SUSANA MARTINEZ
Governor

JOHN A. SANCHEZ
Lieutenant Governor

**NEW MEXICO**
**ENVIRONMENT DEPARTMENT**

***Surface Water Quality Bureau***

**Harold Runnels Building, N2050**
**1190 South St. Francis Drive (87505)**
**P.O. Box 5469, Santa Fe, NM 87502-5469**
**Phone (505) 827-0187 Fax (505) 827-0160**
***www.nmenv.state.nm.us***

DAVE MARTIN
Secretary

BUTCH TONGATE
Deputy Secretary

JAMES H. DAVIS, Ph.D.
Director
Resource Protection Division

**Certified Mail – Return Receipt Requested**

August 22, 2012

Mr. Eloy Lopez, Water Resource Administrator
City of Las Cruces
680 N. Motel Blvd.
Las Cruces, NM 88007

**RE: Major Municipal, SIC 4952, NPDES Compliance Evaluation Inspection, Las Cruces – Jacob Hands Wastewater Treatment Plant, NM0023311, July 26, 2012**

Dear Mr. Lopez:

Enclosed, please find a copy of the report for the referenced inspection that the New Mexico Environment Department (NMED) Surface Water Quality Bureau (SWQB) conducted at your facility on behalf of the U.S. Environmental Protection Agency (USEPA). This inspection report will be sent to the USEPA in Dallas for their review. These inspections are used by USEPA to determine compliance with the National Pollutant Discharge Elimination System (NPDES) permitting program in accordance with requirements of the federal Clean Water Act.

Problems noted during this inspection are discussed in the further explanations section of the inspection report. You are encouraged to review the inspection report, required to correct any problems noted during the inspection, and modify your operational and/or administrative procedures, as appropriate. Further, you are encouraged to notify in writing, both the USEPA and NMED regarding modifications and compliance schedules at the addresses below:

Diana McDonald
US Environmental Protection Agency
Allied Bank Tower
Region VI Enforcement Branch (6EN-WM)
1445 Ross Avenue
Dallas, Texas 75202-2733

Program Manager
New Mexico Environment Department
Surface Water Quality Bureau
Point Source Regulation Section
P.O. Box 5469
Santa Fe, New Mexico 87502

I wish to thank your staff for their cooperation during this inspection. If you have any questions concerning this inspection report, please feel free to contact me at the above address or by telephone (505) 827-1041.

Sincerely,

*/s/ Sandra Gabaldón*
Sandra Gabaldón
Surface Water Quality Bureau

Cc: Rashida Bowlin, 6EN-WC, via email
Darlene Whitten-Hill, 6EN-WC, via email
Carol Peters-Wagnon, 6EN-WM, via email
Hannah Branning, 6EN-WC, via e-mail
Larry Giglio, 6WQ-PP, via email
Diana McDonald, 6EN-WM, via email
District III, via e-mail

EPA

Form Approved
OMB No. 2040-0003
Approval Expires 7-31-85

# NPDES Compliance Inspection Report

## Section A: National Data System Coding

| Transaction Code | NPDES | yr/mo/day | Inspec. Type | Inspector | Fac Type |
|---|---|---|---|---|---|
| N | 5 | NM0002331 | 120726 | C | S | 1 |

Remarks: MAJOR WWTP

| Inspection Work Days | Facility Evaluation Rating | BI | QA | Reserved |
|---|---|---|---|---|
| | 3 | N | N | |

## Section B: Facility Data

Name and Location of Facility Inspected *(For industrial users discharging to POTW, also include POTW name and NPDES permit number)*
**LAS CRUCES – JACOB HANDS WWTP**
I-25 South from Santa Fe, Exit #6 (US-70), Turn right onto N Main St., Turn right onto W Picacho Ave, Left onto N Motel Avenue, Right onto West Amador.
**DONA AÑA COUNTY**

Entry Time /Date
0800 Hours/ 07-26-2012

Exit Time/Date
1045 Hours/ 07-26-2012

Permit Effective Date
March 1, 2010

Permit Expiration Date
February 28, 2015

Name(s) of On-Site Representative(s)/Title(s)/Phone and Fax Number(s)
Doug Paczynski, Plant Manager / (575)528-3599 / (575) 528-3611/ dpaczynski@las-cruces.org
Jose A. Hernandez, Supervisor I / (575)528-3601 / joshernandez@las-cruces.org
Luis J. Guerra, Lab Manager / (575)528-3604 / lguerra@las-cruces.org

