Administrative Package Cover Page

This file contains the following documents:

1. Summary of application (in plain language)
2. First Notice (NORI-Notice of Receipt of Application and Intent to Obtain a Permit)
3. Application Materials

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how you will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements. After filling in the information for your facility delete these instructions.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, **you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package**. For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

Canyon Regional Water Authority (CN605179324) operates Wells Ranch Water Treatment Plant (RN105446850), a groundwater facility that produces and delivers drinking water to its wholesale costumers. The facility is located at 383 High Point Ridge, in Seguin, Guadalupe County, Texas 78155. The Wells Ranch Treatment Plant is renewing its TPDES and SLUDGE permits. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain iron and manganese. The plant process water flows to settling ponds and is treated by settling and then discharged to a receiving stream.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

NOTICE OF RECEIPT OF APPLICATION AND INTENT TO OBTAIN WATER QUALITY PERMIT RENEWAL

PERMIT NO. WQ0014872001

APPLICATION. Canyon Regional Water Authority, 850 Lakeside Pass, New Braunfels, Texas 78130, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0014872001 (EPA I.D. No. TX0131351) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 100,000 gallons per day with the provision to land apply water treatment plant sludge on 31 acres of land. The domestic wastewater treatment facility is located at 383 High Point Ridge, near the city of Seguin, in Guadalupe County, Texas 78155. The discharge route is from the plant site to an unnamed tributary; thence to Tidwell Creek; thence to Sandies Creek; thence to the Guadalupe River Below San Marcos River. TCEQ received this application on May 21, 2025. The permit application will be available for viewing and copying at Canyon Regional Water Authority Office, Entrance, 850 Lakeside Pass, New Braunfels, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage: https://www.tceq.texas.gov/permitting/wastewater/pending-permits/tpdes-applications. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.
https://gisweb.tceq.texas.gov/LocationMapper/?marker=-97.821853,29.452804&level=18

ADDITIONAL NOTICE. TCEQ's Executive Director has determined the application is administratively complete and will conduct a technical review of the application. After technical review of the application is complete, the Executive Director may prepare a draft permit and will issue a preliminary decision on the application. **Notice of the Application and Preliminary Decision will be published and mailed to those who are on the county-wide mailing list and to those who are on the mailing list for this application. That notice will contain the deadline for submitting public comments.**

PUBLIC COMMENT / PUBLIC MEETING. You may submit public comments or request a public meeting on this application. The purpose of a public meeting is to provide the opportunity to submit comments or to ask questions about the application. TCEQ will hold a public meeting if the Executive Director determines that there is a significant degree of public interest in the application or if requested by a local legislator. A public meeting is not a contested case hearing.

OPPORTUNITY FOR A CONTESTED CASE HEARING. After the deadline for submitting public comments, the Executive Director will consider all timely comments and prepare a response to all relevant and material, or significant public comments. **Unless the application is directly referred for a contested case hearing, the response to comments, and the Executive Director's decision on the application, will be mailed to everyone who submitted public comments and to those persons who are on the mailing list for this application. If comments are received, the mailing will also provide instructions for requesting reconsideration of the Executive Director's decision and for requesting a contested case hearing.** A contested case hearing is a legal proceeding similar to a civil trial in state district court.

TO REQUEST A CONTESTED CASE HEARING, YOU MUST INCLUDE THE FOLLOWING ITEMS IN YOUR REQUEST: your name, address, phone number; applicant's name and proposed permit number; the location and distance of your property/activities relative to the proposed facility; a specific description of how you would be adversely affected by the facility in a way not common to the general public; a list of all disputed issues of fact that you submit during the comment period and, the statement "[I/we] request a contested case hearing." If the request for contested case hearing is filed on behalf of a group or association, the request must designate the group's representative for receiving future correspondence; identify by name and physical address an individual member of the group who would be adversely affected by the proposed facility or activity; provide the information discussed above regarding the affected member's location and distance from the facility or activity; explain how and why the member would be affected; and explain how the interests the group seeks to protect are relevant to the group's purpose.

