## National Pollutant Discharge Elimination System (NPDES) Oklahoma Department of Environmental Quality Discharge Monitoring Report (DMR)

PERMITTEE NAME: Broken Arrow, City of

PERMIT NUMBER: OK0040053

001A

MAILING

NESESES11T17NR14EIM

MONITORING POINT:

COUNTY:

Tulsa

ADDRESS: FACILITY:

Broken Arrow, OK 74013 Broken Arrow WWT

LOCATION: NESESES11T17NR14EIM

NESESES11T17NR14EIM Mot Broken Arrow, OK 74013 Peri

Monitoring Period: 2020-02-01To: 2020-02-29

NO DISCHARGE FROM SITE:

()

Parameter		Quantity or Loading		Units	Quality o	or Concentration		Units	No.	Frequency of	Sample
		Average	Maximum	THE RES	Minimum	Average	Maximum	200	Ex.	Analysis	Type
80D, 5-DAY (20 DEG. C)	Sample Measurement	618.68	****	26	****	11.10	16.20	19	0	Five Per Week	COMP12
PARAM CODE: 00310 Stage Code: 1 Effluent Gross	Permit Requirement	2001.6 Monthly Average	*****	lbs/day	*****	30 Monthly Average	45 Weekly Average	mg/l		Five Per Week	COMP12
PH	Sample Measurement	****	****		7.1	****	7.3	12	0	Daily	GRAB
PARAM CODE: 00400 Stage Code: 1 Effluent Gross	Permit Requirement	*****	*****		6.5 Minimum	*****	9.0 Maximum	S.U.		Daily	GRAB
PARAM CODE: 00530 Stage Code: 1	Sample Measurement	289.45	****	26 lbs/day	****	5,20	10.20	19	0	Five Per Week	COMP12
	Permit Requirement	2001.6 Monthly Average	****		*****	30 Monthly Average	45 Weekly Average	mg/l		Five Per Week	COMP12
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	Sample Measurement	6.577	8.976	03	****	****	****		0	Daily	TOTALZ
PARAM CODE: 50050 Stage Code: 1 Effluent Gross	Permit Requirement	Report Monthly Average	Report Maximum Daily	MGD	*****	****	*****			Daily	TOTALZ
CHLORINE, TOTAL RESIDUAL PARAM CODE: 50060 Stage Code: A Disinfection, Process Complete	Sample Measurement	****	****		****	****	1.26		1	Daily	GRAB
	Permit Requirement	*****	*****		*****	*****	0.099 Instantaneous Maximum	19 mg/l		Daily	GRAB
E.COLI	Sample Measurement	****	****		****	6.5	66.0	30	0	Weekly	GRAB
PARAM CODE: 51040 Stage Code: 1 Effluent Gross	Permit Requirement	*****	*****		*****	630 Geometric Mean	2030 Maximum Daily	MPN/100mL		Weekly	GRAB
SOLIDS, TOTAL DISSOLVED- 180 DEG.C	Sample Measurement	28712	****	26 Ibs/day	****	537	537	19	0	Monthly	COMP12
	Permit Requirement	77929 Monthly Average	****		*****	1168 Monthly Average	1168 Maximum Daily	mg/l		Monthly	COMP12
Name/Title of Principal Executive Officer Or Authorized Agent Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent  Officer Or Authorized Agent								re Teleph	Telephone No		
WWTP Mgr.	WWTP Mgr. THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING David Handy VIOLATIONS.								918-45	918-455-4762	

## National Pollutant Discharge Elimination System (NPDES)

Oklahoma Department of Environmental Quality Discharge Monitoring Report (DMR)

PERMITTEE NAME: Broken Arrow, City of

PERMIT NUMBER: OK0040053

001A

MAILING NESESES11T17NR14EIM ADDRESS:

Broken Arrow, OK 74013

MONITORING POINT:

COUNTY:

Tulsa

FACILITY: LOCATION: Broken Arrow WWT

NESESES11T17NR14EIM Broken Arrow, OK 74013 Monitoring Period:

2020-02-01To: 2020-02-29

NO DISCHARGE FROM SITE:

()

Parameter	British and Free	Quantity or Loading		Units	Quality or Concentration			Units	s No.	Frequency of	Sample	
		Average	Maximum	是 建镍铁	Minimum	Average	Maximum		Ex.	Analysis	Type	
MERCURY, TOTAL (AS HG)  PARAM CODE: 71900  Stage Code: 1  Effluent Gross	Sample Measurement	0.0027	****	26	****	< 0.05	< 0.05	28 ug/1	0	Monthly	COMP12	
	Permit Requirement	0.0635 Monthly Average	*****	950000	*****	0.952 Monthly Average	1.9 Maximum Daily			Monthly	COMP12	
Name/Title of Principal Executiv Officer Or Authorized Agent	thorized Agent Based on My include of the person of persons who manage the system, or those persons directly responsible for gathering the							Signature of Principal Executive Officer Or Authorized Agent			e Telephone No	
WWTP Mgr.	INFORMATION, THE THERE ARE SIGNIFK VIOLATIONS.	DEFORMATION, THE DEFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELLEF, TRUE, ACCURATE, AND COMPLETE I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE DEFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.						David Handy			918-455-4762	

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Page 2

## GENERAL REPORT COMMENT:

On February 24, 2020 at approximately 7:30am, a drawdown was performed on Sodium Bisulfite Pump No.1. The result was 110ml/min. The CL17 Analyzer reading was 0.03mg/L. At 8:54am the daily scheduled Total Residual Chlorine (TRC) test was performed with a result of 1.26 mg/L. Facility Manager David Handy was advised of the result. Mr. Handy and a operator returned to the sodium bisulfite room and performed a drawdown on Pump No. 1 again. The result was 112ml/min. The CL17 Analyzer reading was 0.67 mg/L. A decision was made to switch to pump No. 2 and a drawdown was performed. The result was 119 ml/min. At 9:30am a TRC was performed again with a result of <0.05 mg/L. There was no alarm callout due to a scaling issue with the CL17 Analyzer and the alarm setpoints on the new recently installed \$CADA system. The contractor has been notified of the scaling issue and has it scheduled for repair. The alarm callout setpoints have been adjusted for the issue and operators have stepped up monitoring.