Name, Address of Responsible Official/Title/Phone and Fax Number
Mr. Eloy Lopez, Water Resource Administrator / elopey@las-cruces.org
City of Las Cruces
680 N. Motel Blvd.
Las Cruces, NM 88007

Contacted
Yes [ ] No [*]

Other Facility Data

SIC: 4952

GPS @ Outfall 001:
N. 32.29134
W -106.82413

## Section C: Areas Evaluated During Inspection

(S = Satisfactory, M = Marginal, U = Unsatisfactory, N = Not Evaluated)

| | | | | | | | |
|---|---|---|---|---|---|---|---|
| S | Permit | S | Flow Measurement | S | Operations & Maintenance | N | CSO/SSO |
| S | Records/Reports | S | Self-Monitoring Program | S | Sludge Handling/Disposal | N | Pollution Prevention |
| S | Facility Site Review | S | Compliance Schedules | N | Pretreatment | N | Multimedia |
| M | Effluent/Receiving Waters | M | Laboratory | N | Storm Water | N | Other: |

## Section D: Summary of Findings/Comments (Attach additional sheets if necessary)

| Name(s) and Signature(s) of Inspector(s) | Agency/Office/Telephone/Fax | Date |
|---|---|---|
| Sandra Gabaldón | NMED / SWQB / (505) 827-1041 / (505) 827-0160 | 8-22-2012 |
| */s/ Sandra Gabaldon* | | |
| **Signature of Management QA Reviewer** | **Agency/Office/Phone and Fax Numbers** | **Date** |
| Richard Powell */s/ Richard Powell* | NMED / SWQB / (505) 827-2798 | 8-20-2012 |

| LAS CRUCES – JACOB HANDS WASTEWATER TREATMENT PLANT | PERMIT NO. NM0023311 |
|---|---|

SECTION A - PERMIT VERIFICATION

PERMIT SATISFACTORILY ADDRESSES OBSERVATIONS ☒ S ☐ M ☐ U ☐ NA (*FURTHER EXPLANATION ATTACHED NO )*

DETAILS:

| | |
|---|---|
| 1. CORRECT NAME AND MAILING ADDRESS OF PERMITTEE | ☒ Y ☐ N ☐ NA |
| 2. NOTIFICATION GIVEN TO EPA/STATE OF NEW DIFFERENT OR INCREASED DISCHARGES | ☐ Y ☐ N ☒ NA |
| 3. NUMBER AND LOCATION OF DISCHARGE POINTS AS DESCRIBED IN PERMIT | ☒ Y ☐ N ☐ NA |
| 4. ALL DISCHARGES ARE PERMITTED | ☒ Y ☐ N ☐ NA |

SECTION B - RECORDKEEPING AND REPORTING EVALUATION

RECORDS AND REPORTS MAINTAINED AS REQUIRED BY PERMIT. ☒ S ☐ M ☐ U ☐ NA (*FURTHER EXPLANATION ATTACHED NO )*

DETAILS:

| | |
|---|---|
| 1. ANALYTICAL RESULTS CONSISTENT WITH DATA REPORTED ON DMRs. | ☒Y ☐ N ☐ NA |
| 2. SAMPLING AND ANALYSES DATA ADEQUATE AND INCLUDE. | ☒S ☐ M ☐ U ☐ NA |
| a) DATES, TIME(S) AND LOCATION(S) OF SAMPLING | ☒ Y ☐ N ☐ NA |
| b) NAME OF INDIVIDUAL PERFORMING SAMPLING | ☒ Y ☐ N ☐ NA |
| c) ANALYTICAL METHODS AND TECHNIQUES. | ☒ Y ☐ N ☐ NA |
| d) RESULTS OF ANALYSES AND CALIBRATIONS. | ☒ Y ☐ N ☐ NA |
| e) DATES AND TIMES OF ANALYSES. | ☒ Y ☐ N ☐ NA |
| f) NAME OF PERSON(S) PERFORMING ANALYSES. | ☒ Y ☐ N ☐ NA |
| 3. LABORATORY EQUIPMENT CALIBRATION AND MAINTENANCE RECORDS ADEQUATE. | ☒ S ☐ M ☐ U ☐ NA |
| 4. PLANT RECORDS INCLUDE SCHEDULES, DATES OF EQUIPMENT MAINTENANCE AND REPAIR. | ☒ S ☐ M ☐ U ☐ NA |
| 5. EFFLUENT LOADINGS CALCULATED USING DAILY EFFLUENT FLOW AND DAILY ANALYTICAL DATA. | ☒ Y ☐ N ☐ NA |

