates.

It is expected that any sludge removed from the system will be disposed of in the Upper Southwest Regional Landfill.

Currently, Outfall 002 discharges directly from a pipe. The facility is proposing to add a metal funnel to the end of the pipe to facilitate the measurement of the flow using a bucket and stop watch method rather than the current method of calculating the flow using the velocity of discharge through the pipe with a cross-sectional area of the pipe. Currently, there is no really good way to get the velocity through the pipe. Consequently, Ash Grove believes the use of the funnel will provide more accurate readings.





APPROXIMATE SCALE IN FEET
 2000 0 2000

NATIONAL FLOOD INSURANCE PROGRAM

**FIRM
 FLOOD INSURANCE RATE MAP**

**LITTLE RIVER COUNTY,
 ARKANSAS AND
 INCORPORATED AREAS**

PANEL 200 OF 475
 (SEE MAP INDEX FOR PANELS NOT PRINTED)

CONTAINS: COMMUNITY	NUMBER	PANEL	SUFFIX
FOREMAN CITY OF LITTLE RIVER COUNTY	050446	0200	D
UNINCORPORATED AREAS	050446	0200	D

**MAP NUMBER
 05081C0200 D**

**EFFECTIVE DATE:
 JANUARY 7, 1998**



Federal Emergency Management Agency

This is an official copy of a portion of the above referenced flood map. It was extracted using F-MIT On-Line. This map does not reflect changes or amendments which may have been made subsequent to the date on the title block. For the latest product information about National Flood Insurance Program flood maps check the FEMA Flood Map Store at www.msc.fema.gov

Figure 3 - Site Location/Topographic Map
Foreman, Arkansas Quadrangle



ATTACHMENT 1
FORM 1



NPDES Individual Permit Application
Form 1

5301 Northshore Drive
North Little Rock, AR 72118-5317

PURPOSE OF THIS APPLICATION (check all that apply)

- INITIAL APPLICATION FOR NEW FACILITY
- INITIAL APPLICATION FOR EXISTING FACILITY
- MODIFICATION OF EXISTING PERMIT
- REISSUANCE (RENEWAL) OF EXISTING PERMIT
- CONSTRUCTION PERMIT

SECTION A - GENERAL INFORMATION

A.1. Legal Applicant Name: _____

A.2. Operator Type: _____

A.3. Corporation? Yes No → Skip to A.4

State of Incorporation: _____

Attach a Proof/Status of Good Standing from Arkansas Secretary of State and from the state of incorporation, if applicable.

A.4. Facility Name: _____

A.5. Is the applicant identified in A.1, the owner of the facility? Yes → Skip to A.6 No

Owner of the facility: _____

A.6. Is there an outstanding state construction permit for this facility that needs to be terminated?

Yes No → Skip to A.7

A state construction permit can be terminated by submitting Notice of Completion of Construction for State Construction Permits found through the link below:

<https://www.adeq.state.ar.us/water/permits/npdes/individual/pdfs/state-construction-permit-completion-of-construction.pdf>

NPDES Permit Number	AFIN	Facility Name	County

A.7. Indicate below any NPDES permits issued by DEQ to this facility, if applicable. (Check all that apply and list the corresponding permit number for each.)

NPDES permits issued by DEQ		
<input type="checkbox"/> NPDES Individual Discharge Permit AR00	<input type="checkbox"/> NPDES Non-Stormwater General Permit ARG	<input type="checkbox"/> NPDES Industrial Stormwater General Permit ARR00

A.8. List permit numbers and/or names of any permits issued by DEQ or EPA for an activity located in Arkansas that is presently held by the applicant or its parent or subsidiary corporation which are not listed above:

Permit Name	Permit Number	Held by

A.9. Is the facility required to file a disclosure statement? **CRH is a publicly trade company. The 2021 Annual Earning Report is attached.**
 Yes, one has been attached Exempt

The disclosure statement form may be obtained from the DEQ web site at:

https://www.adeq.state.ar.us/ADEQ_Disclosure_Statement.pdf

A.10. Facility Physical Location. Attach a location map.

Street address			
City or town	State	ZIP code	County

Front Door (gate) location of the facility.

Latitude:	°	'	”
Longitude:	°	'	”

A.11. Mailing Address for permit, DMR, and invoices (Street or Post Office Box):

Street Address			P.O. Box
City or town	State	ZIP code	

NPDES Permit Number	AFIN	Facility Name	County

A.12. Neighboring States Within 20 Miles of the permitted facility (Check all that apply):

- Louisiana Mississippi Missouri
 Oklahoma Tennessee Texas

A.13. Standard Industrial Classification (SIC) code and North America Industrial Classification System (NAICS) code for primary process and secondary process if applicable.

Primary SIC	Primary NAICS
Secondary SIC <input type="checkbox"/> N/A	Secondary NAICS <input type="checkbox"/> N/A

A.14. Responsible Official (as described on the last page of this application):

Name (First and Last)	Title
E-mail Address	Phone Number

A.15. Cognizant Official (Duly Authorized Representative as described on the last page of this application):

Name (First and Last)	Title
E-mail Address	Phone Number

A.16. Did a consulting firm prepare this application?

- Yes No → Skip to A.17

Contact Name (First and Last)	Title
Company Name	
E-mail Address	Phone Number
Street Address	
City or town	State ZIP Code

NPDES Permit Number	AFIN	Facility Name	County

A.17. Wastewater Operator Information

Name (First and Last)	License Number	Municipal Wastewater Operator Class	Industrial Wastewater Operator Class

NPDES Permit Number	AFIN	Facility Name	County

SECTION B - OUTFALL INFORMATION

B.1. Outfall Information (If more than two outfalls, attach additional pages)

Outfall								
Design Flow MGD				Highest Monthly Average flow over the last two years MGD				
End-of-Pipe Location:	Latitude:	_____ °	_____ ’	_____ ” N	Longitude:	_____ °	_____ ’	_____ ” W
Monitoring Location (If different from End- of-Pipe Location:	Latitude:	_____ °	_____ ’	_____ ” N	Longitude:	_____ °	_____ ’	_____ ” W
Name of Receiving Stream								
Treatment system (Include all components of the treatment system and attach a process flow diagram):								
How and where are effluent samples collected? Include a narrative description of where samples are collected relative to the treatment system.								
<input type="checkbox"/> Grab <input type="checkbox"/> Composite <input type="checkbox"/> Both								
How is flow measured and where (relative to the process flow diagram)?								
Is the outfall equipped with a diffuser?								
<input type="checkbox"/> Yes <input type="checkbox"/> No								
What is the diameter of the effluent pipe?								
_____ inches								

NPDES Permit Number	AFIN	Facility Name	County

Outfall								
Design Flow MGD				Highest Monthly Average flow over the last two years MGD				
End-of-Pipe Location:	Latitude:	____ °	____ ’	____ ” N	Longitude:	____ °	____ ’	____ ” W
Monitoring Location (If different from End- of-Pipe Location:	Latitude:	____ °	____ ’	____ ” N	Longitude:	____ °	____ ’	____ ” W
Name of Receiving Stream								
Treatment system (Include all components of the treatment system and attach a process flow diagram):								
How and where are effluent samples collected? Include a narrative description of where samples are collected relative to the treatment system.								
<input type="checkbox"/> Grab <input type="checkbox"/> Composite <input type="checkbox"/> Both								
How is flow measured and where?								
Is the outfall equipped with a diffuser?								
<input type="checkbox"/> Yes <input type="checkbox"/> No								
What is the diameter of the effluent pipe?								
inches								

Outfall 003 information included after page 17 of DEQ Form 1

NPDES Permit Number	AFIN	Facility Name	County

B.2. Describe how influent is collected and conveyed to the treatment system.

B.3. Are you a publicly owned treatment works?

Yes No → Skip to B.4

If “Yes”, complete the table below:

Pollutant	Maximum Daily Influent		Average Daily Influent		
	Value	Units	Value	Units	Number of Samples*
CBOD ₅ /BOD ₅					
TSS					
How and where were the influent samples collected? Include a narrative description of where samples are collected relative to the treatment system.					
<input type="checkbox"/> Grab <input type="checkbox"/> Composite <input type="checkbox"/> Both					

* At a minimum, influent testing data must be based on at least three samples taken within 4.5 years prior to the date of the permit application. Existing data may be used, if available, in lieu of sampling done solely for the purpose of this application

Attach the laboratory report for the CBOD₅/BOD₅ and TSS tests.

B.4. Attach a process flow diagram. The wastewater process flow diagram is attached

B.5. Attach a topographic map extending at least one mile beyond the property boundary with the discharge location(s) marked with this application.

B.6. Is the proposed or existing facility located above the 100-year flood level?

Yes No

If “No”, what measures are (or will be) used to protect the facility? _____

Has a FEMA map been submitted with a previous application?

Yes No

If “No”, a FEMA map must be submitted with this application as an attachment.

B.7. Population served for Municipal or Domestic Sewer Systems: _____

NPDES Permit Number	AFIN	Facility Name	County

B.8. Backup Power Generation for Treatment Plants

Are there any permanent backup generators? Yes No

If Yes, how many? _____ Total Horsepower (hp)? _____

If No, check all that apply.

- Portable generator is available.
- The WWTP does not require power to operate.
- Operations at the facility will cease if power is not available.
- The WWTP has sufficient capacity to hold influent until power is restored.
- Other, please explain. _____

NPDES Permit Number	AFIN	Facility Name	County

SECTION C - WASTE STORAGE AND DISPOSAL INFORMATION

C.1. Are solids/sludge produced at this facility?

Yes No → Skip to Section D

C.2. Do solids/sludge remain in treatment lagoon(s)?

Yes No → Skip to C.3

How many lagoon(s)? _____ How old is the lagoon(s)? _____

Has sludge depth been measured? Yes No

If yes, when was it measured (MM/YYYY)? _____ Average sludge depth? _____ ft.

If no, when will it be measured? _____

Has sludge ever been removed? Yes No

If yes, when was it removed (MM/YYYY)? _____

C.3. Are solids/sludge disposed at a landfill?

Yes No → Skip to C.4

Is the Landfill located in Arkansas? Yes No

If Yes, what is the DEQ solid waste permit issued to the landfill? Permit No. _____

If No, which state? State: _____

Provide the solid waste permit Permit No. _____

C.4. Are solids/sludge disposed by land application?

Yes No → Skip to C.5

Is the land application site located in Arkansas? Yes No

If Yes, what is the DEQ state permit issued to the land application site? _____

If No, what state and their state permit? State: _____ Permit No. _____

C.5. Are solids/sludge disposed by septic tank?

Yes No → Skip to C.6

Arkansas Department of Health Permit No. _____

NPDES Permit Number	AFIN	Facility Name	County

C.6. Are solids/sludge distributed and marketed?

Yes No → Skip to C.7

Company Name receiving solids/sludge		
E-mail Address		Phone Number
Street Address		
City or town	State	ZIP Code
Distributed by (check all that applies)		
<input type="checkbox"/> Pipe		
<input type="checkbox"/> Rail		
<input type="checkbox"/> Truck		
<input type="checkbox"/> Other		

C.7. Are solids/sludge disposed by sludge storage lagoon? (Lagoon for which the sole purpose is storing sludge):

Yes No → Skip to C.8

How many lagoon(s)? _____ How old is the lagoon(s)? _____ years

Total surface area of lagoon(s)? _____ acre

Has sludge depth been measured? Yes No

If yes, when was it measured (MM/YYYY)? _____ Average depth? _____ ft.

If no, when will it be measured? _____

Has sludge ever been removed? Yes No

If yes, when was it removed (MM/YYY)? _____

Does lagoon(s) have a liner? Yes No

C.8. Are solids/sludge disposed by incineration?

Yes No → Skip to C.9

Company Name	
E-mail Address	Phone Number

NPDES Permit Number	AFIN	Facility Name	County

Street Address		
City or town	State	ZIP Code

C.9. Are solids/sludge disposed by **Other** method? (Provide complete description)

NPDES Permit Number	AFIN	Facility Name	County

SECTION D - WATER SUPPLY

D.1. Are there any water supply sources which are downstream of the outfall location, i.e., those which could be affected by the discharge from this facility?

Yes No → Skip to Section E

D.2. Is the water supply source subsurface water?

Yes No → Skip to D.3

Private Well?

Yes No

Distance from discharge point: Within 5 miles Within 50 miles

Municipal Water Utility?

Yes No

City or town _____

Distance from discharge point: Within 5 miles Within 50 miles

D.3. Is the water supply source surface water

Yes No → Skip to D.4

Distance from discharge point: Within 5 miles Within 50 miles

D.4. **Other** (Provide complete description)

Distance from discharge point: Within 5 miles Within 50 miles

NPDES Permit Number	AFIN	Facility Name	County

SECTION E - TRUST FUND REQUIREMENTS

E.1. Is the facility considered a “nonmunicipal domestic sewage treatment works” (NDSTW) as defined in [Ark. Code Ann. 8-4-203\(b\)](#)?

Yes No

If “yes”, a completed NDSTW trust fund form must be submitted. The trust fund form may be obtained from the DEQ web site at:

<http://www.adeg.state.ar.us/water/permits/npdes/individual/pdfs/ndstw-trust-fund-certification-form.pdf>

NPDES Permit Number	AFIN	Facility Name	County

SECTION F - INDUSTRIAL ACTIVITY

F.1. Is this facility subject to an effluent limit guideline?

Yes No → Skip to Section G

F.2. 40 CFR reference for applicable effluent limit guidelines _____

List all applicable Subpart(s) _____

F.3. Description of all operations at this facility including primary products or services (attach additional sheets if necessary):

NPDES Permit Number	AFIN	Facility Name	County

SECTION G - MODIFICATION AND CONSTRUCTION INFORMATION

G.1. Was “Modification of existing permit” or “Construction permit” checked off on **Purpose of this Application?** (Above Section A - General Information)

Yes No → Skip to Section H

G.2. List proposed changes at the facility.

G.3. If this application is for a State Construction permit, please note that, in accordance with Rule 6.202, plans and specifications and design calculations must be stamped and signed by a **Registered Professional Engineer in the State of Arkansas**. The basic design criteria for wastewater treatment plants in the State of Arkansas should be based on the latest edition of the “Recommended Standards for Sewage Works,” published by the Great Lakes-Upper Mississippi Board of State Sanitary Engineers known as 10 States Standards, with few modifications. Exception to the criteria will only be approved by DEQ when fully justified. A comprehensive list of exceptions to 10 State Standards is listed in Rule 6.202(B) and can be viewed here: https://www.adeg.state.ar.us/regs/files/reg06_final_150918.pdf

Checklist	
<input type="checkbox"/>	Professional Engineer registered in the State of Arkansas
<input type="checkbox"/>	Design calculations signed and stamped, attached
<input type="checkbox"/>	Plans and drawing signed and stamped, attached
<input type="checkbox"/>	Specifications meet the 10 States Standards, except for those that are fully justified attached

G.4. In the case of construction, will the construction disturb one acre or more?

Yes No → Skip to Section H

If the area disturbed is more than one acre up to, but not including, five acres, the facility is automatically covered under the Construction Stormwater General Permit ARR150000 and must comply with the terms and conditions of that permit.

If the area disturbed is five acres or more, a Construction Stormwater General Permit ARR150000 must be obtained by submitting a Notice of Intent and a Stormwater Pollution Prevention Plan to DEQ. The application information can be found here:

<https://www.adeg.state.ar.us/water/permits/npdes/stormwater/>

NPDES Permit Number	AFIN	Facility Name	County

SECTION H: CHECKLIST AND SIGNATORY REQUIREMENTS

H.1. Mark the sections of Form 1 below that have been completed and are being submitted as part of the application. For each section, specify any attachments that will be enclosed. Note that not all applicants are required to provide all attachments.

Form 1 Section	Attachments
<input type="checkbox"/> Section A – General Information	<input type="checkbox"/> w/Proof of Good Standing from Arkansas Secretary of State <input type="checkbox"/> w/Proof of Good Standing from State of Incorporation <input type="checkbox"/> w/Notice of Completion of Construction for State Construction Permits <input type="checkbox"/> w/Disclosure Statement <input type="checkbox"/> w/location map
<input type="checkbox"/> Section B – Outfall Information	<input type="checkbox"/> w/additional outfall information <input type="checkbox"/> w/topographic map extending at least one mile beyond the property boundary with the discharge location marked <input type="checkbox"/> w/FEMA flood plain map <input type="checkbox"/> w/process flow diagram
<input type="checkbox"/> Section C – Waste Storage and Disposal Information	
<input type="checkbox"/> Section D – Water Supply	
<input type="checkbox"/> Section E – Trust Fund Requirements	<input type="checkbox"/> w/Nonmunicipal Domestic Sewage Treatment Works Trust Fund Certification form
<input type="checkbox"/> Section F – Industrial Activity	
<input type="checkbox"/> Section G – Modification and Construction Information	<input type="checkbox"/> w/design calculations <input type="checkbox"/> w/design specifications <input type="checkbox"/> w/plans and drawing

H.2. Is the submittal of this Form 1 for the modification of an existing permit?

- Yes → Skip to H.3, EPA Form Not Required No → Additional EPA Forms (in addition to this Form 1) are required for processing your application:

Check all boxes that are applicable

- EPA Form 2A – Municipal Dischargers
- EPA Form 2B – Concentrated Animal Feeding Operations
- EPA Form 2C – Existing Manufacturing, Commercial, Mining, and Silvicultural Operations
- EPA Form 2D – New Sources and New Dischargers Application for Permit to Discharge Process Wastewater
- EPA Form 2E – Facilities Which Do Not Discharge Process Wastewater (i.e. domestic, non-contact cooling water, etc)
- EPA Form 2F – Application for Permit to Discharge Stormwater Dischargers Associated with Industrial Activity

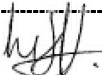
NPDES Permit Number	AFIN	Facility Name	County
AR0042846	41-00001	Ash Grove Cement Company, Foreman Plant	Little River

H.3. Cognizant Official (Duly Authorized Representative)

40 C.F.R. 122.22(b) states that all reports required by the permit, or other information requested by the Director, shall be signed by the applicant (or person authorized by the applicant) or by a duly authorized representative of that person. A person is duly authorized representative only if:

- (1) The authorization is made in writing by the applicant (or person authorized by the applicant);
- (2) The authorization specifies either an individual or a position having responsibility for the overall operation of the regulated facility or activity responsibility, or an individual or position having overall responsibility for environmental matters for the company.