Following the close of all applicable comment and request periods, the Executive Director will forward the application and any requests for reconsideration or for a contested case hearing to the TCEQ Commissioners for their consideration at a scheduled Commission meeting.

The Commission may only grant a request for a contested case hearing on issues the requestor submitted in their timely comments that were not subsequently withdrawn.

If a hearing is granted, the subject of a hearing will be limited to disputed issues of fact or mixed questions of fact and law relating to relevant and material water quality concerns submitted during the comment period.

MAILING LIST. If you submit public comments, a request for a contested case hearing or a reconsideration of the Executive Director's decision, you will be added to the mailing list for this specific application to receive future public notices mailed by the Office of the Chief Clerk. In addition, you may request to be placed on: (1) the permanent mailing list for a specific applicant name and permit number; and/or (2) the mailing list for a specific county. If you wish to be placed on the permanent and/or the county mailing list, clearly specify which list(s) and send your request to TCEQ Office of the Chief Clerk at the address below.

INFORMATION AVAILABLE ONLINE. For details about the status of the application, visit the Commissioners' Integrated Database at www.tceq.texas.gov/goto/cid. Search the database using the permit number for this application, which is provided at the top of this notice.

AGENCY CONTACTS AND INFORMATION. All public comments and requests must be submitted either electronically at **https://www14.tceq.texas.gov/epic/eComment/**, or in

writing to the Texas Commission on Environmental Quality, Office of the Chief Clerk, MC-105, P.O. Box 13087, Austin, Texas 78711-3087. Please be aware that any contact information you provide, including your name, phone number, email address and physical address will become part of the agency's public record. For more information about this permit application or the permitting process, please call the TCEQ Public Education Program, Toll Free, at 1-800-687-4040 or visit their website at www.tceq.texas.gov/goto/pep. Si desea información en Español, puede llamar al 1-800-687-4040.

Further information may also be obtained from Canyon Regional Water Authority at the address stated above or by calling Mr. Adam Telfer, Compliance Manager, at 830-609-0543.

Issuance Date: June 30, 2025

CANYON REGIONAL
water authority

June 17, 2025

Ms. Abesha H. Michael
Applications Review & Processing Team
Water Quality Division Support Section
Water Quality Division, MC 148
P.O. Box 13087
Austin, Texas 78711

RE: Response to Notice of Deficiency Letter
Canyon Regional Water Authority (CN605179324)
Application to Renew Permit No.: WQ0014872001 (EPA I.D. No. TX0131351)
Site Name: Wells Ranch WTP (RN105446850)
Type of Application: Renewal without changes

VIA EMAIL

Dear Ms. Michael,

In response to your Notice of Deficiency letter dated June 16, 2025, CRWA staff have reviewed item one (1) (the portion of the NORI which contains information relevant to CRWA's application), and have found no errors and does not see a need for any omissions. Please see the language below.

> **APPLICATION.** Canyon Regional Water Authority, 850 Lakeside Pass, New Braunfels, Texas 78130, has applied to the Texas Commission on Environmental Quality (TCEQ) to renew Texas Pollutant Discharge Elimination System (TPDES) Permit No. WQ0014872001 (EPA I.D. No. TX0131351) to authorize the discharge of treated wastewater at a volume not to exceed a daily average flow of 100,000 gallons per day with the provision of water treatment sludge residuals on 31 acres of land. The domestic wastewater treatment facility is located at 383 High Point Ridge, near the city of Seguin, in Guadalupe County, Texas 78155. The discharge route is from the plant site to an unnamed tributary; thence to Tidwell Creek; thence to Sandies Creek; thence to the Guadalupe River Below San Marcos River. TCEQ received this application on May 21, 2025. The permit application will be available for viewing and

copying at Canyon Regional Water Authority Office, Entrance, 850 Lakeside Pass, New Braunfels, Texas prior to the date this notice is published in the newspaper. The application, including any updates, and associated notices are available electronically at the following webpage: **https:**//www.tceq/texas.gov/permitting/wastewater/pending-permits/tpdes-applications. This link to an electronic map of the site or facility's general location is provided as a public courtesy and not part of the application or notice. For the exact location, refer to the application.

https://gisweb.tceq.texas.gov/LocationMapper/?marker=-97.821853,29.452804&level=18

Further information may also be obtained from Canyon Regional Water Authority at the address stated above or by calling Mr. Adam Telfer, Compliance Manager, at 830-609-0543.