SECTION C - OPERATIONS AND MAINTENANCE

TREATMENT FACILITY PROPERLY OPERATED AND MAINTAINED. ☒ S ☐ M ☐ U ☐ NA *(FURTHER EXPLANATION ATTACHED YES )*

DETAILS: No findings, rather a comment was made on operation and maintenance.

| | |
|---|---|
| 1. TREATMENT UNITS PROPERLY OPERATED. | ☒ S ☐ M ☐ U ☐ NA |
| 2. TREATMENT UNITS PROPERLY MAINTAINED. | ☒ S ☐ M ☐U ☐ NA |
| 3. STANDBY POWER OR OTHER EQUIVALENT PROVIDED. Generator on site | ☒ S ☐ M ☐ U ☐ NA |
| 4. ADEQUATE ALARM SYSTEM FOR POWER OR EQUIPMENT FAILURES AVAILABLE. Dial out alarm system for notification | ☒ S ☐ M ☐ U ☐ NA |
| 5. ALL NEEDED TREATMENT UNITS IN SERVICE | ☒ S ☐ M ☐ U ☐ NA |
| 6. ADEQUATE NUMBER OF QUALIFIED OPERATORS PROVIDED. | ☒ S ☐ M ☐U ☐ NA |
| 7. SPARE PARTS AND SUPPLIES INVENTORY MAINTAINED. | ☒ S ☐ M ☐ U ☐ NA |
| 8. OPERATION AND MAINTENANCE MANUAL AVAILABLE. | ☒ Y ☐ N ☐ NA |
| STANDARD OPERATING PROCEDURES AND SCHEDULES ESTABLISHED. | ☒ Y ☐ N ☐ NA |
| PROCEDURES FOR EMERGENCY TREATMENT CONTROL ESTABLISHED. | ☒Y ☐ N ☐ NA |

| LAS CRUCES – JACOB HANDS WASTEWATER TREATMENT PLANT | PERMIT NO. NM0023311 |
|---|---|

SECTION C - OPERATIONS AND MAINTENANCE (CONT'D)

| | |
|---|---|
| 9. HAVE BYPASSES/OVERFLOWS OCCURRED AT THE PLANT OR IN THE COLLECTION SYSTEM IN THE LAST YEAR? | ☐ Y ☒ N ☐ NA |
| IF SO, HAS THE REGULATORY AGENCY BEEN NOTIFIED? | ☐ Y ☐ N ☒ NA |
| HAS CORRECTIVE ACTION BEEN TAKEN TO PREVENT ADDITIONAL BYPASSES/OVERFLOWS? | ☐Y ☐ N ☒ NA |
| 10.HAVE ANY HYDRAULIC OVERLOADS OCCURRED AT THE TREATMENT PLANT? | ☐ Y ☒ N ☐ NA |
| IF SO, DID PERMIT VIOLATIONS OCCUR AS A RESULT? | ☐ Y ☐ N ☒ NA |

SECTION D - SELF-MONITORING

PERMITTEE SELF-MONITORING MEETS PERMIT REQUIREMENTS. ☒ S ☐ M ☐ U ☐ NA *(FURTHER EXPLANATION ATTACHED NO).*
DETAILS:

| | |
|---|---|
| 1. SAMPLES TAKEN AT SITE(S) SPECIFIED IN PERMIT. | ☒ Y ☐ N ☐ NA |
| 2. LOCATIONS ADEQUATE FOR REPRESENTATIVE SAMPLES. | ☒ Y ☐ N ☐ NA |
| 3. FLOW PROPORTIONED SAMPLES OBTAINED WHEN REQUIRED BY PERMIT. | ☒ Y ☐ N ☐ NA |
| 4. SAMPLING AND ANALYSES COMPLETED ON PARAMETERS SPECIFIED IN PERMIT. | ☒ Y ☐ N ☐ NA |
| 5. SAMPLING AND ANALYSES PERFORMED AT FREQUENCY SPECIFIED IN PERMIT. | ☒Y ☐ N ☐ NA |
| 6. SAMPLE COLLECTION PROCEDURES ADEQUATE | ☒ Y ☐ N ☐ NA |
| a) SAMPLES REFRIGERATED DURING COMPOSITING. Refrigerated ISCO sampler. | ☒ Y ☐ N ☐ NA |
| b) PROPER PRESERVATION TECHNIQUES USED. | ☒ Y ☐ N ☐ NA |
| c) CONTAINERS AND SAMPLE HOLDING TIMES CONFORM TO 40 CFR 136.3. | ☒ Y ☐ N ☐ NA |
| 7. IF MONITORING AND ANALYSES ARE PERFORMED MORE OFTEN THAN REQUIRED BY PERMIT, ARE THE RESULTS REPORTED IN PERMITTEE'S SELF-MONITORING REPORT? | ☒ Y ☐ N ☐ NA |

