



TENNESSEE DEPARTMENT OF ENVIRONMENT AND CONSERVATION
DIVISION OF WATER POLLUTION CONTROL

4th QTR
2023

RECEIVED

JAN 02 2024

FACILITY Blackberry Farms LLC NPDES PERMIT NO. 502 07002
PERMITTEE Blackberry Farms LLC MONTH Jan 2024
CITY Walland COUNTY Blount

MOR/DMR

MONTHLY OPERATION REPORT FOR PACKAGE TREATMENT PLANTS

TN Oil & Gas Program

DATE	TIME OF SAMPLING	WASTEWATER FLOW (gpd)	INFLUENT		OPERATION TESTS				EFFLUENT								SLUDGE DISPOSAL		COMMENTS ABOUT OPERATION AND COMPLIANCE
			BOD ₅ (mg/l)	SUSPENDED SOLIDS (mg/l)	MIXED LIQUOR SUSPENDED SOLIDS (mg/l)	MIXED LIQUOR SETTLEABLE SOLIDS CYLINDER (ml/l)	AERATION TANK DISSOLVED OXYGEN (mg/l)	CLARIFIER SLUDGE DEPTH OF BED (thickness in ft)	BOD ₅ (mg/l)	P-Coli SUSPENDED SOLIDS (mg/l)	SETTLEABLE SOLIDS IMHOFF CONE (ml/l)	DISSOLVED OXYGEN (mg/l)	CHLORINE RESIDUAL (mg/l)	FECAL COLIFORM (organisms/100 ml)	AMMONIA NITROGEN (mg/l)	pH (standard units)	VOLUME FROM CLARIFIER TO HOLDING TANK (gal)	VOLUME FROM HOLDING TANK TO FINAL DISPOSAL (gal)	
1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	
1																			
2																			
3																			
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			
13																			
14																			
15																			
16																			
17																			
18																			
19	10:38								5.70	1					7.94				
20																			
21																			
22																			
23																			
24																			
25																			
26																			
27																			
28																			
29																			
30																			
31																			
TOTAL									5.70	1					7.94				
PERMIT AVG. LIMIT												MIN		200			6.0 MIN		
ACTUAL AVG. VALUE												MIN					MIN		
PERMIT MAX. LIMIT									45	941				1000	Report		9.0		
ACTUAL MAX. VALUE																			
PERMIT FREQUENCY OF ANALYSIS									1 yr	1 qtr					1 qtr				
ACTUAL FREQUENCY OF ANALYSIS									1 qtr	1 qtr					1 qtr				
PERMIT SAMPLE TYPE				GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB	GRAB			
ACTUAL SAMPLE TYPE									G	G					G				
NO OF VIOLATIONS																			

I certify that the submitted information is accurate and complete. I further certify that all sampling was performed in accordance with approved procedures and all analyses were performed in accordance with 40 CFR Part 136. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment.

SIGNATURE OF OPERATOR [Signature] DATE Jan 2 2024

LICENSE NO. 66689 PHONE NO. 865-982-3560

ANALYSES PERFORMED BY OUTSIDE LABORATORY Yes

LABORATORY USED Microbac

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER [Signature] DATE 1-2-24