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Permit

Permit #:
Major:

IN0050211
No

Permittee:
Permittee Address:

BEARCREEK FARMS, INC. WWTP
8341 N 400 E
BRYANT, IN 47326

Facility:
Facility Location:

BEARCREEK FARMS INC
8341 N 400 E
WABASH RIVER BEARCREEK TSHP
BRYANT, IN 47326

Permitted Feature:

001
External Outfall

Discharge:

001-A
0.06 MGD CLASS I DISCHARGE MAIN TO BEARCREEK DITCH

Report Dates & Status

Monitoring Period:

From 04/01/24 to 04/30/24

DMR Due Date:

05/28/24

Status:

NetDMR Validated

Considerations for Form Completion

THE FLOW METER(S) SHALL BE CALIBRATED AT LEAST ONCE ANNUALLY. SEMI PUBLIC JAY COUNTY

Principal Executive Officer

First Name:
Last Name:

Carla
Strong

Title:

President

Telephone:

260-997-6823

No Data Indicator (NODI)

FormNODI: --

Code	Parameter	Monitoring Location	Season #	Param. NODI		Quantity or Loading					Quality or Concentration							# of Ex.	Frequency of Analysis	Sample Type
	Name					Qualifier 1	Value 1	Qualifier 2	Value 2	Units	Qualifier 1	Value 1	Qualifier 2	Value 2	Qualifier 3	Value 3	Units			
00300	Oxygen, dissolved [DO]	1 - Effluent Gross	2	--	Sample						=	7.1					19 - mg/L	0	05WK - Five Per Week	G2 - GRAB-2
					Permit Req.						>=	5.0 DLYAVMIN					19 - mg/L		05WK - Five Per Week	G2 - GRAB-2
					Value NODI															
00400	pH	1 - Effluent Gross	0	--	Sample						=	7.0			=	8.1	12 - SU	0	05WK - Five Per Week	GR - GRAB
					Permit Req.						>=	6.0 DAILY MN			<=	9.0 DAILY MX	12 - SU		05WK - Five Per Week	GR - GRAB
					Value NODI															
X 00530	Solids, total suspended	1 - Effluent Gross	0	--	Sample	=	4.8	=	17.0	28 - lb/d			=	34.0	=	57.0	19 - mg/L	2	02/07 - Twice Every Week	24 - COMP24
					Permit Req.	<=	15.0 MO AVG	<=	22.5 DAILY MX	28 - lb/d			<=	30.0 MO AVG	<=	45.0 DAILY MX	19 - mg/L		02/07 - Twice Every Week	24 - COMP24
					Value NODI															
00810	Nitrogen, ammonia total [as N]	1 - Effluent Gross	2	--	Sample	=	0.1	=	0.8	28 - lb/d			=	0.6	=	1.5	19 - mg/L	0	02/07 - Twice Every Week	24 - COMP24
					Permit Req.	<=	1.5 MO AVG	<=	2.3 DAILY MX	28 - lb/d			<=	3.0 MO AVG	<=	4.5 DAILY MX	19 - mg/L		02/07 - Twice Every Week	24 - COMP24
					Value NODI															
00865	Phosphorus, total [as P]	1 - Effluent Gross	0	--	Sample								=	0.6			19 - mg/L	0	02/07 - Twice Every Week	24 - COMP24
					Permit Req.								<=	1.0 MO AVG			19 - mg/L		02/07 - Twice Every Week	24 - COMP24
					Value NODI															
50050	Flow, in conduit or thru treatment plant	1 - Effluent Gross	0	--	Sample	=	0.017			03 - MGD									05WK - Five Per Week	TM - TOTALZ
					Permit Req.		Req Mon MO AVG			03 - MGD									05WK - Five Per Week	TM - TOTALZ
					Value NODI															
X 51041	E. coli, colony forming units [CFU]	1 - Effluent Gross	0	--	Sample								=	9.9	=	1410.0	3Z - CFU/100mL	2	02/07 - Twice Every Week	GR - GRAB
					Permit Req.								<=	125.0 MO GEO	<=	235.0 DAILY MX	3Z - CFU/100mL		02/07 - Twice Every Week	GR - GRAB
					Value NODI															
80082	BOD, carbonaceous [5 day, 20 C]	1 - Effluent Gross	0	--	Sample	=	0.4	=	1.5	28 - lb/d			=	2.8	=	4.0	19 - mg/L	0	02/07 - Twice Every Week	24 - COMP24
					Permit Req.	<=	12.5 MO AVG	<=	20.0 DAILY MX	28 - lb/d			<=	25.0 MO AVG	<=	40.0 DAILY MX	19 - mg/L		02/07 - Twice Every Week	24 - COMP24
					Value NODI															
82220	Flow, total	1 - Effluent Gross	0	--	Sample			=	0.502	80 - Mgal/mo								0	01/30 - Monthly	RT - RCOTOT
					Permit Req.				Req Mon MO TOTAL	80 - Mgal/mo									01/30 - Monthly	RT - RCOTOT
					Value NODI															