The applicant hereby designates the following person as a Cognizant Official, or duly authorized representative, for signing reports, etc., including Discharge Monitoring Reports (DMR) required by the permit, and other information requested by the Director:

Print name (First and Last) Marco Gonzales	Official title Plant Manager
Signature 	Date signed June 7, 2022
	Telephone number (870) 542-3030

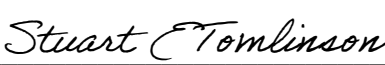
H.4. Responsible Official

“By my signature below, I certify that I met the requirement to be the signatory as defined in 40 C.F.R. § 122.22.”

“By my signature below, I certify that the cognizant official designated above is qualified to act as a duly authorized representative under the provisions of 40 CFR 122.22(b).” NOTE: If no duly authorized representative is designated in this section, the Division considers the applicant to be the responsible official for the facility and only reports, etc., signed by the applicant will be accepted by the Division.

“By my signature below, I certify that, if this facility is a corporation, it is registered with the Secretary of State in Arkansas.”

“I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information including the possibility of fine and imprisonment for knowing violations. I further certify under penalty of law that all analyses reported as less than detectable in this application or attachments thereto were performed using the EPA approved test method having the lowest detection limit for the substance tested.”

Print name (First and Last) Stuart Tomlinson	Official title Vice President of Manufacturing
Signature 	Date signed June 7, 2022
	Telephone number (913) 319-6040

Form 1 - Supplemental information

Outfall 003								
<u>Design Flow</u> <u>MGD</u>				<u>Highest Average Flow over the last two years</u>				
				<u>MGD</u>				
End-of-Pipe Location:	Latitude:	33°	41'	15.3"N	Longitude:	94°	25'	28.7"W
Monitoring Location (if different from End-of-Pipe Location:	Latitude:				Longitude:			
Name of Receiving Stream								
Unnamed tributary to French Creek, thence to French Creek, thence to Walnut Bayou, thence to the Red River in Segment 1B of the Red River Basin								
Treatment system (Include all components of the treatment system and attach a process flow diagram):								
Settling Pond								
How and where are effluent samples collected? Include a narrative description of where samples are collected relative to the treatment system.								
<input checked="" type="checkbox"/> Grab <input type="checkbox"/> Composite <input type="checkbox"/> Both								
Samples are collected at the end of the discharge pipe								
How is flow measured and where?								
Flow is determined using a rectangular weir								
Is the outfall equipped with a diffuser?								
Yes <input checked="" type="checkbox"/> No								
What is the diameter of the effluent pipe?								
The weir length is 62"								

NPDES Permit Renewal Application
 Ash Grove Cement Company
 AFIN 41-00001; NPDES: AR0042846

ADEQ Form 1. A8

Permit Name	Permit Number	Held By
Title V Air Operating Permit	0075-AOP-R23	Applicant
Hazardous Waste EPA ID	ARD981512270	Applicant
Hazardous Waste Permit	21H-RN2	Applicant
Waste Tire Processer Permit	0016-SWTP-R1 - voided	Ash Grove Cement - Quarry (AFIN 41-0069)
Class III Landfill Permit	0302-53N	Ash Grove Cement Landfill (AFIN 41-00230)
RST	41000002	Ash Grove Cement Co. (AFIN 41-00253)
Arkansas Industrial General Stormwater Permit	ARR00A1101	Ash Grove Cement Landfill (AFIN 41-00230)



Search Incorporations, Cooperatives, Banks and Insurance Companies

This is only a preliminary search and no guarantee that a name is available for initial filing until a confirmation has been received from the Secretary of State after filing has been processed. Please review our [NAME AVAILABILITY GUIDELINES HERE](#) prior to searching for a new entity name.

[Printer Friendly Version](#)

LLC Member information is now confidential per Act 865 of 2007

Use your browser's back button to return to the Search Results

[Begin New Search](#)

For service of process contact the [Secretary of State's office](#).

Corporation Name	ASH GROVE CEMENT COMPANY
Fictitious Names	ASH GROVE FOREMAN CEMENT COMPANY
Filing #	100057377
Filing Type	Foreign For Profit Corporation
Filed under Act	For Bus Corp; 958 of 1987
Status	Good Standing
Principal Address	
Reg. Agent	CORPORATION SERVICE COMPANY
Agent Address	300 SPRING BUILDING, SUITE 900 300 S. SPRING STREET LITTLE ROCK, AR 72201
Date Filed	12/16/1986
Officers	SEE FILE, Incorporator/Organizer GARY P. HICKMAN , Tax Preparer SERGE . SCHMIDT , President DAVID G. MEYER , Vice-President KIM R. BEACHNER , Treasurer
Foreign Name	N/A
Foreign Address	1209 ORANGE ST., WILMINGTON, DE 19801 (PREF \$10.00)

X,

State of Origin

DE

[Purchase a Certificate of Good Standing for this Entity.](#)

[Pay Franchise Tax for this corporation](#)

ATTACHMENT B - OUTFALL 001

Water Permits Division







Application Form 2C

Existing Manufacturing, Commercial, Mining, and Silvicultural Operations

NPDES Permitting Program

Note: Complete this form *and* Form 1 if your facility is an existing manufacturing, commercial, mining, or silvicultural facility that currently discharges process wastewater.

EPA Identification Number		NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company		Form Approved 03/05/19 OMB No. 2040-0004	
Form 2C NPDES		U.S. Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater EXISTING MANUFACTURING, COMMERCIAL, MINING, AND SILVICULTURE OPERATIONS				
SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))						
Outfall Location	1.1	Provide information on each of the facility's outfalls in the table below.				
		Outfall Number	Receiving Water Name	Latitude		Longitude
		001	unnamed trib. to French Crk 	33°	41' 9.2"	94° 25' 28.4"
		002	unnamed trib. to French Crk 	33°	41' 29.6"	94° 25' 36.3"
		003	unnamed trib. to French Crk 	33°	41' 15.3"	94° 25' 28.7"
SECTION 2. LINE DRAWING (40 CFR 122.21(g)(2))						
Line Drawing	2.1	Have you attached a line drawing to this application that shows the water flow through your facility with a water balance? (See instructions for drawing requirements. See Exhibit 2C-1 at end of instructions for example.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No				
SECTION 3. AVERAGE FLOWS AND TREATMENT (40 CFR 122.21(g)(3))						
Average Flows and Treatment	3.1	For each outfall identified under Item 1.1, provide average flow and treatment information. Add additional sheets if necessary.				
		Outfall Number 001				
		Operations Contributing to Flow				
		Operation	Average Flow			
		Active Quarry Dewatering	variable mgd			
		Stormwater runoff from the west end of the quarry	variable mgd			
		Fishing Lake overflow	variable mgd			
			mgd			
		Treatment Units				
		Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge		
		settling	1U	4A		

EPA Identification Number		NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Form Approved 03/05/19 OMB No. 2040-0004		
Average Flows and Treatment Continued	3.1 cont.	**Outfall Number** 002				
		Operations Contributing to Flow				
		Operation		Average Flow		
		stormwater runoff from the waste fuels area and		variable mgd		
		the north half of the CKD landfill		mgd		
				mgd		
				mgd		
		Treatment Units				
		Description (include size, flow rate through each treatment unit, retention time, etc.)		Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge	
		settling pond		1U	4A	
		Outfall Number 003				
		Operations Contributing to Flow				
		Operation		Average Flow		
		stormwater runoff from former coal processing area		variable mgd		
		coal washout pond, process area washdown		variable mgd		
		raw materials, salvage storage areas, truck washout		variable mgd		
		CKD leachate and runoff, non-contact cooling water		variable mgd		
Treatment Units						
Description (include size, flow rate through each treatment unit, retention time, etc.)		Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge			
settling		1U	4A			
additional page for 003 attached						
System Users	3.2	Are you applying for an NPDES permit to operate a privately owned treatment works? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 4.				
	3.3	Have you attached a list that identifies each user of the treatment works? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				

EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Form Approved 03/05/19 OMB No. 2040-0004
Average Flows and Treatment Continued	3.1 cont.	**Outfall Number** 003 cont _____	
	Operations Contributing to Flow		
	Operation	Average Flow	
	sanitary wastewater	0.005 mgd	
		mgd	
		mgd	
		mgd	
	Treatment Units		
	Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge
	screening	1T	4A
	activated sludge	3A	
	disinfection	2F	
	settling	1U	
	Outfall Number _____		
	Operations Contributing to Flow		
	Operation	Average Flow	
		mgd	
		mgd	
		mgd	
		mgd	
Treatment Units			
Description (include size, flow rate through each treatment unit, retention time, etc.)	Code from Table 2C-1	Final Disposal of Solid or Liquid Wastes Other Than by Discharge	
System Users	3.2	Are you applying for an NPDES permit to operate a privately owned treatment works? <input type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 4.	
	3.3	Have you attached a list that identifies each user of the treatment works? <input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION 4. INTERMITTENT FLOWS (40 CFR 122.21(g)(4))

Intermittent Flows	4.1	Except for storm runoff, leaks, or spills, are any discharges described in Sections 1 and 3 intermittent or seasonal? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 5.						
	4.2	Provide information on intermittent or seasonal flows for each applicable outfall. Attach additional pages, if necessary.						
		Outfall Number	Operation (list)	Frequency		Flow Rate		Duration
				Average Days/Week	Average Months/Year	Long-Term Average	Maximum Daily	
		001	Quarry Dewatering	NA days/week	6 months/year	0.083 mgd	NA mgd	NA days
				days/week	months/year	mgd	mgd	days
				days/week	months/year	mgd	mgd	days
		002	Materials Storage	NA days/week	8 months/year	0.02 mgd	NA mgd	NA days
				days/week	months/year	mgd	mgd	days
				days/week	months/year	mgd	mgd	days
	003	Process Water	NA days/week	4 months/year	0.112 mgd	NA mgd	NA days	
		Landfill Runoff	NA days/week	4 months/year	0.01 mgd	NA mgd	NA days	
			days/week	months/year	mgd	mgd	days	

SECTION 5. PRODUCTION (40 CFR 122.21(g)(5))

Applicable ELGs	5.1	Do any effluent limitation guidelines (ELGs) promulgated by EPA under Section 304 of the CWA apply to your facility? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 6.					
	5.2	Provide the following information on applicable ELGs.					
		ELG Category	ELG Subcategory			Regulatory Citation	
		Cement Manufacturing	Materials Storage Piles Runoff			411 Subpart C	
Production-Based Limitations	5.3	Are any of the applicable ELGs expressed in terms of production (or other measure of operation)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 6.					
	5.4	Provide an actual measure of daily production expressed in terms and units of applicable ELGs.					
		Outfall Number	Operation, Product, or Material			Quantity per Day	Unit of Measure

SECTION 6. IMPROVEMENTS (40 CFR 122.21(g)(6))

Upgrades and Improvements	6.1	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 6.3.			
	6.2	Briefly identify each applicable project in the table below.			
		Brief Identification and Description of Project	Affected Outfalls (list outfall number)	Source(s) of Discharge	Final Compliance Dates
				Required	Projected
	6.3	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? <i>(optional item)</i> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Not applicable			

SECTION 7. EFFLUENT AND INTAKE CHARACTERISTICS (40 CFR 122.21(g)(7))

Effluent and Intake Characteristics	See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.				
	Table A. Conventional and Non-Conventional Pollutants				
	7.1	Are you requesting a waiver from your NPDES permitting authority for one or more of the Table A pollutants for any of your outfalls? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.3.			
	7.2	If yes, indicate the applicable outfalls below. Attach waiver request and other required information to the application. Outfall Number _____ Outfall Number _____ Outfall Number _____			
	7.3	Have you completed monitoring for all Table A pollutants at each of your outfalls for which a waiver has not been requested and attached the results to this application package? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No; a waiver has been requested from my NPDES permitting authority for all pollutants at all outfalls.			
	Table B. Toxic Metals, Cyanide, Total Phenols, and Organic Toxic Pollutants				
	7.4	Do any of the facility's processes that contribute wastewater fall into one or more of the primary industry categories listed in Exhibit 2C-3? (See end of instructions for exhibit.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.8.			
	7.5	Have you checked "Testing Required" for all toxic metals, cyanide, and total phenols in Section 1 of Table B? <input type="checkbox"/> Yes <input type="checkbox"/> No			
	7.6	List the applicable primary industry categories and check the boxes indicating the required GC/MS fraction(s) identified in Exhibit 2C-3.			
		Primary Industry Category	Required GC/MS Fraction(s) (Check applicable boxes.)		
		<input type="checkbox"/> Volatile	<input type="checkbox"/> Acid	<input type="checkbox"/> Base/Neutral	<input type="checkbox"/> Pesticide
		<input type="checkbox"/> Volatile	<input type="checkbox"/> Acid	<input type="checkbox"/> Base/Neutral	<input type="checkbox"/> Pesticide
		<input type="checkbox"/> Volatile	<input type="checkbox"/> Acid	<input type="checkbox"/> Base/Neutral	<input type="checkbox"/> Pesticide

EPA Identification Number		NPDES Permit Number	Facility Name	Form Approved 03/05/19 OMB No. 2040-0004	
		AR0042846	Ash Grove Cement Company		
Effluent and Intake Characteristics Continued	7.7	Have you checked "Testing Required" for all required pollutants in Sections 2 through 5 of Table B for each of the GC/MS fractions checked in Item 7.6? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
	7.8	Have you checked "Believed Present" or "Believed Absent" for all pollutants listed in Sections 1 through 5 of Table B where testing is not required? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	7.9	Have you provided (1) quantitative data for those Section 1, Table B, pollutants for which you have indicated testing is required or (2) quantitative data or other required information for those Section 1, Table B, pollutants that you have indicated are "Believed Present" in your discharge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	7.10	Does the applicant qualify for a small business exemption under the criteria specified in the instructions? <input type="checkbox"/> Yes → Note that you qualify at the top of Table B, then SKIP to Item 7.12. <input checked="" type="checkbox"/> No			
	7.11	Have you provided (1) quantitative data for those Sections 2 through 5, Table B, pollutants for which you have determined testing is required or (2) quantitative data or an explanation for those Sections 2 through 5, Table B, pollutants you have indicated are "Believed Present" in your discharge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Table C. Certain Conventional and Non-Conventional Pollutants				
	7.12	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed on Table C for all outfalls? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	7.13	Have you completed Table C by providing (1) quantitative data for those pollutants that are limited either directly or indirectly in an ELG and/or (2) quantitative data or an explanation for those pollutants for which you have indicated "Believed Present"? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Table D. Certain Hazardous Substances and Asbestos				
	7.14	Have you indicated whether pollutants are "Believed Present" or "Believed Absent" for all pollutants listed in Table D for all outfalls? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	7.15	Have you completed Table D by (1) describing the reasons the applicable pollutants are expected to be discharged and (2) by providing quantitative data, if available? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No			
	Table E. 2,3,7,8-Tetrachlorodibenzo-p-Dioxin (2,3,7,8-TCDD)				
	7.16	Does the facility use or manufacture one or more of the 2,3,7,8-TCDD congeners listed in the instructions, or do you know or have reason to believe that TCDD is or may be present in the effluent? <input type="checkbox"/> Yes → Complete Table E. <input checked="" type="checkbox"/> No → SKIP to Section 8.			
7.17	Have you completed Table E by reporting <i>qualitative</i> data for TCDD? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
SECTION 8. USED OR MANUFACTURED TOXICS (40 CFR 122.21(g)(9))					
Used or Manufactured Toxics	8.1	Is any pollutant listed in Table B a substance or a component of a substance used or manufactured at your facility as an intermediate or final product or byproduct? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 9.			
	8.2	List the pollutants below.			
		1. The facility uses Hazardous Waste	4. which may contain any of the	7. and stored in controlled areas	
		2. derived fuel (HWDF) as a	5. compounds in Table B. However,	8. and would not be expected to be	
	3. supplemental fuel source	6. the substances are used and used	9. present in the discharge.		

SECTION 9. BIOLOGICAL TOXICITY TESTS (40 CFR 122.21(g)(11))

Biological Toxicity Tests	9.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made within the last three years on (1) any of your discharges or (2) on a receiving water in relation to your discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 10.			
	9.2	Identify the tests and their purposes below.			
		Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?	Date Submitted
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
				<input type="checkbox"/> Yes <input type="checkbox"/> No	
		<input type="checkbox"/> Yes <input type="checkbox"/> No			

SECTION 10. CONTRACT ANALYSES (40 CFR 122.21(g)(12))

Contract Analyses	10.1	Were any of the analyses reported in Section 7 performed by a contract laboratory or consulting firm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 11.			
	10.2	Provide information for each contract laboratory or consulting firm below.			
			Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
		Name of laboratory/firm	Arkansas Analytical		
		Laboratory address	8100 National Drive Little Rock, Arkansas 72209		
		Phone number	(501) 455-6118		
Pollutant(s) analyzed	ALL				

SECTION 11. ADDITIONAL INFORMATION (40 CFR 122.21(g)(13))

Additional Information	11.1	Has the NPDES permitting authority requested additional information? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 12.			
	11.2	List the information requested and attach it to this application.			
		1.	4.		
		2.	5.		
	3.	6.			