SECTION E - FLOW MEASUREMENT

PERMITTEE FLOW MEASUREMENT MEETS PERMIT REQUIREMENTS. ☒ S ☐ M ☐ U ☐ NA *(FURTHER EXPLANATION ATTACHED NO )*
DETAILS:

| | |
|---|---|
| 1. PRIMARY FLOW MEASUREMENT DEVICE PROPERLY INSTALLED AND MAINTAINED.<br>TYPE OF DEVICE: **24-Inch Parshall Flume** | ☒Y ☐ N ☐ NA |
| 2. FLOW MEASURED AT EACH OUTFALL AS REQUIRED. | ☒ Y ☐ N ☐ NA |
| 3. SECONDARY INSTRUMENTS (TOTALIZERS, RECORDERS, ETC.) PROPERLY OPERATED AND MAINTAINED. | ☒ Y ☐ N ☐ NA |
| 4. CALIBRATION FREQUENCY ADEQUATE. | ☒Y ☐ N ☐ NA |
| RECORDS MAINTAINED OF CALIBRATION PROCEDURES. | ☒ Y ☐ N ☐ NA |
| CALIBRATION CHECKS DONE TO ASSURE CONTINUED COMPLIANCE. Done Monthly to +/- 5% | ☒ Y ☐ N ☐ NA |
| 5. FLOW ENTERING DEVICE WELL DISTRIBUTED ACROSS THE CHANNEL AND FREE OF TURBULENCE. | ☒ Y ☐ N ☐ NA |
| 6. HEAD MEASURED AT PROPER LOCATION. | ☒ Y ☐ N ☐ NA |
| 7. FLOW MEASUREMENT EQUIPMENT ADEQUATE TO HANDLE EXPECTED RANGE OF FLOW RATES. | ☒ Y ☐ N ☐ NA |

**SECTION F – LABORATORY**

PERMITTEE LABORATORY PROCEDURES MEET PERMIT REQUIREMENTS. ☐ S ☒ M ☐ U ☐ NA *(FURTHER EXPLANATION ATTACHED YES )*
DETAILS:

| | |
|---|---|
| 1. EPA APPROVED ANALYTICAL PROCEDURES USED *(40 CFR 136.3 FOR LIQUIDS, 503.8(b) FOR SLUDGES)* See further explanations | ☒ Y ☐ N ☐ NA |

| LAS CRUCES – JACOB HANDS WASTEWATER TREATMENT PLANT | PERMIT NO. NM0023311 |
|---|---|

**SECTION F - LABORATORY (CONT'D)**

2. IF ALTERNATIVE ANALYTICAL PROCEDURES ARE USED, PROPER APPROVAL HAS BEEN OBTAINED ☐ Y ☐ N ☒ NA

3. SATISFACTORY CALIBRATION AND MAINTENANCE OF INSTRUMENTS AND EQUIPMENT. ☐ S ☒ M ☐ U ☐ NA

4. QUALITY CONTROL PROCEDURES ADEQUATE. ☒ S ☐ M ☐ U ☐ NA

5. DUPLICATE SAMPLES ARE ANALYZED. 10 % OF THE TIME. ☒ Y ☐ N ☐ NA

6. SPIKED SAMPLES ARE ANALYZED. ___ % OF THE TIME. ☐ Y ☐ N ☒ NA

7. COMMERCIAL LABORATORY USED. ☒ Y ☐ N ☐ NA

LAB NAME Environ International Corporation

LAB ADDRESS Nashville, Tennessee

PARAMETERS PERFORMED Biomonitoring (WET)

**SECTION G - EFFLUENT/RECEIVING WATERS OBSERVATIONS.** ☐ S ☒ M ☐ U ☐ NA *(FURTHER EXPLANATION ATTACHED YES).*

| OUTFALL NO. | OIL SHEEN | GREASE | TURBIDITY | VISIBLE FOAM | FLOAT SOL. | COLOR | OTHER |
|---|---|---|---|---|---|---|---|
| 001 | NONE | NONE | NONE | NONE | NONE | MUDDY BROWN / AFTER RAIN SHOWER | |
| | | | | | | | |

RECEIVING WATER OBSERVATIONS Muddy brown – rain event night before inspection.