If you have any further questions or need additional information, please do not hesitate to contact us.

Sincerely,

Adam Telfer
Compliance Manager
Canyon Regional Water Authority

Cc: Mr. Kerry Averyt, General Manager, Canyon Regional Water Authority, 850 Lakeside Pass, New Braunfels, Texas 78130

Brooke T. Paup, *Chairwoman*
Bobby Janecka, *Commissioner*
Catarina R. Gonzales, *Commissioner*
Kelly Keel, *Executive Director*

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

Protecting Texas by Reducing and Preventing Pollution

May 21, 2025

Re: Confirmation of Submission of the Renewal without changes for Conventional Water Treatment Authorization.

Dear Applicant:

This is an acknowledgement that you have successfully completed Renewal without changes for the Conventional Water Treatment authorization.

ER Account Number: ER065813
Application Reference Number: 788218
Authorization Number: WQ0014872001
Site Name: Wells Ranch Wtp
Regulated Entity: RN105446850 - Wells Ranch Wtp
Customer(s): CN605179324 - Canyon Regional Water Authority

Please be aware that TCEQ staff may contact your designated contact for any additional information.

If you have any questions, you may contact the Applications Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by telephone at (512) 239-4671.

Sincerely,
Applications Review and Processing Team
Water Quality Division

Texas Commission on Environmental Quality

Update Domestic or Industrial Individual Permit

WQ0014872001

Site Information (Regulated Entity)

What is the name of the site to be authorized?	WELLS RANCH WTP
Does the site have a physical address?	Yes
Physical Address	
Number and Street	383 HIGH POINT RIDGE
City	SEGUIN
State	TX
ZIP	78155
County	GUADALUPE
Latitude (N) (##.######)	29.452804
Longitude (W) (-###.######)	-97.821853
Primary SIC Code	4941
Secondary SIC Code	
Primary NAICS Code	221310
Secondary NAICS Code	
Regulated Entity Site Information	
What is the Regulated Entity's Number (RN)?	RN105446850
What is the name of the Regulated Entity (RE)?	WELLS RANCH WTP
Does the RE site have a physical address?	Yes
Physical Address	
Number and Street	383 HIGH POINT RIDGE
City	SEGUIN
State	TX
ZIP	78155
County	GUADALUPE
Latitude (N) (##.######)	
Longitude (W) (-###.######)	
Facility NAICS Code	
What is the primary business of this entity?	DEVELOPING GROUNDWATER

Canyon -Customer (Applicant) Information (Owner)

How is this applicant associated with this site?	Owner
What is the applicant's Customer Number (CN)?	CN605179324
Type of Customer	Organization

Full legal name of the applicant:	
Legal Name	Canyon Regional Water Authority
Texas SOS Filing Number	
Federal Tax ID	
State Franchise Tax ID	
State Sales Tax ID	
Local Tax ID	
DUNS Number	
Number of Employees	
Independently Owned and Operated?	
I certify that the full legal name of the entity applying for this permit has been provided and is legally authorized to do business in Texas.	Yes
Responsible Authority Contact	
Organization Name	Canyon Regional Water Authority
Prefix	MR
First	Kerry
Middle	
Last	Averyt
Suffix	
Credentials	PE
Title	GENERAL MANAGER
Responsible Authority Mailing Address	
Enter new address or copy one from list:	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	850 LAKESIDE PASS
Routing (such as Mail Code, Dept., or Attn:)	
City	NEW BRAUNFELS
State	TX
ZIP	78130
Phone (###-###-####)	8306090543
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	8306090740
E-mail	kaveryt@crwa.com