SECTION 12. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement

12.1	In Column 1 below, mark the sections of Form 2C that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.	
	Column 1	Column 2
	<input checked="" type="checkbox"/> Section 1: Outfall Location	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/> Section 2: Line Drawing	<input checked="" type="checkbox"/> w/ line drawing <input type="checkbox"/> w/ additional attachments
	<input checked="" type="checkbox"/> Section 3: Average Flows and Treatment	<input type="checkbox"/> w/ attachments <input type="checkbox"/> w/ list of each user of privately owned treatment works
	<input checked="" type="checkbox"/> Section 4: Intermittent Flows	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/> Section 5: Production	<input type="checkbox"/> w/ attachments
	<input checked="" type="checkbox"/> Section 6: Improvements	<input type="checkbox"/> w/ attachments <input type="checkbox"/> w/ optional additional sheets describing any additional pollution control plans
	<input checked="" type="checkbox"/> Section 7: Effluent and Intake Characteristics	<input type="checkbox"/> w/ request for a waiver and supporting information <input type="checkbox"/> w/ explanation for identical outfalls
		<input type="checkbox"/> w/ small business exemption request <input type="checkbox"/> w/ other attachments
		<input checked="" type="checkbox"/> w/ Table A <input checked="" type="checkbox"/> w/ Table B
		<input checked="" type="checkbox"/> w/ Table C <input checked="" type="checkbox"/> w/ Table D
	<input checked="" type="checkbox"/> Section 8: Used or Manufactured Toxics	<input type="checkbox"/> w/ attachments <input type="checkbox"/> w/ analytical results as an attachment
	<input checked="" type="checkbox"/> Section 9: Biological Toxicity Tests	<input type="checkbox"/> w/ attachments
<input checked="" type="checkbox"/> Section 10: Contract Analyses	<input type="checkbox"/> w/ attachments	
<input checked="" type="checkbox"/> Section 11: Additional Information	<input type="checkbox"/> w/ attachments	
<input checked="" type="checkbox"/> Section 12: Checklist and Certification Statement	<input type="checkbox"/> w/ attachments	
12.2	Certification Statement	
	<i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i>	
	Name (print or type first and last name)	Official title
Stuart Tomlinson	Vice President of Manufacturing	
Signature	Date signed	
<i>Stuart Tomlinson</i>	June 7, 2022	

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EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 001
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TABLE A. CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(iii))¹

Pollutant	Waiver Requested (if applicable)	Units (specify)	Effluent				Intake (Optional)	
			Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
<input type="checkbox"/> Check here if you have applied to your NPDES permitting authority for a waiver for all of the pollutants listed on this table for the noted outfall.								
1. Biochemical oxygen demand (BOD ₅)	<input type="checkbox"/>	Concentration mg/L	ND	ND		1		
		Mass						
2. Chemical oxygen demand (COD)	<input type="checkbox"/>	Concentration mg/L	22.8	22.8		1		
		Mass						
3. Total organic carbon (TOC)	<input type="checkbox"/>	Concentration mg/L	5.49	5.49		1		
		Mass						
4. Total suspended solids (TSS)	<input type="checkbox"/>	Concentration mg/L	4	4	2.18	24		
		Mass						
5. Ammonia (as N)	<input type="checkbox"/>	Concentration mg/L	ND	ND		1		
		Mass						
6. Flow	<input type="checkbox"/>	Rate MGD	0.92	0.65	0.16	24		
7. Temperature (winter)	<input type="checkbox"/>	°C	**			0		
Temperature (summer)	<input type="checkbox"/>	°C	26.2			1		
pH (minimum)	<input type="checkbox"/>	Standard units s.u.	7.39			24		
pH (maximum)	<input type="checkbox"/>	Standard units s.u.	9.1			24		

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 001
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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
<input type="checkbox"/> Check here if you qualify as a small business per the instructions to Form 2C and, therefore, do not need to submit quantitative data for any of the organic toxic pollutants in Sections 2 through 5 of this table. Note, however, that you must still indicate in the appropriate column of this table if you believe any of the pollutants listed are present in your discharge.											
Section 1. Toxic Metals, Cyanide, and Total Phenols											
1.1 Antimony, total (7440-36-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.2 Arsenic, total (7440-38-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	mg/L	0.547	0.547	1			
1.3 Beryllium, total (7440-41-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.4 Cadmium, total (7440-43-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.5 Chromium, total (7440-47-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.6 Copper, total (7440-50-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.7 Lead, total (7439-92-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.8 Mercury, total (7439-97-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.9 Nickel, total (7440-02-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.10 Selenium, total (7782-49-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.11 Silver, total (7440-22-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
1.12 Thallium, total (7440-28-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.13 Zinc, total (7440-66-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.14 Cyanide, total (57-12-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.15 Phenols, total	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

Section 2. Organic Toxic Pollutants (GC/MS Fraction—Volatile Compounds)

2.1 Acrolein (107-02-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.2 Acrylonitrile (107-13-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.3 Benzene (71-43-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.4 Bromoform (75-25-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.5 Carbon tetrachloride (56-23-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.6 Chlorobenzene (108-90-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.7 Chlorodibromomethane (124-48-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.8 Chloroethane (75-00-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
2.9 2-chloroethylvinyl ether (110-75-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.10 Chloroform (67-66-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.11 Dichlorobromomethane (75-27-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.12 1,1-dichloroethane (75-34-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.13 1,2-dichloroethane (107-06-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.14 1,1-dichloroethylene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.15 1,2-dichloropropane (78-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.16 1,3-dichloropropylene (542-75-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.17 Ethylbenzene (100-41-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.18 Methyl bromide (74-83-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.19 Methyl chloride (74-87-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.20 Methylene chloride (75-09-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.21 1,1,2,2-tetrachloroethane (79-34-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
2.22 Tetrachloroethylene (127-18-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.23 Toluene (108-88-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.24 1,2-trans-dichloroethylene (156-60-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.25 1,1,1-trichloroethane (71-55-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.26 1,1,2-trichloroethane (79-00-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.27 Trichloroethylene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.28 Vinyl chloride (75-01-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							

Section 3. Organic Toxic Pollutants (GC/MS Fraction — Acid Compounds)

3.1 2-chlorophenol (95-57-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.2 2,4-dichlorophenol (120-83-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.3 2,4-dimethylphenol (105-67-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.4 4,6-dinitro-o-cresol (534-52-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.5 2,4-dinitrophenol (51-28-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
3.6 2-nitrophenol (88-75-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.7 4-nitrophenol (100-02-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.8 p-chloro-m-cresol (59-50-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.9 Pentachlorophenol (87-86-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.10 Phenol (108-95-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.11 2,4,6-trichlorophenol (88-05-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

Section 4. Organic Toxic Pollutants (GC/MS Fraction — Base /Neutral Compounds)

4.1 Acenaphthene (83-32-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.2 Acenaphthylene (208-96-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.3 Anthracene (120-12-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.4 Benzidine (92-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.5 Benzo (a) anthracene (56-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.6 Benzo (a) pyrene (50-32-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.7 3,4-benzofluoranthene (205-99-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.8 Benzo (ghi) perylene (191-24-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.9 Benzo (k) fluoranthene (207-08-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.10 Bis (2-chloroethoxy) methane (111-91-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.11 Bis (2-chloroethyl) ether (111-44-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.12 Bis (2-chloroisopropyl) ether (102-80-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.13 Bis (2-ethylhexyl) phthalate (117-81-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.14 4-bromophenyl phenyl ether (101-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.15 Butyl benzyl phthalate (85-68-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.16 2-chloronaphthalene (91-58-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.17 4-chlorophenyl phenyl ether (7005-72-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.18 Chrysene (218-01-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.19 Dibenzo (a,h) anthracene (53-70-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.20 1,2-dichlorobenzene (95-50-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.21 1,3-dichlorobenzene (541-73-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.22 1,4-dichlorobenzene (106-46-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.23 3,3-dichlorobenzidine (91-94-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.24 Diethyl phthalate (84-66-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.25 Dimethyl phthalate (131-11-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.26 Di-n-butyl phthalate (84-74-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.27 2,4-dinitrotoluene (121-14-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.28 2,6-dinitrotoluene (606-20-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.29 Di-n-octyl phthalate (117-84-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.30 1,2-Diphenylhydrazine (as azobenzene) (122-66-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.31 Fluoranthene (206-44-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.32 Fluorene (86-73-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.33 Hexachlorobenzene (118-74-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.34 Hexachlorobutadiene (87-68-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.35 Hexachlorocyclopentadiene (77-47-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.36 Hexachloroethane (67-72-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.37 Indeno (1,2,3-cd) pyrene (193-39-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.38 Isophorone (78-59-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.39 Naphthalene (91-20-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.40 Nitrobenzene (98-95-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.41 N-nitrosodimethylamine (62-75-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.42 N-nitrosodi-n-propylamine (621-64-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.43 N-nitrosodiphenylamine (86-30-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.44 Phenanthrene (85-01-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.45 Pyrene (129-00-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.46 1,2,4-trichlorobenzene (120-82-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Section 5. Organic Toxic Pollutants (GC/MS Fraction —Pesticides)											
5.1 Aldrin (309-00-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.2 α -BHC (319-84-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.3 β -BHC (319-85-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.4 γ -BHC (58-89-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.5 δ -BHC (319-86-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.6 Chlordane (57-74-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.7 4,4'-DDT (50-29-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.8 4,4'-DDE (72-55-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.9 4,4'-DDD (72-54-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.10 Dieldrin (60-57-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.11 α -endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
5.12 β-endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.13 Endosulfan sulfate (1031-07-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.14 Endrin (72-20-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.15 Endrin aldehyde (7421-93-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.16 Heptachlor (76-44-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.17 Heptachlor epoxide (1024-57-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.18 PCB-1242 (53469-21-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.19 PCB-1254 (11097-69-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.20 PCB-1221 (11104-28-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.21 PCB-1232 (11141-16-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.22 PCB-1248 (12672-29-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.23 PCB-1260 (11096-82-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.24 PCB-1016 (12674-11-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)			
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses		
Toxaphene (8001-35-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent			Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Long-Term Average Value	Number of Analyses
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be present in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for each pollutant.								
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be absent in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for each pollutant.								
1. Bromide (24959-67-9)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
2. Chlorine, total residual	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
3. Color	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
4. Fecal coliform	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
5. Fluoride (16984-48-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
6. Nitrate-nitrite	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
7. Nitrogen, total organic (as N)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
8. Oil and grease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
9. Phosphorus (as P), total (7723-14-0)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	mg/L	0.053		0.053	1
10. Sulfate (as SO ₄) (14808-79-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	mg/L	88.7		88.7	1
11. Sulfide (as S)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					

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TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
12. Sulfite (as SO ₃) (14265-45-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
13. Surfactants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
14. Aluminum, total (7429-90-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
15. Barium, total (7440-39-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
16. Boron, total (7440-42-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
17. Cobalt, total (7440-48-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
18. Iron, total (7439-89-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
19. Magnesium, total (7439-95-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
20. Molybdenum, total (7439-98-7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
21. Manganese, total (7439-96-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
22. Tin, total (7440-31-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
23. Titanium, total (7440-32-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						

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TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent			Intake (Optional)		
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
24. Radioactivity									
Alpha, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
Beta, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
Radium, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
Radium 226, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
1. Asbestos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
2. Acetaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
3. Allyl alcohol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
4. Allyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
5. Amyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
6. Aniline	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7. Benzotrile	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
8. Benzyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
9. Butyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
10. Butylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
11. Captan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
12. Carbaryl	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
13. Carbofuran	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
14. Carbon disulfide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
15. Chlorpyrifos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
16. Coumaphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
17. Cresol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
18. Crotonaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
19. Cyclohexane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
20. 2,4-D (2,4-dichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
21. Diazinon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
22. Dicamba	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
23. Dichlobenil	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
24. Diclhone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
25. 2,2-dichloropropionic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
26. Dichlorvos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
27. Diethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
28. Dimethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
29. Dintrobenezene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
30. Diquat	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
31. Disulfoton	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
32. Diuron	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
33. Epichlorohydrin	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
34. Ethion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
35. Ethylene diamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
36. Ethylene dibromide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
37. Formaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
38. Furfural	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
39. Guthion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
40. Isoprene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
41. Isopropanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
42. Kelthane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
43. Kepone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
44. Malathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
45. Mercaptodimethur	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
46. Methoxychlor	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
47. Methyl mercaptan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
48. Methyl methacrylate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
49. Methyl parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
50. Mevinphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
51. Mexacarbate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
52. Monoethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
53. Monomethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
54. Naled	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
55. Naphthenic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
56. Nitrotoluene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
57. Parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
58. Phenolsulfonate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
59. Phosgene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
60. Propargite	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
61. Propylene oxide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
62. Pyrethrins	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
63. Quinoline	<input type="checkbox"/>	<input type="checkbox"/>		
64. Resorcinol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
65. Strontium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
66. Strychnine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
67. Styrene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
68. 2,4,5-T (2,4,5-trichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
69. TDE (tetrachlorodiphenyl ethane)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
70. 2,4,5-TP [2-(2,4,5-trichlorophenoxy) propanoic acid]	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
71. Trichlorofon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
72. Triethanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
73. Triethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
74. Trimethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
75. Uranium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
76. Vanadium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
77. Vinyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
78. Xylene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
79. Xylenol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
80. Zirconium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE E. 2,3,7,8 TETRACHLORODIBENZO P DIOXIN (2,3,7,8 TCDD) (40 CFR 122.21(g)(7)(viii))

Pollutant	TCDD Congeners Used or Manufactured	Presence or Absence (check one)		Results of Screening Procedure
		Believed Present	Believed Absent	
2,3,7,8-TCDD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

FORM 2C - OUTFALL 002

EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 002
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TABLE A. CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(iii))¹

Pollutant	Waiver Requested (if applicable)	Units (specify)	Effluent			Intake (Optional)	
			Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value
<input type="checkbox"/> Check here if you have applied to your NPDES permitting authority for a waiver for all of the pollutants listed on this table for the noted outfall.							
1. Biochemical oxygen demand (BOD ₅)	<input type="checkbox"/>	Concentration	2.10	2.10		1	
		Mass	NA	NA			
2. Chemical oxygen demand (COD)	<input type="checkbox"/>	Concentration	23.3	23.3		1	
		Mass	NA	NA			
3. Total organic carbon (TOC)	<input type="checkbox"/>	Concentration	6.04	6.04		1	
		Mass	NA	NA			
4. Total suspended solids (TSS)	<input type="checkbox"/>	Concentration	17.9	17.9	6.44	25	
		Mass	NA	NA			
5. Ammonia (as N)	<input type="checkbox"/>	Concentration	ND	ND		1	
		Mass	NA	NA			
6. Flow	<input type="checkbox"/>	Rate	0.213	0.19	0.0092	24	
7. Temperature (winter)	<input type="checkbox"/>	°C	**				
Temperature (summer)	<input type="checkbox"/>	°C	24.9			1	
pH (minimum)	<input type="checkbox"/>	Standard units	7.56			24	
pH (maximum)	<input type="checkbox"/>	Standard units	9.11			24	

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 002
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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses	
<input type="checkbox"/> Check here if you qualify as a small business per the instructions to Form 2C and, therefore, do not need to submit quantitative data for any of the organic toxic pollutants in Sections 2 through 5 of this table. Note, however, that you must still indicate in the appropriate column of this table if you believe any of the pollutants listed are present in your discharge.											
Section 1. Toxic Metals, Cyanide, and Total Phenols											
1.1 Antimony, total (7440-36-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.2 Arsenic, total (7440-38-2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	ug/L	2.54	2.54			1	
1.3 Beryllium, total (7440-41-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.4 Cadmium, total (7440-43-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.5 Chromium, total (7440-47-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.6 Copper, total (7440-50-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	ug/L	0.995	0.995			1	
1.7 Lead, total (7439-92-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.8 Mercury, total (7439-97-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.9 Nickel, total (7440-02-0)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	ug/L	2.38	2.38			1	
1.10 Selenium, total (7782-49-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.11 Silver, total (7440-22-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
1.12 Thallium, total (7440-28-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.13 Zinc, total (7440-66-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.14 Cyanide, total (57-12-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.15 Phenols, total	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

Section 2. Organic Toxic Pollutants (GC/MS Fraction—Volatile Compounds)

2.1 Acrolein (107-02-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.2 Acrylonitrile (107-13-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.3 Benzene (71-43-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.4 Bromoform (75-25-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.5 Carbon tetrachloride (56-23-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.6 Chlorobenzene (108-90-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.7 Chlorodibromomethane (124-48-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.8 Chloroethane (75-00-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
2.9 2-chloroethylvinyl ether (110-75-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.10 Chloroform (67-66-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.11 Dichlorobromomethane (75-27-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.12 1,1-dichloroethane (75-34-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.13 1,2-dichloroethane (107-06-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.14 1,1-dichloroethylene (75-35-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.15 1,2-dichloropropane (78-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.16 1,3-dichloropropylene (542-75-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.17 Ethylbenzene (100-41-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.18 Methyl bromide (74-83-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.19 Methyl chloride (74-87-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.20 Methylene chloride (75-09-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.21 1,1,2,2-tetrachloroethane (79-34-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
2.22 Tetrachloroethylene (127-18-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.23 Toluene (108-88-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.24 1,2-trans-dichloroethylene (156-60-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.25 1,1,1-trichloroethane (71-55-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.26 1,1,2-trichloroethane (79-00-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.27 Trichloroethylene (79-01-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.28 Vinyl chloride (75-01-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

Section 3. Organic Toxic Pollutants (GC/MS Fraction — Acid Compounds)

3.1 2-chlorophenol (95-57-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.2 2,4-dichlorophenol (120-83-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.3 2,4-dimethylphenol (105-67-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.4 4,6-dinitro-o-cresol (534-52-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.5 2,4-dinitrophenol (51-28-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
3.6 2-nitrophenol (88-75-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.7 4-nitrophenol (100-02-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.8 p-chloro-m-cresol (59-50-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.9 Pentachlorophenol (87-86-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.10 Phenol (108-95-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.11 2,4,6-trichlorophenol (88-05-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

Section 4. Organic Toxic Pollutants (GC/MS Fraction — Base /Neutral Compounds)