SECTION H - SLUDGE DISPOSAL

SLUDGE DISPOSAL MEETS PERMIT REQUIREMENTS. ☒ S ☐ M ☐ U ☐ NA *(FURTHER EXPLANATION ATTACHED NO).*
DETAILS:

1. SLUDGE MANAGEMENT ADEQUATE TO MAINTAIN EFFLUENT QUALITY. ☒ S ☐ M ☐ U ☐ NA

2. SLUDGE RECORDS MAINTAINED AS REQUIRED BY 40 CFR 503. ☒ S ☐ M ☐ U ☐ NA

3. FOR LAND APPLIED SLUDGE, TYPE OF LAND APPLIED TO: PUBLIC CONTACT SITE (e.g., FOREST, AGRICULTURAL, PUBLIC CONTACT SITE)

**SECTION I - SAMPLING INSPECTION PROCEDURES** *(FURTHER EXPLANATION ATTACHED ___).*

1. SAMPLES OBTAINED THIS INSPECTION. ☐ Y ☐ N ☒ NA

2. TYPE OF SAMPLE OBTAINED

GRAB _____ COMPOSITE SAMPLE ___ METHOD _____ FREQUENCY

3. SAMPLES PRESERVED. ☐ Y ☐ N ☒ NA

4. FLOW PROPORTIONED SAMPLES OBTAINED. ☐ Y ☐ N ☒ NA

5. SAMPLE OBTAINED FROM FACILITY'S SAMPLING DEVICE. ☐ Y ☐ N ☒ NA

6. SAMPLE REPRESENTATIVE OF VOLUME AND MATURE OF DISCHARGE. ☐ Y ☐ N ☒ NA

7. SAMPLE SPLIT WITH PERMITTEE. ☐ Y ☐ N ☒ NA

8. CHAIN-OF-CUSTODY PROCEDURES EMPLOYED. ☐ Y ☐ N ☒ NA

9. SAMPLES COLLECTED IN ACCORDANCE WITH PERMIT. ☐ Y ☐ N ☒ NA

City of Las Cruces – Jacob Hands Wastewater Treatment Plant
NPDES Permit No. NM0023311
Compliance Evaluation Inspection
July 26, 2012

**Further Explanations**

**Introduction:**

A Compliance Evaluation Inspection (CEI) was conducted at the City of Las Cruces – Jacob Hands Wastewater Treatment Plant (WWTP) on July 26, 2012 by Sandra Gabaldón, State of New Mexico Environment Department (NMED), Surface Water Quality Bureau (SWQB). This facility is classified as a major discharger under the federal Clean Water Act (CWA), Section 402 National Pollutant Discharge Elimination System (NPDES) permit program, and is assigned NPDES permit number NM0023311. The facility design flow is 13.5 million gallons per day (MGD), according to the permit.

The Jacob Hands Wastewater Treatment Plant discharges into the Rio Grande Basin in Segment 20.6.4.101 *(NMAC State of New Mexico Standards for Interstate and Intrastate Surface Waters).* Designated uses of segment 20.6.4.101 are irrigation, marginal warmwater aquatic life, livestock watering, wildlife habitat and primary contact.

The inspector arrived at the Jacob Hands WWTP at 0800 hours and conducted an entrance interview with Mr. Doug Paczynski, Plant Manager and Mr. Jose Hernandez, Supervisor. The inspector made introductions, presented her credentials and discussed the purpose of the inspection with Mr. Paczynski and Mr. Hernandez. The inspector also met with the Laboratory Manager, Mr. Luis Guerra during the laboratory review. An exit conference was conducted with Mr. Paczynski, Mr. Hernandez and Mr. Guerra at the WWTP to discuss preliminary findings.

The NMED performs a specific number of CEI's annually for the United States Environmental Protection Agency (USEPA). The purpose of this inspection is to provide the USEPA with information to evaluate the permittee's compliance with their NPDES permit. The enclosed inspection report is based on verbal information supplied by the permittee's representatives, observations made by Ms. Gabaldón, and a review of records maintained by the permittee, commercial laboratory, and/or NMED. Findings of the inspection are detailed in the attached EPA form 3560-3 and in the narrative further explanations section of the report.