Submission Note

If a parameter row does not contain any values for the Sample nor Effluent Trading, then none of the following fields will be submitted for that row: Units, Number of Excursions, Frequency of Analysis, and Sample Type.

Edit Check Errors

Parameter		Monitoring Location	Field	Type	Description	Acknowledge
Code	Name					
51041	E. coli, colony forming units [CFU]	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00530	Solids, total suspended	1 - Effluent Gross	Quality or Concentration Sample Value 3	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes
00530	Solids, total suspended	1 - Effluent Gross	Quality or Concentration Sample Value 2	Soft	The provided sample value is outside the permit limit. Please verify that the value you have provided is correct.	Yes

Comments

Problems with UV light intensity meter first week

Attachments

Name	Type	Size
IN0050211_001A_MRO_2024_04.pdf	pdf	199759.0

Report Last Saved By

BEARCREEK FARMS, INC. WWTP

User: spjones38@hotmail.com

Name: Steven Jones

E-Mail: spjones38@hotmail.com

Date/Time: 2024-05-27 08:53 (Time Zone: -04:00)

Report Last Signed By

User: spjones38@hotmail.com

Name: Steven Jones

E-Mail: spjones38@hotmail.com

Date/Time: 2024-05-27 08:53 (Time Zone: -04:00)



MONTHLY REPORT OF OPERATION
PACKAGE TYPE WASTEWATER
TREATMENT PLANTS LESS THAN 0.05 MGD
State Form 53344 (R3 / 3-23)

Name of Facility				Permit Number	
Bearcreek Farms				IN0050211	
Month	Year	Plant Design Flow		Telephone Number	
April	2024	0.0600 mgd		260/525-0900	
E-mail address:				0	
Certified Operator: Name		Class	Certificate Number	Expiration Date	
Steven Jones		II	9538	6/30/2025	

General Information				Bypasses/ Overflows		RAW SEWAGE										AERATION					
Day Of Month	Day of Week	Man Hours	Precip. - Inches	At Plant Site ("x" if occurred)	Collection System ("x" if occurred)	Influent Flow Rate (if metered) MGD	pH	CBOD5 - mg/l	CBOD5 - lbs	TSS (mg/l)	TSS (lbs)	Ammonia - mg/l	Ammonia (lbs)	Phosphorus (mg/l)	Phosphorus (lbs)	30 Minute Settling	MLSS	Sludge Vol. Index (SVI) - ml/gm	D.O.	Temperature - F	WAS Gal.
1	Mon																				
2	Tue																				
3	Wed							39	14.64548	17	6.383925	0.55	0.206539	0.54	0.202784						
4	Thu																				
5	Fri							12	0.90128	5	0.375525	1.39	0.104398	0.39	0.029291						
6	Sat																				
7	Sun																				
8	Mon																				
9	Tue							33	0.826155	16	0.40058	6.43	0.180975	1.12	0.028039						
10	Wed																				
11	Thu																				
12	Fri							33	14.59541	11	4.865135	0.44	0.194605	0.85	0.287485						
13	Sat																				
14	Sun																				
15	Mon																				
16	Tue							39	0.976385	8	0.20028	4.51	0.112908	0.82	0.020529						
17	Wed																				
18	Thu																				
19	Fri							35	4.965275	8	1.13492	1.63	0.23124	0.57	0.080863						
20	Sat																				
21	Sun																				
22	Mon																				
23	Tue							52	3.90548	21	1.577205	5.89	0.442368	1.22	0.091828						
24	Wed																				
25	Thu																				
26	Fri							57	1.426995	19	0.475865	12.6	0.315441	2.04	0.051071						
27	Sat																				
28	Sun																				
29	Mon																				
30	Tue							33	3.560005	14	1.31679	3.72	0.403384	1.07	0.116079						
Average								37	5.091377	13	1.881334	4.12889	0.241337	0.93558	0.100863						
Maximum								57	14.64548	21	6.383925	12.6	0.442368	2.04	0.287485						
Minimum								12	0.826155	5	0.20028	0.44	0.104398	0.39	0.020529						
# of Data	0	0	0	0	0	0	0	9	9	9	9	9	9	9	9	0	0	0	0	0	0