4.1 Acenaphthene (83-32-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.2 Acenaphthylene (208-96-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.3 Anthracene (120-12-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.4 Benzidine (92-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.5 Benzo (a) anthracene (56-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.6 Benzo (a) pyrene (50-32-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.7 3,4-benzofluoranthene (205-99-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.8 Benzo (ghi) perylene (191-24-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.9 Benzo (k) fluoranthene (207-08-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.10 Bis (2-chloroethoxy) methane (111-91-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.11 Bis (2-chloroethyl) ether (111-44-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.12 Bis (2-chloroisopropyl) ether (102-80-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.13 Bis (2-ethylhexyl) phthalate (117-81-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.14 4-bromophenyl phenyl ether (101-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.15 Butyl benzyl phthalate (85-68-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.16 2-chloronaphthalene (91-58-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.17 4-chlorophenyl phenyl ether (7005-72-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.18 Chrysene (218-01-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.19 Dibenzo (a,h) anthracene (53-70-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.20 1,2-dichlorobenzene (95-50-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.21 1,3-dichlorobenzene (541-73-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.22 1,4-dichlorobenzene (106-46-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.23 3,3-dichlorobenzidine (91-94-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.24 Diethyl phthalate (84-66-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.25 Dimethyl phthalate (131-11-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.26 Di-n-butyl phthalate (84-74-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.27 2,4-dinitrotoluene (121-14-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.28 2,6-dinitrotoluene (606-20-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.29 Di-n-octyl phthalate (117-84-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.30 1,2-Diphenylhydrazine (as azobenzene) (122-66-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.31 Fluoranthene (206-44-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.32 Fluorene (86-73-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.33 Hexachlorobenzene (118-74-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.34 Hexachlorobutadiene (87-68-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.35 Hexachlorocyclopentadiene (77-47-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.36 Hexachloroethane (67-72-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.37 Indeno (1,2,3-cd) pyrene (193-39-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.38 Isophorone (78-59-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.39 Naphthalene (91-20-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.40 Nitrobenzene (98-95-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.41 N-nitrosodimethylamine (62-75-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.42 N-nitrosodi-n-propylamine (621-64-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.43 N-nitrosodiphenylamine (86-30-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.44 Phenanthrene (85-01-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.45 Pyrene (129-00-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.46 1,2,4-trichlorobenzene (120-82-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Section 5. Organic Toxic Pollutants (GC/MS Fraction —Pesticides)											
5.1 Aldrin (309-00-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.2 α -BHC (319-84-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.3 β -BHC (319-85-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.4 γ -BHC (58-89-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.5 δ -BHC (319-86-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.6 Chlordane (57-74-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.7 4,4'-DDT (50-29-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.8 4,4'-DDE (72-55-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.9 4,4'-DDD (72-54-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.10 Dieldrin (60-57-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.11 α -endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
5.12 β-endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.13 Endosulfan sulfate (1031-07-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.14 Endrin (72-20-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.15 Endrin aldehyde (7421-93-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.16 Heptachlor (76-44-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.17 Heptachlor epoxide (1024-57-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.18 PCB-1242 (53469-21-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.19 PCB-1254 (11097-69-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.20 PCB-1221 (11104-28-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.21 PCB-1232 (11141-16-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.22 PCB-1248 (12672-29-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.23 PCB-1260 (11096-82-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.24 PCB-1016 (12674-11-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)			
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses		
Toxaphene (8001-35-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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	AR0042846	Ash Grove Cement Company	002

TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent			Intake (Optional)		
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be present in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for each pollutant.									
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be absent in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for each pollutant.									
1. Bromide (24959-67-9)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
2. Chlorine, total residual	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	mg/L	0.09	0.09			1
3. Color	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
4. Fecal coliform	<input type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	#/100ml	49	49			1
5. Fluoride (16984-48-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
6. Nitrate-nitrite	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
7. Nitrogen, total organic (as N)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
8. Oil and grease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
9. Phosphorus (as P), total (7723-14-0)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	mg/L	0.043	0.043			1
10. Sulfate (as SO ₄) (14808-79-8)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	mg/L	71.8	71.8			1
11. Sulfide (as S)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						

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TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
12. Sulfite (as SO ₃) (14265-45-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
13. Surfactants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
14. Aluminum, total (7429-90-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
15. Barium, total (7440-39-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
16. Boron, total (7440-42-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
17. Cobalt, total (7440-48-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
18. Iron, total (7439-89-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
19. Magnesium, total (7439-95-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
20. Molybdenum, total (7439-98-7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
21. Manganese, total (7439-96-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
22. Tin, total (7440-31-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
23. Titanium, total (7440-32-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						

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TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent			Intake (Optional)			
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses	
24. Radioactivity										
Alpha, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Beta, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Radium, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Radium 226, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
1. Asbestos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
2. Acetaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
3. Allyl alcohol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
4. Allyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
5. Amyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
6. Aniline	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7. Benzotrile	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
8. Benzyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
9. Butyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
10. Butylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
11. Captan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
12. Carbaryl	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
13. Carbofuran	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
14. Carbon disulfide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
15. Chlorpyrifos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
16. Coumaphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
17. Cresol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
18. Crotonaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
19. Cyclohexane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
20. 2,4-D (2,4-dichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
21. Diazinon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
22. Dicamba	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
23. Dichlobenil	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
24. Diclhone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
25. 2,2-dichloropropionic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
26. Dichlorvos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
27. Diethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
28. Dimethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
29. Dintrobenezene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
30. Diquat	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
31. Disulfoton	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
32. Diuron	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
33. Epichlorohydrin	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
34. Ethion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
35. Ethylene diamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
36. Ethylene dibromide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
37. Formaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
38. Furfural	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
39. Guthion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
40. Isoprene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
41. Isopropanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
42. Kelthane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
43. Kepone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
44. Malathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
45. Mercaptodimethur	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
46. Methoxychlor	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
47. Methyl mercaptan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
48. Methyl methacrylate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
49. Methyl parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
50. Mevinphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
51. Mexacarbate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
52. Monoethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
53. Monomethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
54. Naled	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
55. Naphthenic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
56. Nitrotoluene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
57. Parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
58. Phenolsulfonate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
59. Phosgene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
60. Propargite	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
61. Propylene oxide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
62. Pyrethrins	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
63. Quinoline	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
64. Resorcinol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
65. Strontium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
66. Strychnine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
67. Styrene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
68. 2,4,5-T (2,4,5-trichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
69. TDE (tetrachlorodiphenyl ethane)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
70. 2,4,5-TP [2-(2,4,5-trichlorophenoxy) propanoic acid]	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
71. Trichlorofon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
72. Triethanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
73. Triethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
74. Trimethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
75. Uranium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
76. Vanadium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
77. Vinyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
78. Xylene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
79. Xylenol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
80. Zirconium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE E. 2,3,7,8 TETRACHLORODIBENZO P DIOXIN (2,3,7,8 TCDD) (40 CFR 122.21(g)(7)(viii))

Pollutant	TCDD Congeners Used or Manufactured	Presence or Absence (check one)		Results of Screening Procedure
		Believed Present	Believed Absent	
2,3,7,8-TCDD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

Form 2C - Outfall 003

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TABLE A. CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(iii))¹

Pollutant	Waiver Requested (if applicable)	Units (specify)	Effluent				Intake (Optional)	
			Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
<input type="checkbox"/> Check here if you have applied to your NPDES permitting authority for a waiver for all of the pollutants listed on this table for the noted outfall.								
1. Biochemical oxygen demand (BOD ₅)	<input type="checkbox"/>	Concentration	2.21	2.21	< 2.0	25		
		Mass						
2. Chemical oxygen demand (COD)	<input type="checkbox"/>	Concentration	19.4	19.4		1		
		Mass						
3. Total organic carbon (TOC)	<input type="checkbox"/>	Concentration	3.93	3.93		1		
		Mass						
4. Total suspended solids (TSS)	<input type="checkbox"/>	Concentration	11.5	11.5	5.94	24		
		Mass						
5. Ammonia (as N)	<input type="checkbox"/>	Concentration	ND	ND		1		
		Mass						
6. Flow	<input type="checkbox"/>	Rate	16.23	20.01	4.57	24		
7. Temperature (winter)	<input type="checkbox"/>	°C	**	**				
Temperature (summer)	<input type="checkbox"/>	°C	24.5	24.5		1		
pH (minimum)	<input type="checkbox"/>	Standard units	7.35			24		
pH (maximum)	<input type="checkbox"/>	Standard units	8.5			24		

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
<input type="checkbox"/> Check here if you qualify as a small business per the instructions to Form 2C and, therefore, do not need to submit quantitative data for any of the organic toxic pollutants in Sections 2 through 5 of this table. Note, however, that you must still indicate in the appropriate column of this table if you believe any of the pollutants listed are present in your discharge.											
Section 1. Toxic Metals, Cyanide, and Total Phenols											
1.1 Antimony, total (7440-36-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.2 Arsenic, total (7440-38-2)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	ug/L	1.58	1.58	1			
1.3 Beryllium, total (7440-41-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.4 Cadmium, total (7440-43-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.5 Chromium, total (7440-47-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.6 Copper, total (7440-50-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	ug/L	1.09	1.09	1			
1.7 Lead, total (7439-92-1)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	ug/L	0.599	0.599	1			
1.8 Mercury, total (7439-97-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.9 Nickel, total (7440-02-0)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration Mass	ug/L	1.18	1.18	1			
1.10 Selenium, total (7782-49-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.11 Silver, total (7440-22-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
1.12 Thallium, total (7440-28-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.13 Zinc, total (7440-66-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.14 Cyanide, total (57-12-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
1.15 Phenols, total	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

Section 2. Organic Toxic Pollutants (GC/MS Fraction—Volatile Compounds)

2.1 Acrolein (107-02-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.2 Acrylonitrile (107-13-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.3 Benzene (71-43-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.4 Bromoform (75-25-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.5 Carbon tetrachloride (56-23-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.6 Chlorobenzene (108-90-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.7 Chlorodibromomethane (124-48-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.8 Chloroethane (75-00-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
2.9 2-chloroethylvinyl ether (110-75-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.10 Chloroform (67-66-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.11 Dichlorobromomethane (75-27-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.12 1,1-dichloroethane (75-34-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.13 1,2-dichloroethane (107-06-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.14 1,1-dichloroethylene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.15 1,2-dichloropropane (78-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.16 1,3-dichloropropylene (542-75-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.17 Ethylbenzene (100-41-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.18 Methyl bromide (74-83-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.19 Methyl chloride (74-87-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.20 Methylene chloride (75-09-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
2.21 1,1,2,2-tetrachloroethane (79-34-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
2.22 Tetrachloroethylene (127-18-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.23 Toluene (108-88-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.24 1,2-trans-dichloroethylene (156-60-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.25 1,1,1-trichloroethane (71-55-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.26 1,1,2-trichloroethane (79-00-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.27 Trichloroethylene	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
2.28 Vinyl chloride (75-01-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							

Section 3. Organic Toxic Pollutants (GC/MS Fraction — Acid Compounds)

3.1 2-chlorophenol (95-57-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.2 2,4-dichlorophenol (120-83-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.3 2,4-dimethylphenol (105-67-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.4 4,6-dinitro-o-cresol (534-52-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							
3.5 2,4-dinitrophenol (51-28-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
3.6 2-nitrophenol (88-75-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.7 4-nitrophenol (100-02-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.8 p-chloro-m-cresol (59-50-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.9 Pentachlorophenol (87-86-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.10 Phenol (108-95-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
3.11 2,4,6-trichlorophenol (88-05-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

Section 4. Organic Toxic Pollutants (GC/MS Fraction — Base /Neutral Compounds)

4.1 Acenaphthene (83-32-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.2 Acenaphthylene (208-96-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.3 Anthracene (120-12-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.4 Benzidine (92-87-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.5 Benzo (a) anthracene (56-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.6 Benzo (a) pyrene (50-32-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.7 3,4-benzofluoranthene (205-99-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.8 Benzo (ghi) perylene (191-24-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.9 Benzo (k) fluoranthene (207-08-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.10 Bis (2-chloroethoxy) methane (111-91-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.11 Bis (2-chloroethyl) ether (111-44-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.12 Bis (2-chloroisopropyl) ether (102-80-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.13 Bis (2-ethylhexyl) phthalate (117-81-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.14 4-bromophenyl phenyl ether (101-55-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.15 Butyl benzyl phthalate (85-68-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.16 2-chloronaphthalene (91-58-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.17 4-chlorophenyl phenyl ether (7005-72-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.18 Chrysene (218-01-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.19 Dibenzo (a,h) anthracene (53-70-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)			
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses		
4.20 1,2-dichlorobenzene (95-50-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.21 1,3-dichlorobenzene (541-73-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.22 1,4-dichlorobenzene (106-46-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.23 3,3-dichlorobenzidine (91-94-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.24 Diethyl phthalate (84-66-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.25 Dimethyl phthalate (131-11-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.26 Di-n-butyl phthalate (84-74-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.27 2,4-dinitrotoluene (121-14-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.28 2,6-dinitrotoluene (606-20-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.29 Di-n-octyl phthalate (117-84-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.30 1,2-Diphenylhydrazine (as azobenzene) (122-66-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.31 Fluoranthene (206-44-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								
4.32 Fluorene (86-73-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.33 Hexachlorobenzene (118-74-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.34 Hexachlorobutadiene (87-68-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.35 Hexachlorocyclopentadiene (77-47-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.36 Hexachloroethane (67-72-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.37 Indeno (1,2,3-cd) pyrene (193-39-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.38 Isophorone (78-59-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.39 Naphthalene (91-20-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.40 Nitrobenzene (98-95-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.41 N-nitrosodimethylamine (62-75-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.42 N-nitrosodi-n-propylamine (621-64-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.43 N-nitrosodiphenylamine (86-30-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.44 Phenanthrene (85-01-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
4.45 Pyrene (129-00-0)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
4.46 1,2,4-trichlorobenzene (120-82-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Section 5. Organic Toxic Pollutants (GC/MS Fraction —Pesticides)											
5.1 Aldrin (309-00-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.2 α -BHC (319-84-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.3 β -BHC (319-85-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.4 γ -BHC (58-89-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.5 δ -BHC (319-86-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.6 Chlordane (57-74-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.7 4,4'-DDT (50-29-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.8 4,4'-DDE (72-55-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.9 4,4'-DDD (72-54-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.10 Dieldrin (60-57-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.11 α -endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)		
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses	
5.12 β-endosulfan (115-29-7)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.13 Endosulfan sulfate (1031-07-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.14 Endrin (72-20-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.15 Endrin aldehyde (7421-93-4)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.16 Heptachlor (76-44-8)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.17 Heptachlor epoxide (1024-57-3)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.18 PCB-1242 (53469-21-9)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.19 PCB-1254 (11097-69-1)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.20 PCB-1221 (11104-28-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.21 PCB-1232 (11141-16-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.22 PCB-1248 (12672-29-6)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.23 PCB-1260 (11096-82-5)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
5.24 PCB-1016 (12674-11-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

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TABLE B. TOXIC METALS, CYANIDE, TOTAL PHENOLS, AND ORGANIC TOXIC POLLUTANTS (40 CFR 122.21(g)(7)(v))¹

Pollutant/Parameter (and CAS Number, if available)	Testing Required	Presence or Absence (check one)		Units (specify)	Effluent				Intake (optional)			
		Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long- Term Average Value	Number of Analyses		
5.25 Toxaphene (8001-35-2)	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass								

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number	Facility Name	Outfall Number
	AR0042846	Ash Grove Cement Company	001

TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent			Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Long-Term Average Value	Number of Analyses
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be present in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for each pollutant.								
<input type="checkbox"/> Check here if you believe all pollutants on Table C to be absent in your discharge from the noted outfall. You need <i>not</i> complete the "Presence or Absence" column of Table C for each pollutant.								
1. Bromide (24959-67-9)	<input checked="" type="checkbox"/>	<input type="checkbox"/>	Concentration mg/L	3.05	3.05		1	
2. Chlorine, total residual	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
3. Color	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
4. Fecal coliform	<input type="checkbox"/>	<input type="checkbox"/>	Concentration #/100mls	410	410	68.4	13	
5. Fluoride (16984-48-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
6. Nitrate-nitrite	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
7. Nitrogen, total organic (as N)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
8. Oil and grease	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
9. Phosphorus (as P), total (7723-14-0)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					
10. Sulfate (as SO ₄) (14808-79-8)	<input type="checkbox"/>	<input type="checkbox"/>	Concentration mg/L	95.4	95.4		1	
11. Sulfide (as S)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass					

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TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent				Intake (Optional)	
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses
12. Sulfite (as SO ₃) (14265-45-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
13. Surfactants	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
14. Aluminum, total (7429-90-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
15. Barium, total (7440-39-3)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
16. Boron, total (7440-42-8)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
17. Cobalt, total (7440-48-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
18. Iron, total (7439-89-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
19. Magnesium, total (7439-95-4)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
20. Molybdenum, total (7439-98-7)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
21. Manganese, total (7439-96-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
22. Tin, total (7440-31-5)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						
23. Titanium, total (7440-32-6)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass						

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	AR0042846	Ash Grove Cement Company	001

TABLE C. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.21(g)(7)(vi))¹

Pollutant	Presence or Absence (check one)		Units (specify)	Effluent			Intake (Optional)			
	Believed Present	Believed Absent		Maximum Daily Discharge (required)	Maximum Monthly Discharge (if available)	Long-Term Average Daily Discharge (if available)	Number of Analyses	Long-Term Average Value	Number of Analyses	
24. Radioactivity										
Alpha, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Beta, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Radium, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							
Radium 226, total	<input type="checkbox"/>	<input checked="" type="checkbox"/>	Concentration Mass							

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
1. Asbestos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
2. Acetaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
3. Allyl alcohol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
4. Allyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
5. Amyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
6. Aniline	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
7. Benzotrile	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
8. Benzyl chloride	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
9. Butyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
10. Butylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
11. Captan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
12. Carbaryl	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
13. Carbofuran	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
14. Carbon disulfide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
15. Chlorpyrifos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
16. Coumaphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
17. Cresol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
18. Crotonaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
19. Cyclohexane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
20. 2,4-D (2,4-dichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
21. Diazinon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
22. Dicamba	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
23. Dichlobenil	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
24. Diclhone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
25. 2,2-dichloropropionic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
26. Dichlorvos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
27. Diethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
28. Dimethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
29. Dintrobenezene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
30. Diquat	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
31. Disulfoton	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
32. Diuron	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
33. Epichlorohydrin	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
34. Ethion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
35. Ethylene diamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
36. Ethylene dibromide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
37. Formaldehyde	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
38. Furfural	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
39. Guthion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
40. Isoprene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
41. Isopropanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
42. Kelthane	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
43. Kepone	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
44. Malathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
45. Mercaptodimethur	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
46. Methoxychlor	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
47. Methyl mercaptan	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
48. Methyl methacrylate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
49. Methyl parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
50. Mevinphos	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
51. Mexacarbate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
52. Monoethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
53. Monomethyl amine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
54. Naled	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
55. Naphthenic acid	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
56. Nitrotoluene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
57. Parathion	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
58. Phenolsulfonate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
59. Phosgene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
60. Propargite	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
61. Propylene oxide	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
62. Pyrethrins	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
63. Quinoline	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
64. Resorcinol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
65. Strontium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
66. Strychnine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
67. Styrene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
68. 2,4,5-T (2,4,5-trichlorophenoxyacetic acid)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
69. TDE (tetrachlorodiphenyl ethane)	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
70. 2,4,5-TP [2-(2,4,5-trichlorophenoxy) propanoic acid]	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
71. Trichlorofon	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
72. Triethanolamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
73. Triethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
74. Trimethylamine	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
75. Uranium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
76. Vanadium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