**Treatment Scheme**:

Raw influent arrives at the plant from 20-30 lift stations around the city, with three submersible pumps in the primary lift station. Influent enters mechanical bar screens where large debris is removed. It then flows to the grit washer and the aerated grit remover where further debris is removed from the influent. It then flows to the equalization basin and then enters the primary clarifiers. There are two primary clarifiers available at this plant and as such, one clarifier is on line continuously. The clarifiers are rotated every six months. From the primary clarifiers flow

enters the roughing filters. There are two aeration basins after the rouging filters, the east and west basins. Final clarifiers are used prior to chlorination and dechlorination. Effluent is then released through a 24" Parshall flume to an unnamed ditch, thence the Rio Grande.

**Sludge:**

Waste Activated Sludge (WAS) is removed to the gravity thickener then to the centrifuge thickener, to the primary and secondary digesters. Digester gas is produced and sent to the CoGen System. However, the CoGen system is nonfunctional at this time. Sludge is composted after the belt press to be used in public parks.

City of Las Cruces – Jacob Hands WWTP
Compliance Evaluation Inspection
NPDES Permit No. NM0023311
July 26, 2012

## Further Explanations:

Note: The sections are arranged according to the format of the enclosed EPA inspection checklist (Form 3560-3), rather than being ranked in order of importance.

**Section C – Operation and Maintenance – Overall Rating "Satisfactory"**

Permit requires in Part III, Section B.3 Proper Operation and Maintenance:

> a. *The permittee shall at all times properly operate and maintain all facilities and systems of treatment and control (and related appurtenances) which are installed or used by permittee as efficiently as possible and in a manner which will minimize upsets and discharges of excessive pollutants and will achieve compliance with the conditions of this permit. Proper operation and maintenance also includes adequate laboratory controls and appropriate quality assurance procedures. This provision requires the operation of backup or auxiliary facilities or similar systems which are installed by a permittee only when the operation is necessary to achieve compliance with the conditions of this permit.*

***Comment*** for Operation and Maintenance:

During this inspection, denitrification was occurring. It was noted that the dissolved oxygen was at 0.81 mg/L. Although this is "low" by textbook standards, (average dissolved oxygen should be approximately 2.0 mg/L) it appears that this facility is running efficiently and is achieving compliance with the conditions of this permit. Therefore, this is just a comment rather than a finding.

**Section F – Laboratory – Overall Rating of "Marginal"**

Permit requirements in Part III, Section C.5. Monitoring Procedures:

> a. *Monitoring must be conducted according to test procedures approved under 40 CFR 136, unless other tests procedures have been specified in this permit or approved by the Regional Administrator.*
>
> b. *The permittee shall calibrate and perform maintenance procedures on all monitoring and analytical instruments at intervals frequent enough*

*to insure accuracy of measurements and shall maintain appropriate records of such activities.*

c. *An adequate analytical quality control program, including the analysis of sufficient standards, spikes and duplicate samples to insure the accuracy of all requirements and analytical results shall be maintained by the permittee or designated commercial laboratory.*

**Findings** for Laboratory:

During the laboratory inspection, the following issues were noted:

- The dessicator contained pink dessicant indicating that there was moisture in the dissicant and it must be dried or replaced. The dessicant should be blue in color.

- The temperature of the drying oven for TSS was at 106° C. However, on further discussion with the laboratory manager, the temperature is +/- 1°. This would be within the 103° - 105° C range as required. All thermometers are NIST calibrated by New Mexico State Laboratory Department (SLD).

- During review of the analytical balance, the laboratory manager was asked if they calibrate the balance using "S weights" daily. The laboratory manager stated that they do. However, when asked to see the S weights used, the inspector noted that the calibration tag on the S weights were outdated. The S weights need to be re-calibrated.

The methods used by the permittee are from Standard Methods 20th Edition. However, June 18, 2012, 40 CFR 136 had various changes to their Table A1 (approved methods). Some of the SM 20th edition are no longer up-to-date with 40 CFR 136. The permittee should review the Federal Register http://www.gpo.gov/fdsys/pkg/FR-2012-05-18/pdf/2012-10210.pdf
and incorporate the necessary changes for compliance with the approved methods.