Billing Contact

Responsible contact for receiving billing statements:	
Select the permittee that is responsible for payment of the annual fee.	CN605179324, Canyon Regional Water Authority

Organization Name	Canyon Regional Water Authority
Prefix	MR
First	Adam
Middle	
Last	Telfer
Suffix	
Credentials	
Title	Compliance Manager
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	850 LAKESIDE PASS
Routing (such as Mail Code, Dept., or Attn:)	
City	NEW BRAUNFELS
State	TX
ZIP	78130
Phone (###-###-####)	8306090543
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	adam@crwa.com

Application Contact

Person TCEQ should contact for questions about this application:

Same as another contact?	Billing Contact
Organization Name	Canyon Regional Water Authority
Prefix	MR
First	Adam
Middle	
Last	Telfer
Suffix	
Credentials	
Title	Compliance Manager
Enter new address or copy one from list:	
Mailing Address	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	850 LAKESIDE PASS
Routing (such as Mail Code, Dept., or Attn:)	
City	NEW BRAUNFELS

State	TX
ZIP	78130
Phone (###-###-####)	8306090543
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	adam@crwa.com

Technical Contact

Person TCEQ should contact for questions about this application:

Same as another contact?	Billing Contact
Organization Name	Canyon Regional Water Authority
Prefix	MR
First	Adam
Middle	
Last	Telfer
Suffix	
Credentials	
Title	Compliance Manager
Enter new address or copy one from list:	

Mailing Address

Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	850 LAKESIDE PASS
Routing (such as Mail Code, Dept., or Attn:)	
City	NEW BRAUNFELS
State	TX
ZIP	78130
Phone (###-###-####)	8306090543
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	
E-mail	adam@crwa.com

DMR Contact

Person responsible for submitting Discharge Monitoring Report Forms:

Same as another contact?	CN605179324, Canyon Regional Water Authority
Organization Name	Canyon Regional Water Authority

Prefix	MR
First	Austin
Middle	
Last	Shirk
Suffix	
Credentials	PE
Title	Plant Manager
Enter new address or copy one from list:	
Mailing Address:	
Address Type	Domestic
Mailing Address (include Suite or Bldg. here, if applicable)	850 LAKESIDE PASS
Routing (such as Mail Code, Dept., or Attn:)	
City	NEW BRAUNFELS
State	TX
ZIP	78130
Phone (###-###-####)	8306090543
Extension	
Alternate Phone (###-###-####)	
Fax (###-###-####)	8306090740
E-mail	austin@crwa.com

Section 1# Permit Contact

Permit Contact#: 1

Person TCEQ should contact throughout the permit term.

1) Same as another contact?	Billing Contact
2) Organization Name	Canyon Regional Water Authority
3) Prefix	MR
4) First	Adam
5) Middle	C
6) Last	Telfer
7) Suffix	
8) Credentials	
9) Title	Compliance Manager
Mailing Address	
10) Enter new address or copy one from list	
11) Address Type	Domestic
11.1) Mailing Address (include Suite or Bldg. here, if applicable)	850 LAKESIDE PASS
11.2) Routing (such as Mail Code, Dept., or Attn:)	
11.3) City	NEW BRAUNFELS

11.4) State	TX
11.5) ZIP	78130
12) Phone (###-###-####)	8306090543
13) Extension	
14) Alternate Phone (###-###-####)	
15) Fax (###-###-####)	
16) E-mail	adam@crwa.com