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TABLE D. CERTAIN HAZARDOUS SUBSTANCES AND ASBESTOS (40 CFR 122.21(g)(7)(vii))¹

Pollutant	Presence or Absence (check one)		Reason Pollutant Believed Present in Discharge	Available Quantitative Data (specify units)
	Believed Present	Believed Absent		
77. Vinyl acetate	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
78. Xylene	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
79. Xylenol	<input type="checkbox"/>	<input checked="" type="checkbox"/>		
80. Zirconium	<input type="checkbox"/>	<input checked="" type="checkbox"/>		

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

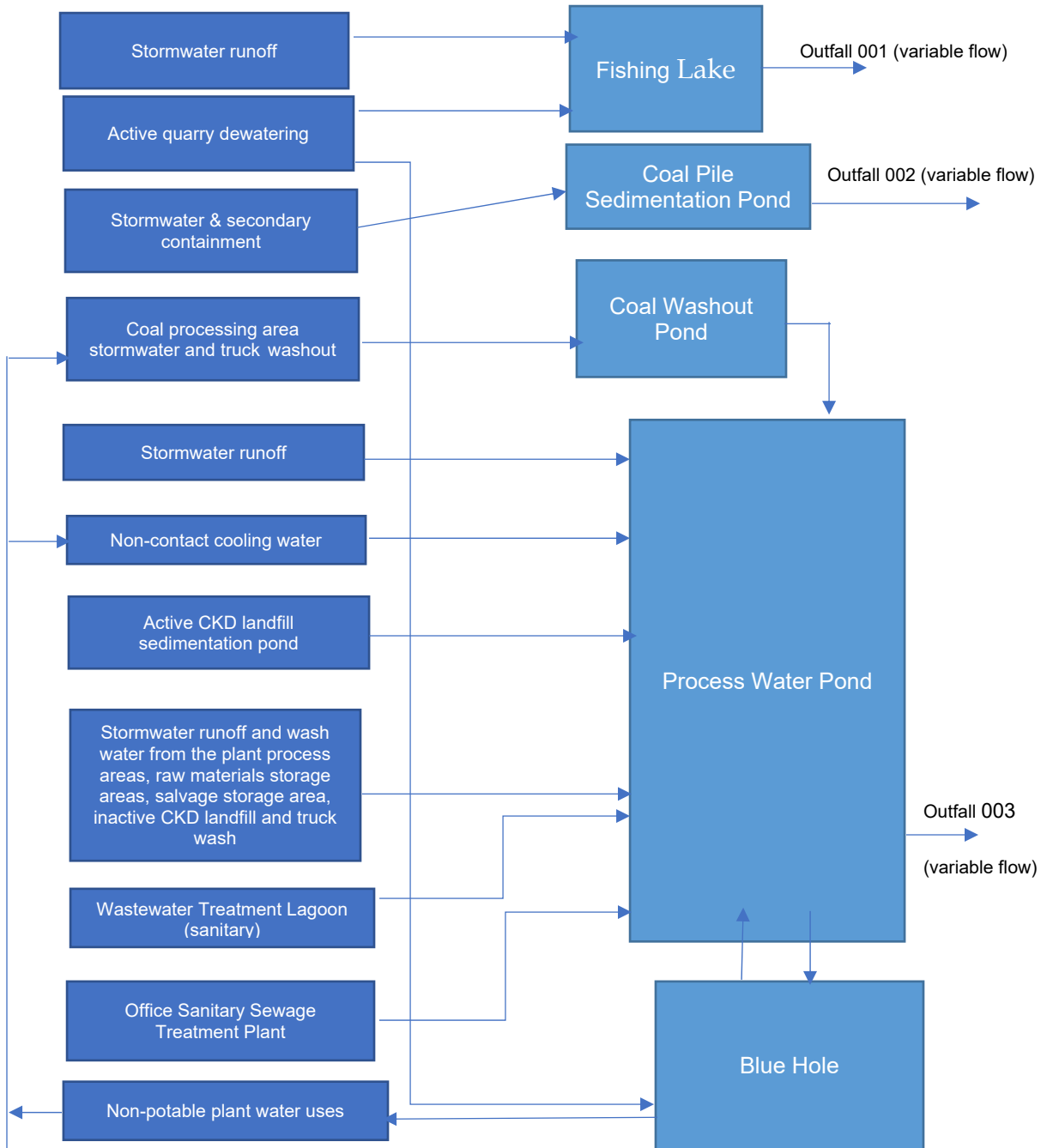
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TABLE E. 2,3,7,8 TETRACHLORODIBENZO P DIOXIN (2,3,7,8 TCDD) (40 CFR 122.21(g)(7)(viii))

Pollutant	TCDD Congeners Used or Manufactured	Presence or Absence (check one)		Results of Screening Procedure
		Believed Present	Believed Absent	
2,3,7,8-TCDD	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

EPA Form 1 and EPA Form 2C - Process Flow diagram



ATTACHMENT D - 2F OUTFALL 001

ATTACHMENT D - 2F OUTFALL 001

Water Permits Division




Application Form 2F

Stormwater Discharges Associated with Industrial Activity

NPDES Permitting Program

Note: Complete this form *and* Form 1 if you are a new or existing facility whose discharge is composed entirely of stormwater associated with industrial activity, excluding discharges from construction activity under 40 CFR 122.26(b)(14)(x) or (b)(15). If your discharge is composed of stormwater *and* non-stormwater, you must complete Forms 1 and 2F, *and* you must complete Form 2C, 2D, or 2E, as appropriate. See the “Instructions” inside for further details.

Form 2F NPDES		U.S Environmental Protection Agency Application for NPDES Permit to Discharge Wastewater STORMWATER DISCHARGES ASSOCIATED WITH INDUSTRIAL ACTIVITY
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SECTION 1. OUTFALL LOCATION (40 CFR 122.21(g)(1))

Outfall Location	1.1	Provide information on each of the facility's outfalls in the table below			
		Outfall Number	Receiving Water Name	Latitude	Longitude
		001	unnamed trib to French Cr	33° 41' 9.2"	94° 25' 28.4"
		002	unnamed trib. to French Cr	33° 41' 29.6"	94° 25' 36.3"
		003	unnamed trib to French Cr	33° 41' 15.3"	94° 25' 28.7"
				° ' "	° ' "
				° ' "	° ' "
				° ' "	° ' "

SECTION 2. IMPROVEMENTS (40 CFR 122.21(g)(6))

Improvements	2.1	Are you presently required by any federal, state, or local authority to meet an implementation schedule for constructing, upgrading, or operating wastewater treatment equipment or practices or any other environmental programs that could affect the discharges described in this application? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 3.			
	2.2	Briefly identify each applicable project in the table below.			
		Brief Identification and Description of Project	Affected Outfalls (list outfall numbers)	Source(s) of Discharge	Final Compliance Dates
					Required Projected
	2.3	Have you attached sheets describing any additional water pollution control programs (or other environmental projects that may affect your discharges) that you now have underway or planned? (Optional Item) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			

SECTION 3. SITE DRAINAGE MAP (40 CFR 122.26(c)(1)(i)(A))

Site Drainage Map	3.1	Have you attached a site drainage map containing all required information to this application? (See instructions for specific guidance.) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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SECTION 4. POLLUTANT SOURCES (40 CFR 122.26(c)(1)(i)(B))

Pollutant Sources	4.1	Provide information on the facility's pollutant sources in the table below.				
		Outfall Number	Impervious Surface Area (within a mile radius of the facility)	Total Surface Area Drained (within a mile radius of the facility)		
		001	0.19	<i>specify units</i> acres	approx. 500* <i>specify units</i> acres	
		002	approx. 5	<i>specify units</i> acres	approx. 30 <i>specify units</i> acres	
		003	approx. 70 acres	<i>specify units</i> acres	300** <i>specify units</i>	
		quarry (IGP)		<i>specify units</i>	approx.380 <i>specify units</i> acres	
			*includes the Quarry area	<i>specify units</i>	**Includes Blue Hole and Process Pond <i>specify units</i>	
				<i>specify units</i>	<i>specify units</i>	
		4.2	Provide a narrative description of the facility's significant material in the space below. (See instructions for content requirements.) Outfall 001 Drainage Area - mining and transport of limestone, maintenance activities, diesel fuel receiving/storage/fueling, drummed oil receiving, mobile refueling. Outfall 002 Drainage Area - closed CKD landfill, liquid waste derived fuel (LWDF) loading/unloading and storage (covered contained area), vehicular traffic. Outfall 003 Drainage Area - Dry raw materials receiving/handling/storage (gypsum, limestone, sand, coal, clinker),solid waste derived fuel (palletized container), LWDF transfer pipelines, CKD transfers, gas/diesel receiving, drummed oil receiving/transfers, used oil transfers,process materials conveyance systems, final product shipping, solid waste collection, miscellaneous materials storage, scrap metal collection, ammonia receiving, calcium chloride receiving, hydrated lime receiving, bulk waste derived fuels receiving.			
		4.3	Provide the location and a description of existing structural and non-structural control measures to reduce pollutants in stormwater runoff. (See instructions for specific guidance.)			
		Stormwater Treatment				
		Outfall Number	Control Measures and Treatment	Codes from Exhibit 2F-1 (list)		
		001, 002	The primary treatment method employed in all of the drainage areas is settling provided	1U		
		003	by several basins/pond located on the facility property.			
			The facility has developed and implemented a BMP/SWPPP. Control measures include			
			routine inspections and maintenance of equipment, the use of asphalt of concrete			
			roadways and process areas to the extent practicable, curbing, containment systems,			
			roofs, enclosed systems (where practicable) and the settling basins.			

EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company
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Form Approved 03/05/19
OMB No. 2040-0004

SECTION 5. NON STORMWATER DISCHARGES (40 CFR 122.26(c)(1)(i)(C))

Non-Stormwater Discharges	5.1	<i>I certify under penalty of law that the outfall(s) covered by this application have been tested or evaluated for the presence of non-stormwater discharges. Moreover, I certify that the outfalls identified as having non-stormwater discharges are described in either an accompanying NPDES Form 2C, 2D, or 2E application.</i>			
		Name (print or type first and last name)	Official title		
		Stuart Tomlinson	Vice President of Manufacturing		
		Signature	Date signed		
		<i>Stuart Tomlinson</i>	June 7, 2022		
	5.2	Provide the testing information requested in the table below.			
		Outfall Number	Description of Testing Method Used	Date(s) of Testing	Onsite Drainage Points Directly Observed During Test
		001	All of the outfall contain non-stormwater sources		
	002	testing/evaluation for non-stormwater sources is			
	003	not required.			

SECTION 6. SIGNIFICANT LEAKS OR SPILLS (40 CFR 122.26(c)(1)(i)(D))

Significant Leaks or Spills	6.1	Describe any significant leaks or spills of toxic or hazardous pollutants in the last three years. No significant (reportable) spills have occurred at the facility within the last 3 years.
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SECTION 7. DISCHARGE INFORMATION (40 CFR 122.26(c)(1)(i)(E))

Discharge Information	See the instructions to determine the pollutants and parameters you are required to monitor and, in turn, the tables you must complete. Not all applicants need to complete each table.	
	7.1	Is this a new source or new discharge? <input type="checkbox"/> Yes → See instructions regarding submission of <i>estimated data</i> . <input checked="" type="checkbox"/> No → See instructions regarding submission of <i>actual data</i> .
	Tables A, B, C, and D	
7.2	Have you completed Table A for each outfall? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Form Approved 03/05/19 OMB No. 2040-0004
Discharge Information Continued	7.3	Is the facility subject to an effluent limitation guideline (ELG) or effluent limitations in an NPDES permit for its process wastewater? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 7.5.	
	7.4	Have you completed Table B by providing quantitative data for those pollutants that are (1) limited either directly or indirectly in an ELG and/or (2) subject to effluent limitations in an NPDES permit for the facility's process wastewater? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	7.5	Do you know or have reason to believe any pollutants in Exhibit 2F-2 are present in the discharge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 7.7.	
	7.6	Have you listed all pollutants in Exhibit 2F-2 that you know or have reason to believe are present in the discharge and provided quantitative data or an explanation for those pollutants in Table C? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	7.7	Do you qualify for a small business exemption under the criteria specified in the Instructions? <input type="checkbox"/> Yes → SKIP to Item 7.18. <input checked="" type="checkbox"/> No	
	7.8	Do you know or have reason to believe any pollutants in Exhibit 2F-3 are present in the discharge? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Item 7.10.	
	7.9	Have you listed all pollutants in Exhibit 2F-3 that you know or have reason to believe are present in the discharge in Table C? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	7.10	Do you expect any of the pollutants in Exhibit 2F-3 to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.12.	
	7.11	Have you provided quantitative data in Table C for those pollutants in Exhibit 2F-3 that you expect to be discharged in concentrations of 10 ppb or greater? <input type="checkbox"/> Yes <input type="checkbox"/> No	
	7.12	Do you expect acrolein, acrylonitrile, 2,4-dinitrophenol, or 2-methyl-4,6-dinitrophenol to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.14.	
	7.13	Have you provided quantitative data in Table C for the pollutants identified in Item 7.12 that you expect to be discharged in concentrations of 100 ppb or greater? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	7.14	Have you provided quantitative data or an explanation in Table C for pollutants you expect to be present in the discharge at concentrations less than 10 ppb (or less than 100 ppb for the pollutants identified in Item 7.12)? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
	7.15	Do you know or have reason to believe any pollutants in Exhibit 2F-4 are present in the discharge? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Item 7.17.	
	7.16	Have you listed pollutants in Exhibit 2F-4 that you know or believe to be present in the discharge and provided an explanation in Table C? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
	7.17	Have you provided information for the storm event(s) sampled in Table D? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	

Discharge Information Continued	Used or Manufactured Toxics		
	7.18	Is any pollutant listed on Exhibits 2F-2 through 2F-4 a substance or a component of a substance used or manufactured as an intermediate or final product or byproduct? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 8.	
	7.19	List the pollutants below, including TCDD if applicable.	
	1. The facility utilizes Hazardous waste derived fuels; Consequently,	4. be present	7.
	2.	5.	8.
	3. any of these parameters may	6.	9.

SECTION 8. BIOLOGICAL TOXICITY TESTING DATA (40 CFR 122.21(g)(11))

Biological Toxicity Testing Data	8.1	Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last three years? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No → SKIP to Section 9.		
	8.2	Identify the tests and their purposes below.		
		Test(s)	Purpose of Test(s)	Submitted to NPDES Permitting Authority?
				<input type="checkbox"/> Yes <input type="checkbox"/> No
				<input type="checkbox"/> Yes <input type="checkbox"/> No
			<input type="checkbox"/> Yes <input type="checkbox"/> No	

SECTION 9. CONTRACT ANALYSIS INFORMATION (40 CFR 122.21(g)(12))

Contract Analysis Information	9.1	Were any of the analyses reported in Section 7 (on Tables A through C) performed by a contract laboratory or consulting firm? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No → SKIP to Section 10.		
	9.2	Provide information for each contract laboratory or consulting firm below.		
		Laboratory Number 1	Laboratory Number 2	Laboratory Number 3
		Name of laboratory/firm	Arkansas Analytical	
		Laboratory address	8001 National Drive Little Rock, AR 72209	
		Phone number	(501) 455-3233	
	Pollutant(s) analyzed	All		

SECTION 10. CHECKLIST AND CERTIFICATION STATEMENT (40 CFR 122.22(a) and (d))

Checklist and Certification Statement	10.1	In Column 1 below, mark the sections of Form 2F that you have completed and are submitting with your application. For each section, specify in Column 2 any attachments that you are enclosing to alert the permitting authority. Note that not all applicants are required to complete all sections or provide attachments.	
		Column 1	Column 2
		<input checked="" type="checkbox"/> Section 1	<input type="checkbox"/> w/ attachments (e.g., responses for additional outfalls)
		<input checked="" type="checkbox"/> Section 2	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 3	<input type="checkbox"/> w/ site drainage map
		<input checked="" type="checkbox"/> Section 4	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 5	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 6	<input type="checkbox"/> w/ attachments
		<input checked="" type="checkbox"/> Section 7	<input type="checkbox"/> Table A <input type="checkbox"/> w/ small business exemption request <input type="checkbox"/> Table B <input type="checkbox"/> w/ analytical results as an attachment <input type="checkbox"/> Table C <input type="checkbox"/> Table D
		<input checked="" type="checkbox"/> Section 8	<input type="checkbox"/> w/attachments
		<input checked="" type="checkbox"/> Section 9	<input type="checkbox"/> w/attachments (e.g., responses for additional contact laboratories or firms)
	<input checked="" type="checkbox"/> Section 10	<input type="checkbox"/>	
	10.2	<p>Certification Statement</p> <p><i>I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.</i></p>	
		Name (print or type first and last name)	Official title
		Stuart Tomlinson	Vice President of Manufacturing
		Signature	Date signed
		<i>Stuart Tomlinson</i>	June 7, 2022

EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 001
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TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(E)(3))¹

You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1. Oil and grease	ND		ND		1	
2. Biochemical oxygen demand (BOD ₅)	ND		ND		1	
3. Chemical oxygen demand (COD)	22.8		22.8		1	
4. Total suspended solids (TSS)	4		2.1		25	
5. Total phosphorus	0.053		0.053		1	
6. Total Kjeldahl nitrogen (TKN)	ND		ND			
7. Total nitrogen (as N)	ND		ND			
8. pH (minimum)	7.39		7.39			
	9.09		9.09			

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 001
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TABLE B. CERTAIN CONVENTIONAL AND NON CONVENTIONAL POLLUTANTS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(A))¹

List each pollutant that is limited in an effluent limitation guideline (ELG) that the facility is subject to or any pollutant listed in the facility's NPDES permit for its process wastewater (if the facility is operating under an existing NPDES permit). Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
pH	9.09		9.09		24	
TSS	4		2.13		25	

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 001
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TABLE C. TOXIC POLLUTANTS, CERTAIN HAZARDOUS SUBSTANCES, AND ASBESTOS (40 CFR 122.26(c)(1)(E)(4) and 40 CFR 122.21(g)(7)(vi)(B) and (vii))¹

List each pollutant shown in Exhibits 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
Sulfate	88.7 mg/L		88.7 mg/L		1	
Phosphorus	0.053 mg/L		0.053 mg/L		1	
Arsenic	0.547 ug/L		0.547 ug/L		1	

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number AR0042846	Facility name Ash Grove Cement Company	Outfall Number 001
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TABLE D. STORM EVENT INFORMATION (40 CFR 122.26(c)(1)(i)(E)(6))

Provide data for the storm event(s) that resulted in the maximum daily discharges for the flow-weighted composite sample.