Sludge Hauled Off Site (Gal):	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 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.	Prepared by or under the direction of (Certified Operator):	Date (month, day, year)
		<i>Steve Jones</i> Signature of principal executive officer or authorized agent (or attested by NetDMR subscriber agreement)	5/27/24 Date (month, day, year)

MONTHLY REPORT OF OPERATION
PACKAGE TYPE WASTEWATER
TREATMENT PLANTS LESS THAN 0.05 MGD
State Form 53344 (R3 / 3-23)

Name of Facility
Bears Creek Farms

Permit Number
IN0050211

For Month Of
April

Year
2024

Total Monthly Flow
0.5020

mg

Percent Capacity
(average flow / design)
28%

FINAL EFFLUENT															Enter Comments Below:	
Day Of Month	Effluent Flow Rate (MGD)	pH	BOD (mg/l)	BOD (lbs)	TSS (mg/l)	TSS (lbs)	D.O. (mg/l)	Residual Chlorine (mg/l) - Contact	Residual Chlorine (mg/l) - Final	E. Coli colony/100 ml	Ammonia (mg/l)	Ammonia (lbs)	Phosphorus (mg/l)	Phosphorus (lbs)	Problems with UV light intensity meter first 6 days.	
1	0.054	7					8									
2	0.081	7					7.1									
3	0.045	7.2	4	1.5021	44	16.5231	7.8			1410	1.51	0.567043	0.77	0.289154		
4	0.021	7.2					7.9									
5	0.009	7.2	3	0.225315	35	2.628675	7.7			548	1.05	0.07886	0.81	0.045814		
6	0.005															
7	0.004															
8	0.003	7					8.3									
9	0.003	7	2	0.05007	4	0.10014	8.1			121	0.73	0.018276	0.12	0.003004		
10	0.009															
11	0.084	7.9					7.2									
12	0.053	7.8	2	0.88457	21	9.287985	7.4			10	0.85	0.287485	0.4	0.178914		
13	0.013															
14	0.008															
15	0.003	8.1					7.4									
16	0.003	8	3	0.075105	38	0.90126	7.8			1	0.7	0.017525	0.59	0.014771		
17	0.017															
18	0.007	8.1					7.8									
19	0.017	8	2	0.28373	30	4.25595	7.2			1	0.18	0.025536	0.59	0.0837		
20	0.006															
21	0.004															
22	0.003	7.8					7.1									
23	0.009	7.5	4	0.30042	57	4.280985	7.3			1	0.22	0.018523	0.8	0.080084		
24	0.007	7.5					7.2									
25	0.003	7.5					7.8									
26	0.003		3	0.075105	45	1.128575				1	0.21	0.005257	0.9	0.022532		
27	0.004															
28	0.002															
29	0.011	7.5					8.2									
30	0.013	8.1	2	0.21897	35	3.790975	8.4			1	0.27	0.029291	0.53	0.057497		
Avg	0.0167		2.77778	0.401487	34.1111	4.766849	7.658			10	0.61333	0.116199	0.59	0.083719		
Max	0.084	8.1	4	1.5021	57	16.5231	8.4			1410	1.51	0.567043	0.9	0.289154		
Min	0.002	7	2	0.05007	4	0.10014	7.1			1	0.18	0.005257	0.12	0.003004		
Daily Max										1410						
# of Days Above 235										2						
Date	30	19	9	18	18	9	19	0	0	9	9	9	9	9	0	

MONTHLY REMOVAL SUMMARY				
	BOD5	S.S.	Ammonia	Phosphorus
Percent Removal	92.5	-158.0	85.14531755	38.93588898

Once Completed, this form should be converted to a pdf document, named appropriately and attached to the corresponding netDMR for submittal.