Owner Information

Owner of Treatment Facility	
1) Prefix	
2) First and Last Name	
3) Organization Name	Canyon Regional Water Authority
4) Mailing Address	850 Lakeside Pass
5) City	New Braunfels
6) State	TX
7) Zip Code	78130
8) Phone (###-###-####)	8306090543
9) Extension	
10) Email	crwa@crwa.com
11) What is ownership of the treatment facility?	Public
Owner of Land (where treatment facility is or will be)	
12) Prefix	
13) First and Last Name	
14) Organization Name	Canyon Regional Water Authority
15) Mailing Address	850 Lakeside Pass
16) City	New Braunfels
17) State	TX
18) Zip Code	78130
19) Phone (###-###-####)	8306090543
20) Extension	
21) Email	crwa@crwa.com
22) Is the landowner the same person as the facility owner or co-applicant?	Yes

General Information Renewal-Amendment

1) Current authorization expiration date:	11/20/2025
2) Current Facility operational status:	Active
3) Is the facility located on or does the treated effluent cross American	No

Indian Land?	
4) What is the application type that you are seeking?	Renewal without changes
5) Current Authorization type:	Conventional Water Treatment
5.1) What is the proposed total flow in MGD discharged at the facility?	0.1
5.2) Select the applicable fee	>= .10 & < .25 MGD - Renewal - $815
6) What is the classification for your authorization?	TPDES and TLAP
6.1) What is the EPA Identification Number?	TX0131351
6.2) Is the wastewater treatment facility location in the existing permit accurate?	Yes
6.3) Are the point(s) of discharge and the discharge route(s) in the existing permit correct?	Yes
6.4) City nearest the outfall(s):	Seguin
6.5) County where the outfalls are located:	GUADALUPE
6.6) Is or will the treated wastewater discharge to a city, county, or state highway right-of-way, or a flood control district drainage ditch?	No
6.7) Is the daily average discharge at your facility of 5 MGD or more?	No
6.8) Is the location of the effluent disposal site in the existing permit accurate?	Yes
6.9) City nearest the disposal site:	seguin
6.10) County in which the disposal site is located:	GUADALUPE
6.11) Describe the routing of effluent from the treatment facility to the disposal site:	Wells Ranch water treatment pumps filter backwash water to two settling ponds. At times, the ponds will discharge effluent to an unnamed tributary of Sandies Creek.
6.12) Identify the nearest watercourse to the disposal site to which rainfall runoff might flow if not contained:	Sandies Creek.
6.13) If the existing permit contains an onsite sludge disposal authorization, is the location of the sewage sludge disposal site in the existing permit accurate?	Yes
Owner of Sewage Sludge Disposal Site	
6.13.1) Prefix	
6.13.2) First and Last Name	
6.13.3) Organization Name	Canyon Regional Water Authority
6.13.4) Mailing Address	850 Lakeside Pass
6.13.5) City	New Braunfels
6.13.6) State	TX
6.13.7) Zip Code	78130
6.13.8) Phone (###-###-####)	8306090543
6.13.9) Extension	
6.13.10) Email	crwa@crwa.com
6.13.11) Is the landowner the same person as the facility owner or co-applicant?	Yes

Owner of Effluent TLAP Disposal Site

6.14) Prefix	
6.15) First and Last Name	
6.16) Organization Name	Canyon Regional Water Authority
6.17) Mailing Address	850 Lakeside Pass
6.18) City	New Braunfels
6.19) State	TX
6.20) Zip Code	78130
6.21) Phone (###-###-####)	8306090543
6.22) Extension	
6.23) Email	adam@crwa.com
6.24) Is the landowner the same person as the facility owner or co-applicant?	Yes
7) Did any person formerly employed by the TCEQ represent your company and get paid for service regarding this application?	No

Public Notice Information

Individual Publishing the Notices

1) Prefix	MR
2) First and Last Name	Adam Telfer
3) Credential	
4) Title	Compliance Manager
5) Organization Name	Canyon Regional Water Authority
6) Mailing Address	850 LAKESIDE PASS
7) Address Line 2	Canyon Regional Water Authority
8) City	NEW BRAUNFELS
9) State	TX
10) Zip Code	78130
11) Phone (###-###-####)	8306090543
12) Extension	
13) Fax (###-###-####)	
14) Email	crwa@crwa.com