Date of Storm Event	Duration of Storm Event (in hours)	Total Rainfall During Storm Event (in inches)	Number of Hours Between Beginning of Storm Measured and End of Previous Measurable Rain Event	Maximum Flow Rate During Rain Event (in gpm or specify units)	Total Flow from Rain Event (in gallons or specify units)
05/02/2022	NA	NA	See Below	See Below	

Provide a description of the method of flow measurement or estimate.

Samples are collected from ponds with greater than 24 hours detention times. Consequently, samples collected would be representative of numerous rain event. Flow is measured/calculated as per the conditions of the current NPDES Permit. The maximum and average flows for each outfall for the last 2 years (April 2020-April 2022) are shown on EPA Form 2C included as a component of this application.

Form 2F - Outfall 002

EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 002
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Form Approved 03/05/19
OMB No. 2040-0004

TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(i)(E)(3))¹

You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1. Oil and grease	ND		ND		1	
2. Biochemical oxygen demand (BOD ₅)	2.10 mg/L		2.10 mg/L		1	
3. Chemical oxygen demand (COD)	23.3 mg/L		23.3 mg/L		1	
4. Total suspended solids (TSS)	17.9 mg/L		6.44 mg/L		25	
5. Total phosphorus	0.043		0.043		1	
6. Total Kjeldahl nitrogen (TKN)	ND		ND		1	
7. Total nitrogen (as N)	ND		ND		1	
8. pH (minimum)	7.56 s.u.		7.56 s.u.		24	
	9.1 s.u.		9.1 s.u.		24	

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 002
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TABLE C. TOXIC POLLUTANTS, CERTAIN HAZARDOUS SUBSTANCES, AND ASBESTOS (40 CFR 122.26(c)(1)(i)(E)(4) and 40 CFR 122.21(g)(7)(vi)(B) and (vii))¹

List each pollutant shown in Exhibits 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
Sulfate	71.8 mg/L		71.8 mg/L		1	
Copper	0.995 ug/L		0.995 ug/L		1	
Arsenic	2.71 ug/L		2.045 ug/L		5	
Nickel	2.38 ug/L		2.38 ug/L		1	
Fecal Coliforms	49 #/100 ml		49 #/100 ml		1	
Residual Chlorine	0.09 mg/L		0.09 mg/L		1	

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

FORM 2F - OUTFALL 003

EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 003
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TABLE A. CONVENTIONAL AND NON CONVENTIONAL PARAMETERS (40 CFR 122.26(c)(1)(E)(3))¹

You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details and requirements.

Pollutant or Parameter	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
1. Oil and grease	ND		ND		1	
2. Biochemical oxygen demand (BOD ₅)	2.21 mg/L		< 2.0 mg/L		25	
3. Chemical oxygen demand (COD)	19.4 mg/L		19.4 mg/L		1	
4. Total suspended solids (TSS)	11.5 mg/L		5.94 mg/L		25	
5. Total phosphorus	ND		ND		1	
6. Total Kjeldahl nitrogen (TKN)	ND		ND		1	
7. Total nitrogen (as N)	ND		ND		1	
8. pH (minimum)	7.35 s.u.		7.35 s.u.		24	
	8.5 s.u.		8.5 s.u.		24	

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

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EPA Identification Number	NPDES Permit Number AR0042846	Facility Name Ash Grove Cement Company	Outfall Number 003
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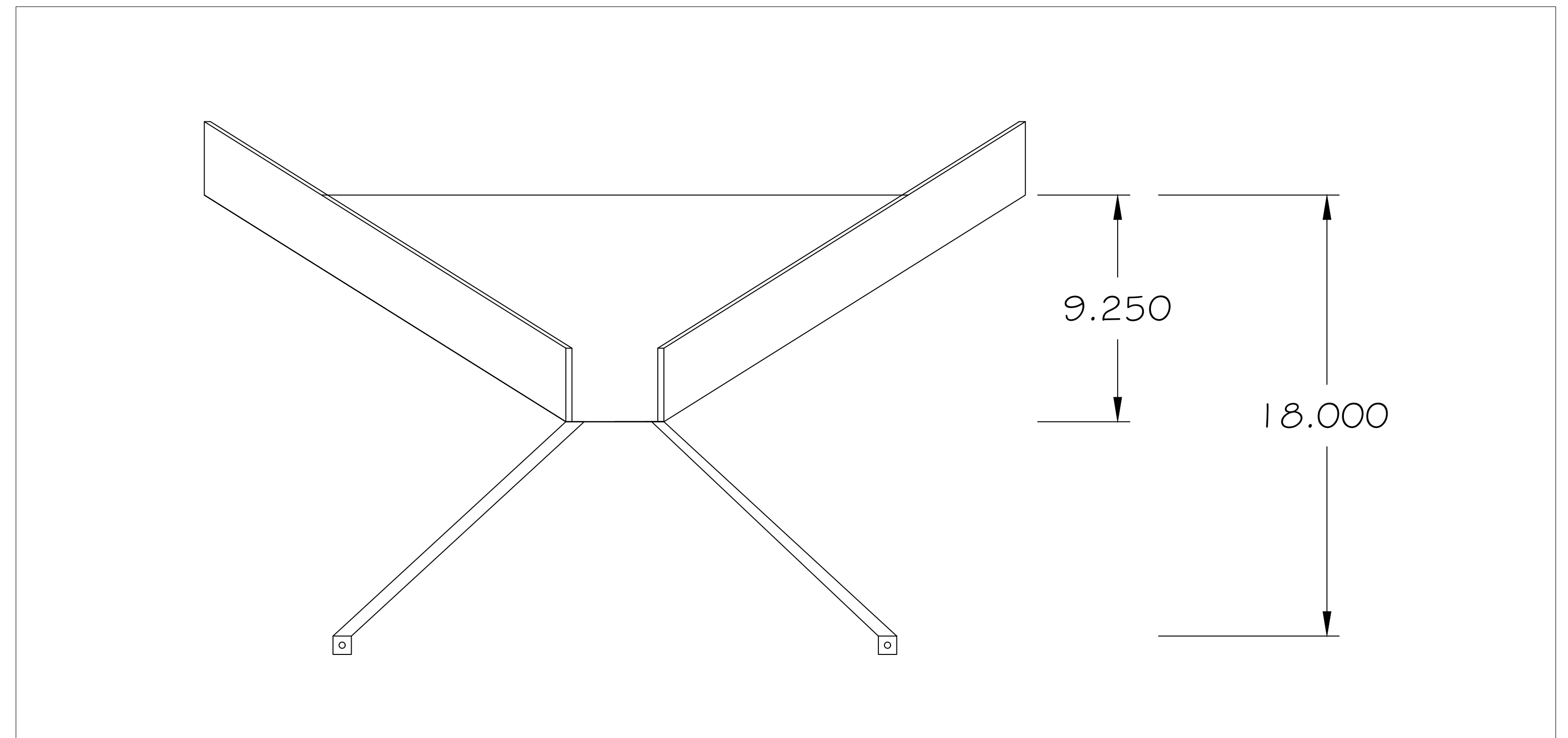
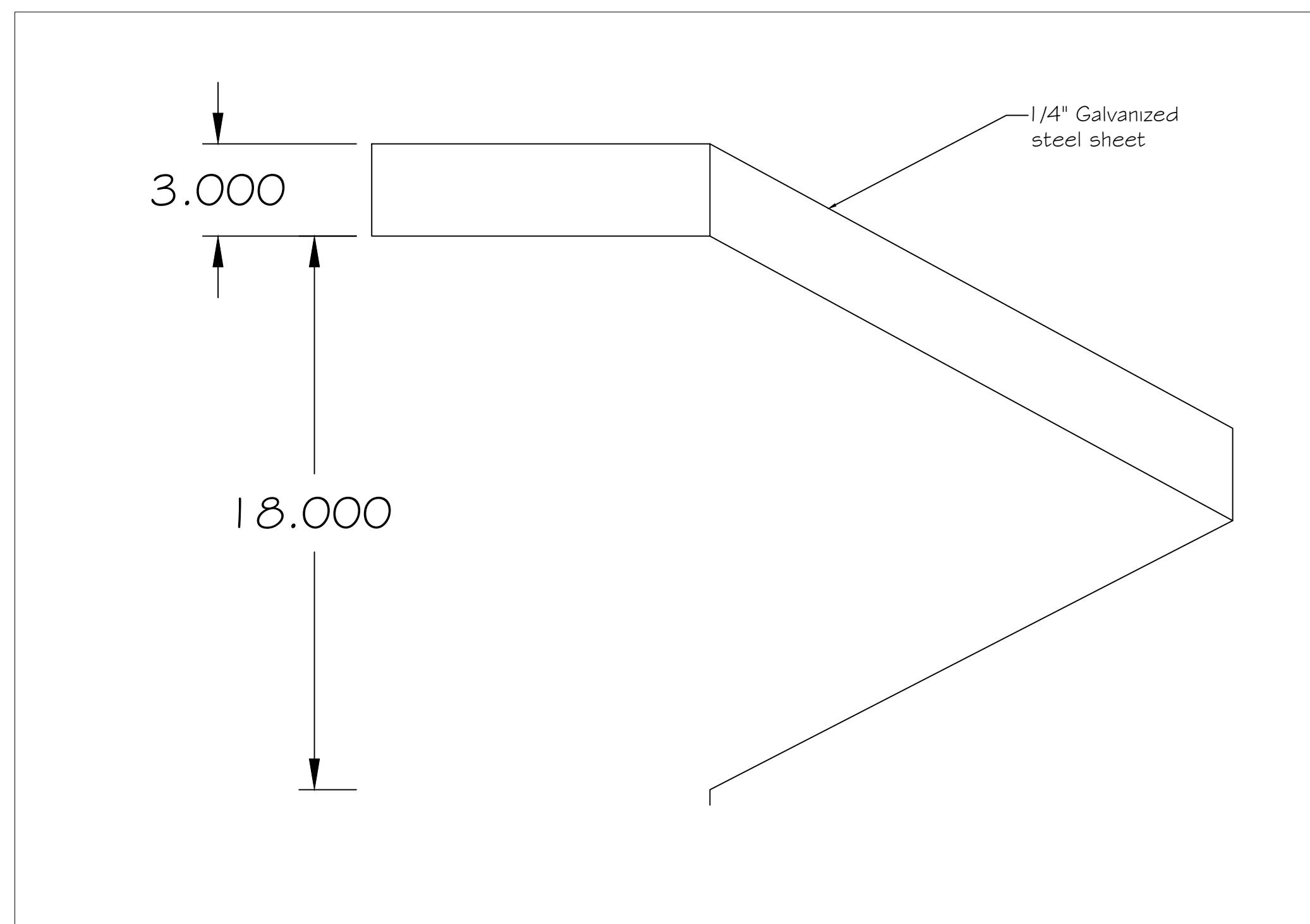
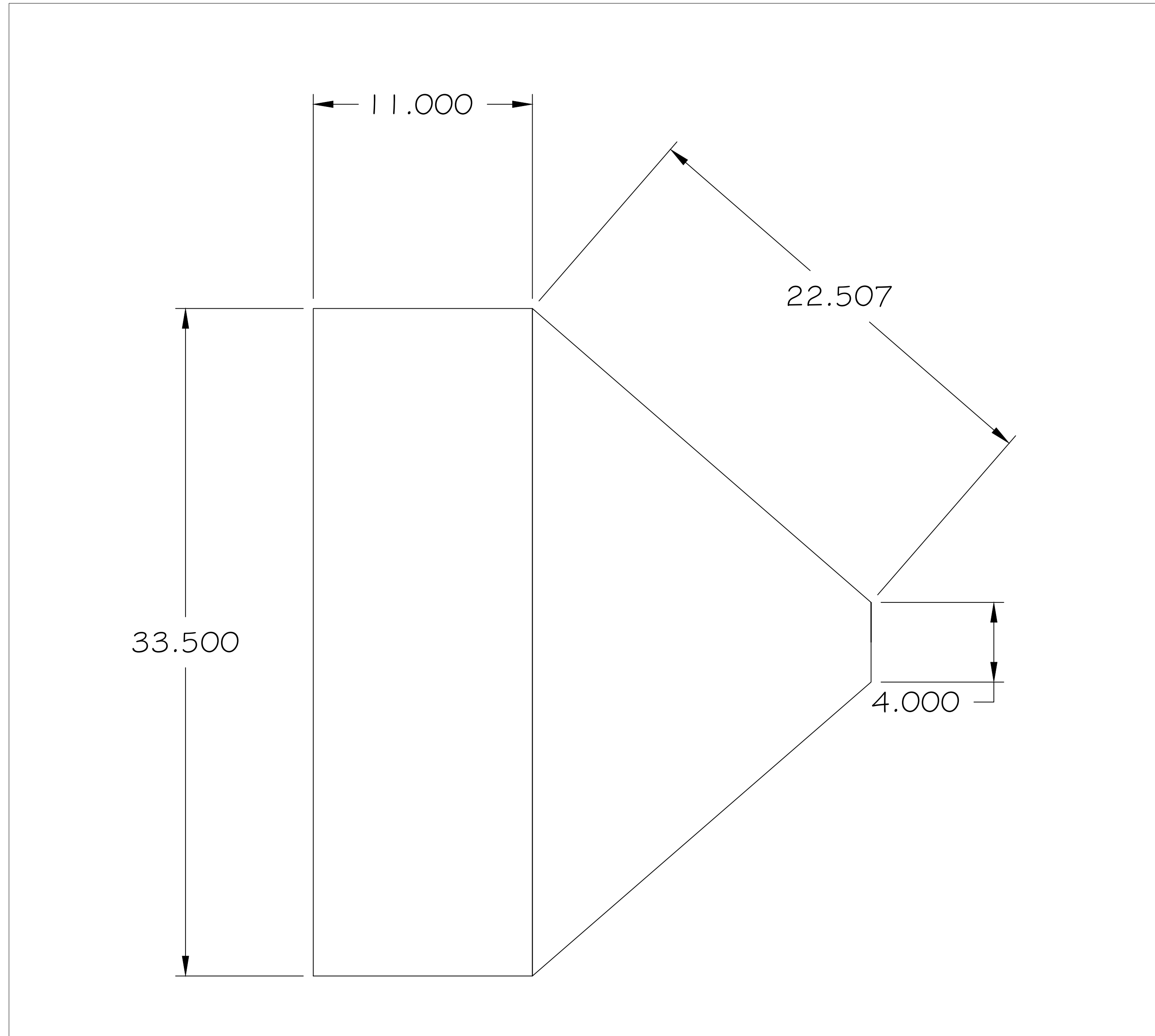
TABLE C. TOXIC POLLUTANTS, CERTAIN HAZARDOUS SUBSTANCES, AND ASBESTOS (40 CFR 122.26(c)(1)(E)(4) and 40 CFR 122.21(g)(7)(vi)(B) and (vii))¹

List each pollutant shown in Exhibits 2F-2, 2F-3, and 2F-4 that you know or have reason to believe is present. Complete one table for each outfall. See the instructions for additional details and requirements.

Pollutant and CAS Number (if available)	Maximum Daily Discharge (specify units)		Average Daily Discharge (specify units)		Number of Storm Events Sampled	Source of Information (new source/new dischargers only; use codes in instructions)
	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite	Grab Sample Taken During First 30 Minutes	Flow-Weighted Composite		
Sulfate	95.4 mg/L		95.4 mg/L		1	
Bromide	3.05 mg/L		3.05 mg/L		1	
Arsenic	2.21 ug/L		1.59 ug/L		5	
Fecal Coliform	410 #/100 mls		68.5 #/100 mls		1	
Lead	0.599 ug/L		0.599 ug/L		1	
Copper	1.09 ug/L		1.09 ug/L		1	
Nickel	1.18 ug/L		1.18 ug/L		1	

¹ Sampling shall be conducted according to sufficiently sensitive test procedures (i.e., methods) approved under 40 CFR 136 for the analysis of pollutants or pollutant parameters or required under 40 CFR chapter I, subchapter N or O. See instructions and 40 CFR 122.21(e)(3).