**Section G – Effluent/Receiving Waters Observations – Overall Rating of "Marginal"**

Permit requires in Part I, Section A. Limitations and Monitoring Requirements:

| EFFLUENT CHARACTERISTICS | | DISCHARGE LIMITATIONS | | | | | MONITORING REQUIREMENTS | |
|---|---|---|---|---|---|---|---|---|
| | | lbs/day, unless noted | | mg/l, unless noted | | | | |
| POLLUTANT | STORET CODE | 30-DAY AVG | 7-DAY AVG | 30-DAY AVG | 7-DAY AVG | DAILY MAX | MEASURE-MENT FREQUENCY | SAMPLE TYPE |
| Flow | 50050 | Report MGD | Report MGD | N/A | N/A | N/A | Continuous | Totalizing Meter |
| Biochemical Oxygen Demand, 5-day | 00310 | 3378 | 5067 | 30 | 45 | N/A | Daily | 24-Hr Composite |

| | | | | | | | | |
|---|---|---|---|---|---|---|---|---|
| Total Suspended Solids | 00530 | 3378 | 5067 | 30 | 45 | N/A | Daily | 24-Hr Composite |
| E. Coli Bacteria | 51040 | 42.5 Bcfu (*1) | N/A | N/A | N/A | 126 | Daily | Grab |
| Total Residual Chlorine | 50060 | N/A | N/A | N/A | N/A | 0.019 | Daily | Grab |

**Findings** for Effluent/Receiving Waters Observations:

The permittee had the following exceedances of their E. coli Daily Maximum limitation of 126 CFU/100 mL. These were reported on the DMRs as follows:

| | | |
|---|---|---|
| 01/31/2012 | E. Coli | 2419.6 CFU |
| 02/29/2012 | E. Coli | 209.25 CFU |
| 04/30/2012 | E. Coli | 453.90 CFU |

On the day of the inspection, however, the effluent was clear at the Parshall flume prior to discharge. No exceedance has been reported since April 2012.

The permittee has not reported any sanitary sewer overflows.

The permittee is currently submitting their Discharge Monitoring reports through NET DMR. This automated program helps permittees submit paperless reports directly to EPA for their review.

**NMED/SWQB**
**Official Photograph Log**
**Photo # 1**

| | | |
|---|---|---|
| Photographer: Sandra Gabaldón | Date: July 26, 2012 | Time: 0841 Hours |
| City/County: Las Cruces / Doña Ana | | State: New Mexico |
| Location: City of Las Cruces – Jacob Hands Wastewater Treatment Plant | | |
| Subject: One of two clarifier. | | |

**NMED/SWQB**
**Official Photograph Log**
**Photo # 2**

| | | |
|---|---|---|
| Photographer: Sandra Gabaldón | Date: July 26, 2012 | Time: 0856 Hours |
| City/County: Las Cruces / Doña Ana | | State: New Mexico |
| Location: City of Las Cruces – Jacob Hands Wastewater Treatment Plant | | |
| Subject: Aeration Basin | | |

**NMED/SWQB**
**Official Photograph Log**
**Photo # 3**

| | | |
|---|---|---|
| Photographer: Sandra Gabaldón | Date: July 26, 2012 | Time: 0905 Hours |
| City/County: Las Cruces / Doña Ana | | State: New Mexico |
| Location: City of Las Cruces – Jacob Hands Wastewater Treatment Plant | | |
| Subject: Chlorine gas in 1 ton cylinders. | | |

**NMED/SWQB**
**Official Photograph Log**
**Photo # 4**

| | | |
|---|---|---|
| Photographer: Sandra Gabaldón | Date: July 26, 2012 | Time: 0957 Hours |
| City/County: Las Cruces / Doña Ana | | State: New Mexico |
| Location: City of Las Cruces – Jacob Hands Wastewater Treatment Plant | | |
| Subject: S-weights, used for daily calibration of analytical balance. Last calibration March, 2012 | | |

**NMED/SWQB**
**Official Photograph Log**
**Photo # 5**

| | | |
|---|---|---|
| Photographer: Sandra Gabaldón | Date: July 26, 2012 | Time: 0925 Hours |
| City/County: Las Cruces / Doña Ana | | State: New Mexico |
| Location: City of Las Cruces – Jacob Hands Wastewater Treatment Plant | | |
| Subject: Discharge to unnamed ditch, thence to Rio Grande. (GPS: N. 32.29134, W. -106.82413) | | |