ATTACHMENT E - FUNNEL DESIGN



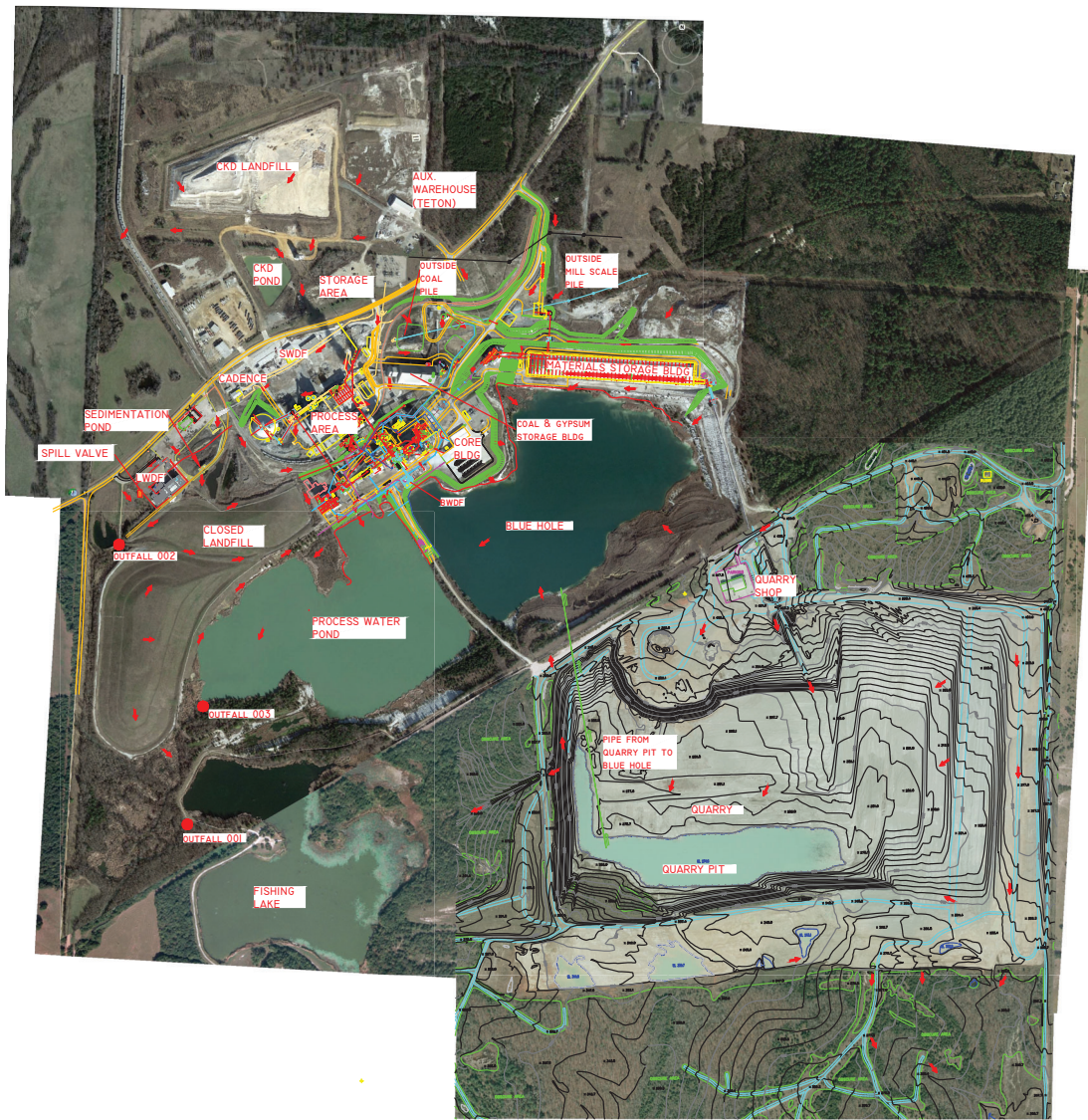
SPECIAL NOTES:

1. DENOTES DETAIL NO.
2. DENOTES SHEET NO.
3. BREAK ALL SHARP EDGES UNLESS OTHERWISE NOTED.
4. ALL WELDS TO BE GRIND SMOOTH AND FREE FROM PITS AND SLAG.

COMMON FRACTIONS — ± 1/32 TWO DECIMALS — ± .01
 FOUR DECIMALS — ± .0005 ANGLE — ± 0'-0"
 THREE DECIMALS — ± .005 SURFACE FINISH —

		CAD FILE	
		NAME symetro tools	
FOREMAN PLANT		ASH GROVE	
TITLE		DRAWING NO.	
FUNNEL FOR NPDES OUTFALL			
DATE	SCALE	DRAWING NO.	REV 0
2-10-22	NOTED	D-	SH 2 OF 2
DRAWN BY	APPR.	ROSS	
NO.	REVISION	DATE	APPR.

ATTACHMENT F



NO.	REVISION	BY	DATE	APP	NO.	REVISION	BY	DATE	APP

SCALE AS SHOWN
 APPROVED
 DATE 08/21/18
 DESIGNED PLB
 DRAFTED JLB
 APPROVED CB



13000 CANTRELL ROAD
 LITTLE ROCK, AR 72223
 PHONE: 501-975-8100
 WWW.ECCI.COM

ASH GROVE CEMENT COMPANY
 FOREMAN, ARKANSAS
 SWPPP / SPCC PLAN
 OVERALL DRAINAGE MAP

ASH GROVE CEMENT COMPANY



CONTRACT NO.

ADEQ

ARKANSAS
Department of Environmental Quality

Application Form PPS

Priority Pollutant Scan Information

E:NEWMAIN:FORMS:FORM PPS
Revised 12/07

ATTENTION

AClean@ Sampling Techniques

Water quality (WQ) standards (Based on aquatic toxicity and human health criteria) for many of the heavy metals are Aat@ analytical methods= detection levels (MDL).

It is recognized that **unclean** sampling and lab techniques can and do **cause** contamination sometimes causing measurements to be Aseen@ as **violations** of the WQ standards. Therefore, the permittee must recognize the **importance** of **eliminating** contamination.

For personnel responsible for collecting samples in answer to effluent monitoring requirements, the Department recommends following sample collection and handling in accordance with EPA=s **Method 1669: Sampling Ambient Water for Determination of Trace Metals at EPA Water Quality Criteria Levels** as closely as possible and as economically feasible. A copy of Method 1669 is available upon request.

Please convey to your contract testing laboratory the extreme importance of proper sampling techniques associated with analytical testing for heavy metals. Some of the techniques may be considered too expensive to justify implementation but it could be in the best interest of your facility to **submit the PPS Form by using common sense AClean@ Sampling Techniques.**

GENERAL INSTRUCTION

1. **Generation of a form similar to the PPS form is prohibited without expressed written permission of ADEQ, Discharge Permits Section, Water Division.**
2. All major facilities, all categorical industries, or any facility that believes there are priority pollutant(s) present in their discharge, must submit the Form PPS.
3. All facilities must monitor for **metals** and **cyanide**.
4. Testing requirements for categorical industries are listed in Attachment 1.
5. If one of the EPA approved test methods (40 CFR Part 136) is used the method detection level (MDL) **must be as low as Minimum Quantification Levels (MQL)**. MQLs are based on EPA Region 6 guidance dated April 10, 2006: “MQL = 3.3 X MDL”
6. All the units must be expressed in µg/l (Micro grams per liter).
7. **All the results less than Used Method Detection Level Achieved are reported as ND (Not Detected)**.
8. The data requested for the priority pollutant scan in the enclosures shall be submitted with copies of the laboratory results, MDLs and MQLs. Certification that QA/QC procedures were implemented must be submitted with the requested information.
9. All analyses must be performed at the minimum level of sensitivity. The analyses must demonstrate that an acceptable calibration point as low as MQL was used. Test procedures must conform to approved EPA methodology listed in 40 CFR Part 136.

ATTACHMENT 1

TESTING REQUIREMENTS FOR ORGANIC TOXIC POLLUTANTS INDUSTRY CATEGORY

INDUSTRY CATEGORY

	volatile	Acid	Base/Neutral	Pesticide
Adhesives & Sealants	X	X	X	-
Aluminum Forming	X	X	X	-
Auto & Other Laundries	X	X	X	X
Battery Manufacturing	X	-	X	-
Coal Mining	X	X	X	X
Coil Coating	X	X	X	-
Copper Forming	X	X	X	-
Electric & Electronic Compounds	X	X	X	X
Electroplating	X	X	X	-
Explosives Manufacturing	-	X	X	-
Foundries	X	X	X	-
Gum & Wood Chemicals	X	X	X	X
Inorganic Chemicals Manufacturing	X	X	X	-
Iron & Steel Manufacturing	X	X	X	-
Leather Tanning & Finishing	X	X	X	X
Mechanical Products Manufacturing	X	X	X	-
Nonferrous Metals Manufacturing	X	X	X	X
Ore Mining	X	X	X	X
Organic Chemicals Manufacturing	X	X	X	X
Paint & Ink Formulation	X	X	X	X
Pesticides	X	X	X	X
Petroleum Refining	X	X	X	X
Pharmaceutical Preparations	X	X	X	-
Photographic Equipment & Supplies	X	X	X	X
Plastic & Synthetic Materials Manufacturing	X	X	X	X
Plastic Processing	X	-	-	-
Porcelain Enameling	X	-	X	X
Printing & Publishing	X	X	X	X
Pulp & Paperboard Mills	X	X	X	X
Rubber Processing	X	X	X	-
Soap & Detergent Manufacturing	X	X	X	-
Steam Electric Power Plants	X	X	X	-
Textile Mills	X	X	X	X
Timber Products Processing	X	X	X	X

X

Testing required.
 - Testing not required.

**ARKANSAS Department of Environmental Quality
PPS REQUIREMENTS**

1. Name of facility:

___Ash Grove Cement Company_____

2. Name, address and telephone number of laboratory:

___Arkansas Analytical, Inc._____

___8100 National Drive, Little Rock, AR 72209_____

3. Is the lab certified by the State of Arkansas? Yes No

4. What are the certification dates?

Issued data ___10/30/2021_____ Expire date ___10/30/2022_____

5. Is the laboratory certified for all the parameters?

YES No (Explain)

6. Date and time of samples collected:

outfall 001: 5/2/2022 13:57; Outfall 002: 5/2/2022 13:10; Outfall 003: 5/2/2022 14:41

7. Date and time samples were received in the laboratory:

___5/2/2022, 18:01_____

8. Sample location (Outfall No.):

___outfall 001_____

9. Samples collected by:

Name ___Matthew Brooks (Ash Grove) Clint Jones (Arkansas Analytical)_____

Title ___Environmental Engineer and Sampling Technician_____

Telephone ___(870) 542-3032 (Brooks); (501) 455-3233 (Jones)_____

10. I certify under penalty of law that this document and all attachments were prepared under my direction of supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information submitted is, to the best of my knowledge and belief, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

___Stuart Tomlinson_____ Vice President of Manufacturing_
Printed Name of person signing Title

Stuart Tomlinson

June 7, 2022

Signature

Date signed

List all attachments to this form:

METALS AND CYANIDE	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g/l}$)
	RESULTS ($\mu\text{g/l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g/l}$)	
1. Antimony (Total), Recoverable	ND	200.8	60	60
2. Arsenic (Total), Recoverable	0.547	200.8	0.5	0.5
3. Beryllium (Total), Recoverable	ND	200.8	0.5	0.5
4. Cadmium (Total), Recoverable	ND	200.8	0.5	0.5
5. Chromium (Total), Recoverable	ND	200.8	10	10
7. Chromium (6+), Dissolved	ND	SM3500-CrB	10	10
8. Copper (Total), Recoverable	ND	200.8	0.5	0.5
9. Lead (Total), Recoverable	ND	200.8	0.5	0.5
10. Mercury (Total), Recoverable	ND	EPA 1631E	0.005	0.005
12. Nickel (Total), Recoverable	ND	200.8	0.5	0.5
13. Selenium (Total), Recoverable	ND	200.8	5.0	5
14. Silver (Total), Recoverable	ND	200.8	0.5	0.5
15. Thallium (Total), Recoverable	ND	200.8	0.26	0.5
16. Zinc (Total), Recoverable	ND	200.8	20	20
129. Phenols, Total Recoverable	ND	EPA 420.1	5	5
17. Cyanide (Total), Recoverable	ND	SM 4500-CN B	10	10

DIOXIN	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g/l}$)
	RESULTS ($\mu\text{g/l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g/l}$)	
18. 2,3,7,8-Tetrachloro-debenzo-p-dioxin (TCDD)	ND	625.1	10.00	0.00001

VOLATILE COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
19. Acrolein	ND	624.1	50	50
20. Acrylonitrile	ND	624.1	20	20
21. Benzene	ND	624.1	10	10
22. Bromoform	ND	624.1	10	10
23. Carbon Tetrachloride	ND	624.1	2	2
24. chlorobenzene	ND	624.1	10	10
25. chlorodibromomethane	ND	624.1	10	10
26. chloroethane	ND	624.1	50	50
27. 2-chloroethyl vinyl ether	ND	624.1	10	10
28. chloroform	ND	624.1	10	10
29. Dichlorobromomethane	ND	624.1	10	10
30. 1,1-Dichloroethane	ND	624.1	10	10
31. 1,2-Dichloroethane	ND	624.1	10	10
32. 1,1-Dichloroethylene	ND	624.1	10	10
33. 1,2-Dichloropropane	ND	624.1	10	10
34. 1,3-Dichloropropylene	ND	624.1		10
35. Ethylbenzene	ND	624.1	10	10
36. Methyl Bromide [Bromomethane]	ND	624.1	50	50
37. Methyl chloride [Chloromethane]	ND	624.1	50	50
38. Methylene Chloride	ND	624.1	20	20
39. 1,1,2,2-Tetrachloroethane	ND	624.1	10	10
40. Tetrachloroethylene	ND	624.1	10	10
41. toluene	ND	624.1	10	10
42. 1,2-trans-Dichloroethylene	ND	624.1	10	10
43. 1,1,1-Trichloroethane	ND	624.1	10	10
44. 1,1,2-Trichloroethane	ND	624.1	10	10
45. Trichloroethylene	ND	624.1	10	10
46. vinyl chloride	ND	624.1	10	10

<i>ACID COMPOUNDS</i>	LABORATORY ANALYSIS			<i>REQUIRED MQL (µg/l)</i>
	<i>RESULTS (µg/l)</i>	<i>APPROVED EPA METHOD USED</i>	<i>DETECTION LEVEL ACHIEVED (µg/l)</i>	
47. <i>2-Chlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
48. <i>2,4-Dichlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
49. <i>2,4-Dimethylphenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
50. <i>4,6-Dinitro-o-Cresol</i> <i>[2 methyl 4,6-dinitrophenol]</i>	<i>ND</i>	<i>625.1</i>	<i>50</i>	<i>50</i>
51. <i>2,4-Dinitrophenol</i>	<i>ND</i>	<i>625.1</i>	<i>50</i>	<i>50</i>
52. <i>2-Nitrophenol</i>	<i>ND</i>	<i>625.1</i>	<i>20</i>	<i>20</i>
53. <i>4-Nitrophenol</i>	<i>ND</i>	<i>625.1</i>	<i>50</i>	<i>50</i>
54. <i>P-Chloro-m-Cresol</i> <i>[4 chloro-3-methylphenol]</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
55. <i>Pentachlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>5</i>	<i>5</i>
56. <i>Phenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
57. <i>2,4,6-Trichlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>

BASE/NEUTRAL COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
58. Acenaphthene	ND	625.1	10	10
59. Acenaphthylene	ND	625.1	10	10
60. Anthracene	ND	625.1	10	10
61. Benzidine	ND	625.1	50	50
62. Benzo(a)anthracene	ND	625.1	5	5
63. Benzo(a)pyrene	ND	625.1	5	5
64. 3,4-Benzofluoranthene	ND	625.1	10	10
65. Benzo(ghi)perylene	ND	625.1	20	20
66. Benzo(k)fluoranthene	ND	625.1	5	5
67. Bis(2-chloroethoxy) methane	ND	625.1	10	10
68. Bis(2-chloroethyl) ether	ND	625.1	10	10
69. Bis(2-chloroisopropyl) ether	ND	625.1	10	10
70. Bis(2-ethylhexyl) phthalate	ND	625.1	10	10
71. 4-Bromophenyl phenyl ether	ND	625.1	10	10
72. Butyl benzyl phthalate	ND	625.1	10	10
73. 2-Chloronaphthalene	ND	625.1	10	10
74. 4-chlorophenyl phenyl ether	ND	625.1	10	10
75. Chrysene	ND	625.1	5	5
76. Dibenzo (a,h) anthracene	ND	625.1	5	5
77. 1,2-Dichlorobenzene	ND	625.1	10	10
78. 1,3-Dichlorobenzene	ND	625.1	10	10
79. 1,4-Dichlorobenzene	ND	625.1	10	10
80. 3,3'-Dichlorobenzidine	ND	625.1	5	5
81. Diethyl Phthalate	ND	625.1	10	10
82. Dimethyl Phthalate	ND	625.1	10	10
83. Di-n-Butyl Phthalate	ND	625.1	10	10
84. 2,4-Dinitrotoluene	ND	625.1	10	10
85. 2,6-Dinitrotoluene	ND	625.1	10	10
86. Di-n-octyl Phthalate	ND	625.1	10	10

BASE/NEUTRAL COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
87. 1,2-Diphenylhydrazine	ND	625.1	20	20
89. Fluorene	ND	625.1	10	10
90. Hexachlorobenzene	ND	625.1	5	5
91. Hexachlorobutadiene	ND	625.1	10	10
92. Hexachlorocyclopentadiene	ND	625.1	10	10
93. Hexachloroethane	ND	625.1	20	20
94. Indeno (1,2,3-cd) pyrene (2,3-o-phenylene pyrene)	ND	625.1	5	5
95. Isophorone	ND	625.1	10	10
96. Naphthalene	ND	625.1	10	10
97. Nitrobenzene	ND	625.1	10	10
98. N-nitrosodimethylamine	ND	625.1	20	50
99. N-nitrosodi-n-propylamine	ND	625.1	20	20
100. N-nitrosodiphenylamine	ND	625.1	20	20
101. Phenanthrene	ND	625.1	10	10
102. Pyrene	ND	625.1	10	10
103. 1,2,4-Trichlorobenzene	ND	625.1	10	10

PESTICIDES	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g/l}$)
	RESULTS ($\mu\text{g/l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g/l}$)	
104. Aldrin	ND	608.3	0.01	0.01
105. Alpha-BHC	ND	608.3	0.05	0.05
106. Beta-BHC	ND	608.3	0.05	0.05
107. Gamma-BHC	ND	608.3	0.05	0.05
108. Delta-BHC	ND	608.3	0.05	0.05
109. Chlordane	ND	608.3	0.2	0.2
110. 4,4'-DDT	ND	608.3	0.02	0.02
111. 4,4'-DDE (p,p-DDX)	ND	608.3	0.1	0.1
112. 4,4'-DDD 9(p,p-TDE)	ND	608.3	0.1	0.1
113. Dieldrin	ND	608.3	0.02	0.02
114. Alpha-endosulfan	ND	608.3	0.05	0.01
115. Beta-endosulfan	ND	608.3	0.02	0.02
116. Endosulfan sulfate	ND	608.3	0.1	0.1
117. Endrin	ND	608.3	0.02	0.02
118. Endrin aldehyde	ND	608.3	0.1	0.1
119. Heptachlor	ND	608.3	0.01	0.01
120. Heptachlor epoxide (BHC-hexachlorocyclohexane)	ND	608.3	0.010	0.01
130. Chlorpyrifos	ND	608.3	0.07	0.07
121. PCB-1242	ND	608.3	0.2	0.2
122. PCB-1254	ND	608.3	0.2	0.2
123. PCB-1221	ND	608.3	0.2	0.2
124. PCB-1232	ND	608.3	0.2	0.2
125. PCB-1248	ND	608.3	0.2	0.2
126. PCB-1260	ND	608.3	0.2	0.2
127. PCB-1016	ND	608.3	0.2	0.2
128. Toxaphene	ND	608.3	0.3	0.3

ADEQ

ARKANSAS
Department of Environmental Quality

Application Form PPS

Priority Pollutant Scan Information

Outfall 002

METALS AND CYANIDE	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g}/\text{l}$)
	RESULTS ($\mu\text{g}/\text{l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g}/\text{l}$)	
1. Antimony (Total), Recoverable	ND	200.8	60	60
2. Arsenic (Total), Recoverable	2.54	200.8		0.5
3. Beryllium (Total), Recoverable	ND	200.8	0.5	0.5
4. Cadmium (Total), Recoverable	ND	200.8	0.5	0.5
5. Chromium (Total), Recoverable	ND	200.8	10	10
7. Chromium (6+), Dissolved	ND	SM3500-CrB	10	10
8. Copper (Total), Recoverable	0.995	200.8	0.5	0.5
9. Lead (Total), Recoverable	ND	200.8	0.5	0.5
10. Mercury (Total), Recoverable	ND	EPA 1631E	0.005	0.005
12. Nickel (Total), Recoverable	2.38	200.8	0.5	0.5
13. Selenium (Total), Recoverable	ND	200.8	5.0	5
14. Silver (Total), Recoverable	ND	200.8	0.5	0.5
15. Thallium (Total), Recoverable	ND	200.8	0.26	0.5
16. Zinc (Total), Recoverable	ND	200.8	20	20
129. Phenols, Total Recoverable	ND	EPA 420.1	5	5
17. Cyanide (Total), Recoverable	ND	SM 4500-CN B	10	10

DIOXIN	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g}/\text{l}$)
	RESULTS ($\mu\text{g}/\text{l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g}/\text{l}$)	
18. 2,3,7,8-Tetrachloro-debenzo-p-dioxin (TCDD)	ND	625.1	10.00	0.00001

VOLATILE COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
19. Acrolein	ND	624.1	50	50
20. Acrylonitrile	ND	624.1	20	20
21. Benzene	ND	624.1	10	10
22. Bromoform	ND	624.1	10	10
23. Carbon Tetrachloride	ND	624.1	2	2
24. chlorobenzene	ND	624.1	10	10
25. chlorodibromomethane	ND	624.1	10	10
26. chloroethane	ND	624.1	50	50
27. 2-chloroethyl vinyl ether	ND	624.1	10	10
28. chloroform	ND	624.1	10	10
29. Dichlorobromomethane	ND	624.1	10	10
30. 1,1-Dichloroethane	ND	624.1	10	10
31. 1,2-Dichloroethane	ND	624.1	10	10
32. 1,1-Dichloroethylene	ND	624.1	10	10
33. 1,2-Dichloropropane	ND	624.1	10	10
34. 1,3-Dichloropropylene	ND	624.1		10
35. Ethylbenzene	ND	624.1	10	10
36. Methyl Bromide [Bromomethane]	ND	624.1	50	50
37. Methyl chloride [Chloromethane]	ND	624.1	50	50
38. Methylene Chloride	ND	624.1	20	20
39. 1,1,2,2-Tetrachloroethane	ND	624.1	10	10
40. Tetrachloroethylene	ND	624.1	10	10
41. toluene	ND	624.1	10	10
42. 1,2-trans-Dichloroethylene	ND	624.1	10	10
43. 1,1,1-Trichloroethane	ND	624.1	10	10
44. 1,1,2-Trichloroethane	ND	624.1	10	10
45. Trichloroethylene	ND	624.1	10	10
46. vinyl chloride	ND	624.1	10	10

<i>ACID COMPOUNDS</i>	LABORATORY ANALYSIS			<i>REQUIRED MQL (µg/l)</i>
	<i>RESULTS (µg/l)</i>	<i>APPROVED EPA METHOD USED</i>	<i>DETECTION LEVEL ACHIEVED (µg/l)</i>	
47. <i>2-Chlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
48. <i>2,4-Dichlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
49. <i>2,4-Dimethylphenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
50. <i>4,6-Dinitro-o-Cresol</i> <i>[2 methyl 4,6-dinitrophenol]</i>	<i>ND</i>	<i>625.1</i>	<i>50</i>	<i>50</i>
51. <i>2,4-Dinitrophenol</i>	<i>ND</i>	<i>625.1</i>	<i>50</i>	<i>50</i>
52. <i>2-Nitrophenol</i>	<i>ND</i>	<i>625.1</i>	<i>20</i>	<i>20</i>
53. <i>4-Nitrophenol</i>	<i>ND</i>	<i>625.1</i>	<i>50</i>	<i>50</i>
54. <i>P-Chloro-m-Cresol</i> <i>[4 chloro-3-methylphenol]</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
55. <i>Pentachlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>5</i>	<i>5</i>
56. <i>Phenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>
57. <i>2,4,6-Trichlorophenol</i>	<i>ND</i>	<i>625.1</i>	<i>10</i>	<i>10</i>

BASE/NEUTRAL COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
58. Acenaphthene	ND	625.1	10	10
59. Acenaphthylene	ND	625.1	10	10
60. Anthracene	ND	625.1	10	10
61. Benzidine	ND	625.1	50	50
62. Benzo(a)anthracene	ND	625.1	5	5
63. Benzo(a)pyrene	ND	625.1	5	5
64. 3,4-Benzofluoranthene	ND	625.1	10	10
65. Benzo(ghi)perylene	ND	625.1	20	20
66. Benzo(k)fluoranthene	ND	625.1	5	5
67. Bis(2-chloroethoxy) methane	ND	625.1	10	10
68. Bis(2-chloroethyl) ether	ND	625.1	10	10
69. Bis(2-chloroisopropyl) ether	ND	625.1	10	10
70. Bis(2-ethylhexyl) phthalate	ND	625.1	10	10
71. 4-Bromophenyl phenyl ether	ND	625.1	10	10
72. Butyl benzyl phthalate	ND	625.1	10	10
73. 2-Chloronaphthalene	ND	625.1	10	10
74. 4-chlorophenyl phenyl ether	ND	625.1	10	10
75. Chrysene	ND	625.1	5	5
76. Dibenzo (a,h) anthracene	ND	625.1	5	5
77. 1,2-Dichlorobenzene	ND	625.1	10	10
78. 1,3-Dichlorobenzene	ND	625.1	10	10
79. 1,4-Dichlorobenzene	ND	625.1	10	10
80. 3,3'-Dichlorobenzidine	ND	625.1	5	5
81. Diethyl Phthalate	ND	625.1	10	10
82. Dimethyl Phthalate	ND	625.1	10	10
83. Di-n-Butyl Phthalate	ND	625.1	10	10
84. 2,4-Dinitrotoluene	ND	625.1	10	10
85. 2,6-Dinitrotoluene	ND	625.1	10	10
86. Di-n-octyl Phthalate	ND	625.1	10	10

BASE/NEUTRAL COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
87. 1,2-Diphenylhydrazine	ND	625.1	20	20
89. Fluorene	ND	625.1	10	10
90. Hexachlorobenzene	ND	625.1	5	5
91. Hexachlorobutadiene	ND	625.1	10	10
92. Hexachlorocyclopentadiene	ND	625.1	10	10
93. Hexachloroethane	ND	625.1	20	20
94. Indeno (1,2,3-cd) pyrene (2,3-o-phenylene pyrene)	ND	625.1	5	5
95. Isophorone	ND	625.1	10	10
96. Naphthalene	ND	625.1	10	10
97. Nitrobenzene	ND	625.1	10	10
98. N-nitrosodimethylamine	ND	625.1	20	50
99. N-nitrosodi-n-propylamine	ND	625.1	20	20
100. N-nitrosodiphenylamine	ND	625.1	20	20
101. Phenanthrene	ND	625.1	10	10
102. Pyrene	ND	625.1	10	10
103. 1,2,4-Trichlorobenzene	ND	625.1	10	10

PESTICIDES	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
104. Aldrin	ND	608.3	0.01	0.01
105. Alpha-BHC	ND	608.3	0.05	0.05
106. Beta-BHC	ND	608.3	0.05	0.05
107. Gamma-BHC	ND	608.3	0.05	0.05
108. Delta-BHC	ND	608.3	0.05	0.05
109. Chlordane	ND	608.3	0.2	0.2
110. 4,4'-DDT	ND	608.3	0.02	0.02
111. 4,4'-DDE (p,p-DDX)	ND	608.3	0.1	0.1
112. 4,4'-DDD 9(p,p-TDE)	ND	608.3	0.1	0.1
113. Dieldrin	ND	608.3	0.02	0.02
114. Alpha-endosulfan	ND	608.3	0.05	0.01
115. Beta-endosulfan	ND	608.3	0.02	0.02
116. Endosulfan sulfate	ND	608.3	0.1	0.1
117. Endrin	ND	608.3	0.02	0.02
118. Endrin aldehyde	ND	608.3	0.1	0.1
119. Heptachlor	ND	608.3	0.01	0.01
120. Heptachlor epoxide (BHC-hexachlorocyclohexane)	ND	608.3	0.010	0.01
130. Chlorpyrifos	ND	608.3	0.07	0.07
121. PCB-1242	ND	608.3	0.2	0.2
122. PCB-1254	ND	608.3	0.2	0.2
123. PCB-1221	ND	608.3	0.2	0.2
124. PCB-1232	ND	608.3	0.2	0.2
125. PCB-1248	ND	608.3	0.2	0.2
126. PCB-1260	ND	608.3	0.2	0.2
127. PCB-1016	ND	608.3	0.2	0.2
128. Toxaphene	ND	608.3	0.3	0.3

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Application Form PPS

Priority Pollutant Scan Information

Outfall 003

METALS AND CYANIDE	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g}/\text{l}$)
	RESULTS ($\mu\text{g}/\text{l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g}/\text{l}$)	
1. Antimony (Total), Recoverable	ND	200.8	60	60
2. Arsenic (Total), Recoverable	1.29	200.8	0.5	0.5
3. Beryllium (Total), Recoverable	ND	200.8	0.5	0.5
4. Cadmium (Total), Recoverable	ND	200.8	0.5	0.5
5. Chromium (Total), Recoverable	ND	200.8	10	10
7. Chromium (6+), Dissolved	ND	SM3500- CrB	10	10
8. Copper (Total), Recoverable	1.09	200.8	0.5	0.5
9. Lead (Total), Recoverable	0.599	200.8	0.5	0.5
10. Mercury (Total), Recoverable	ND	EPA 1631E	0.005	0.005
12. Nickel (Total), Recoverable	1.18	200.8	0.5	0.5
13. Selenium (Total), Recoverable	ND	200.8	5.0	5
14. Silver (Total), Recoverable	ND	200.8	0.5	0.5
15. Thallium (Total), Recoverable	ND	200.8	0.26	0.5
16. Zinc (Total), Recoverable	ND	200.8	20	20
129. Phenols, Total Recoverable	ND	EPA 420.1	5	5
17. Cyanide (Total), Recoverable	ND	SM 4500- CN B	10	10

DIOXIN	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g}/\text{l}$)
	RESULTS ($\mu\text{g}/\text{l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g}/\text{l}$)	
18. 2,3,7,8-Tetrachloro-debenzo-p-dioxin (TCDD)	ND	625.1	10.00	0.00001

VOLATILE COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
19. Acrolein	ND	624.1	50	50
20. Acrylonitrile	ND	624.1	20	20
21. Benzene	ND	624.1	10	10
22. Bromoform	ND	624.1	10	10
23. Carbon Tetrachloride	ND	624.1	2	2
24. chlorobenzene	ND	624.1	10	10
25. chlorodibromomethane	ND	624.1	10	10
26. chloroethane	ND	624.1	50	50
27. 2-chloroethyl vinyl ether	ND	624.1	10	10
28. chloroform	ND	624.1	10	10
29. Dichlorobromomethane	ND	624.1	10	10
30. 1,1-Dichloroethane	ND	624.1	10	10
31. 1,2-Dichloroethane	ND	624.1	10	10
32. 1,1-Dichloroethylene	ND	624.1	10	10
33. 1,2-Dichloropropane	ND	624.1	10	10
34. 1,3-Dichloropropylene	ND	624.1		10
35. Ethylbenzene	ND	624.1	10	10
36. Methyl Bromide [Bromomethane]	ND	624.1	50	50
37. Methyl chloride [Chloromethane]	ND	624.1	50	50
38. Methylene Chloride	ND	624.1	20	20
39. 1,1,2,2-Tetrachloroethane	ND	624.1	10	10
40. Tetrachloroethylene	ND	624.1	10	10
41. toluene	ND	624.1	10	10
42. 1,2-trans-Dichloroethylene	ND	624.1	10	10
43. 1,1,1-Trichloroethane	ND	624.1	10	10
44. 1,1,2-Trichloroethane	ND	624.1	10	10
45. Trichloroethylene	ND	624.1	10	10
46. vinyl chloride	ND	624.1	10	10

ACID COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
47. 2-Chlorophenol	ND	625.1	10	10
48. 2,4-Dichlorophenol	ND	625.1	10	10
49. 2,4-Dimethylphenol	ND	625.1	10	10
50. 4,6-Dinitro-o-Cresol [2 methyl 4,6-dinitrophenol]	ND	625.1	50	50
51. 2,4-Dinitrophenol	ND	625.1	50	50
52. 2-Nitrophenol	ND	625.1	20	20
53. 4-Nitrophenol	ND	625.1	50	50
54. P-Chloro-m-Cresol [4 chloro-3-methylphenol]	ND	625.1	10	10
55. Pentachlorophenol	ND	625.1	5	5
56. Phenol	ND	625.1	10	10
57. 2,4,6-Trichlorophenol	ND	625.1	10	10

BASE/NEUTRAL COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
58. Acenaphthene	ND	625.1	10	10
59. Acenaphthylene	ND	625.1	10	10
60. Anthracene	ND	625.1	10	10
61. Benzidine	ND	625.1	50	50
62. Benzo(a)anthracene	ND	625.1	5	5
63. Benzo(a)pyrene	ND	625.1	5	5
64. 3,4-Benzofluoranthene	ND	625.1	10	10
65. Benzo(ghi)perylene	ND	625.1	20	20
66. Benzo(k)fluoranthene	ND	625.1	5	5
67. Bis(2-chloroethoxy) methane	ND	625.1	10	10
68. Bis(2-chloroethyl) ether	ND	625.1	10	10
69. Bis(2-chloroisopropyl) ether	ND	625.1	10	10
70. Bis(2-ethylhexyl) phthalate	ND	625.1	10	10
71. 4-Bromophenyl phenyl ether	ND	625.1	10	10
72. Butyl benzyl phthalate	ND	625.1	10	10
73. 2-Chloronaphthalene	ND	625.1	10	10
74. 4-chlorophenyl phenyl ether	ND	625.1	10	10
75. Chrysene	ND	625.1	5	5
76. Dibenzo (a,h) anthracene	ND	625.1	5	5
77. 1,2-Dichlorobenzene	ND	625.1	10	10
78. 1,3-Dichlorobenzene	ND	625.1	10	10
79. 1,4-Dichlorobenzene	ND	625.1	10	10
80. 3,3'-Dichlorobenzidine	ND	625.1	5	5
81. Diethyl Phthalate	ND	625.1	10	10
82. Dimethyl Phthalate	ND	625.1	10	10
83. Di-n-Butyl Phthalate	ND	625.1	10	10
84. 2,4-Dinitrotoluene	ND	625.1	10	10
85. 2,6-Dinitrotoluene	ND	625.1	10	10
86. Di-n-octyl Phthalate	ND	625.1	10	10

BASE/NEUTRAL COMPOUNDS	LABORATORY ANALYSIS			REQUIRED MQL (µg/l)
	RESULTS (µg/l)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED (µg/l)	
87. 1,2-Diphenylhydrazine	ND	625.1	20	20
89. Fluorene	ND	625.1	10	10
90. Hexachlorobenzene	ND	625.1	5	5
91. Hexachlorobutadiene	ND	625.1	10	10
92. Hexachlorocyclopentadiene	ND	625.1	10	10
93. Hexachloroethane	ND	625.1	20	20
94. Indeno (1,2,3-cd) pyrene (2,3-o-phenylene pyrene)	ND	625.1	5	5
95. Isophorone	ND	625.1	10	10
96. Naphthalene	ND	625.1	10	10
97. Nitrobenzene	ND	625.1	10	10
98. N-nitrosodimethylamine	ND	625.1	20	50
99. N-nitrosodi-n-propylamine	ND	625.1	20	20
100. N-nitrosodiphenylamine	ND	625.1	20	20
101. Phenanthrene	ND	625.1	10	10
102. Pyrene	ND	625.1	10	10
103. 1,2,4-Trichlorobenzene	ND	625.1	10	10

PESTICIDES	LABORATORY ANALYSIS			REQUIRED MQL ($\mu\text{g/l}$)
	RESULTS ($\mu\text{g/l}$)	APPROVED EPA METHOD USED	DETECTION LEVEL ACHIEVED ($\mu\text{g/l}$)	
104. Aldrin	ND	608.3	0.01	0.01
105. Alpha-BHC	ND	608.3	0.05	0.05
106. Beta-BHC	ND	608.3	0.05	0.05
107. Gamma-BHC	ND	608.3	0.05	0.05
108. Delta-BHC	ND	608.3	0.05	0.05
109. Chlordane	ND	608.3	0.2	0.2
110. 4,4'-DDT	ND	608.3	0.02	0.02
111. 4,4'-DDE (p,p-DDX)	ND	608.3	0.1	0.1
112. 4,4'-DDD 9(p,p-TDE)	ND	608.3	0.1	0.1
113. Dieldrin	ND	608.3	0.02	0.02
114. Alpha-endosulfan	ND	608.3	0.05	0.01
115. Beta-endosulfan	ND	608.3	0.02	0.02
116. Endosulfan sulfate	ND	608.3	0.1	0.1
117. Endrin	ND	608.3	0.02	0.02
118. Endrin aldehyde	ND	608.3	0.1	0.1
119. Heptachlor	ND	608.3	0.01	0.01
120. Heptachlor epoxide (BHC-hexachlorocyclohexane)	ND	608.3	0.010	0.01
130. Chlorpyrifos	ND	608.3	0.07	0.07
121. PCB-1242	ND	608.3	0.2	0.2
122. PCB-1254	ND	608.3	0.2	0.2
123. PCB-1221	ND	608.3	0.2	0.2
124. PCB-1232	ND	608.3	0.2	0.2
125. PCB-1248	ND	608.3	0.2	0.2
126. PCB-1260	ND	608.3	0.2	0.2
127. PCB-1016	ND	608.3	0.2	0.2
128. Toxaphene	ND	608.3	0.3	0.3