Contact person to be listed in the Notices

15) Prefix	MR
16) First and Last Name	Adam Telfer
17) Credential	
18) Title	Compliance Manager
19) Organization Name	Canyon Regional Water Authority
20) Phone (###-###-####)	8306090543

21) Fax (###-###-####)	
22) Email	adam@crwa.com

Bilingual Notice Requirements

23) Is a bilingual education program required by the Texas Education Code at the elementary or middle school nearest to the facility or proposed facility?	No

Section 1# Public Viewing Information

County#: 1

1) County	GUADALUPE
2) Public building name	Canyon Regional Water Authority Office
3) Location within the building	Entrance
4) Physical Address of Building	850 Lakeside Pass
5) City	New Braunfels
6) Contact Name	Adam Telfer
7) Phone (###-###-####)	8306090543
8) Extension	
9) Is the location open to the public?	Yes

Plain Language

1) Plain Language

[File Properties]

File Name	LANG_20972_PLS_2024-11-08 (1).docx
Hash	AAFC8B683A180EFDF51E3BE48D0B39B89466531DFB9A8A1290851E8D30FF56F2
MIME-Type	application/vnd.openxmlformats-officedocument.wordprocessingml.document

Supplemental Permit Information Form

1) Supplemental Permit Information Form (SPIF)

[File Properties]

File Name	SPIF_4.1 SPIF.docx
Hash	4896AE9ED5B8C70ADC75CACBD01336D1E55A54CC7AEFA74432FDD499FF2D1728
MIME-Type	application/vnd.openxmlformats-officedocument.wordprocessingml.document

Domestic Attachments

1) Attach an 8.5"x11", reproduced portion of the most current and original USGS Topographic Quadrangle Map(s) that meets the 1:24,000 scale.

[File Properties]

File Name	MAP_Attachment 2 - USGS Map.pdf
Hash	498D3FFB92066C49C2115CF234C4CAEBCD7DC4962847329A171C17FED8758BB2
MIME-Type	application/pdf

2) I confirm that all required sections of Technical Report 1.0 are complete and will be included in the Technical Attachment.	Yes
2.1) I confirm that Worksheet 2.0 (Receiving Waters) is complete and included in the Technical Attachment.	Yes
2.2) Are you planning to include Worksheet 2.1 (Stream Physical Characteristics) in the Technical Attachment?	No
2.3) I confirm that Worksheet 3.0 (Land Disposal of Effluent) is complete and included in the Technical Attachment.	Yes
2.4) Are you planning to include Worksheet 4.0 (Pollutant Analyses Requirements) in the Technical Attachment?	No
2.5) Are you planning to include Worksheet 5.0 (Toxicity Testing Requirements) in the Technical Attachment?	No
2.6) Are you planning to include Worksheet 7.0 (Class V Injection Well Inventory/Authorization Form) in the Technical Attachment?	No

2.7) Technical Attachment

[File Properties]

File Name	TECH_5. 10054_MUNI_2024 Domestic Technical Report.docx
Hash	52ED22AFC89A8D5C426F1DAC35A89A069FEC4F31DB63490B0DAEFD19CA905960
MIME-Type	application/vnd.openxmlformats-officedocument.wordprocessingml.document

3) Buffer Zone Map

[File Properties]

File Name	BUFF_ZM_Attachment 2 - USGS Map.pdf
Hash	498D3FFB92066C49C2115CF234C4CAEBCD7DC4962847329A171C17FED8758BB2
MIME-Type	application/pdf

4) Flow Diagram

[File Properties]

File Name	FLDIA_Attachment 3 - Flow Diagram.pdf
Hash	2BDBD62B2CE49BC13F91BD28A1BF0E63951DB2950179C96A07F23E6C3F3CE480
MIME-Type	application/pdf

5) Site Drawing

[File Properties]

File Name	SITEDR_Attachment 4 - Site Map (Final).pdf
Hash	914F5D99F53EE51E02D56BDF1B04763221ACB798830082855F9752DE1952C755
MIME-Type	application/pdf

6) Design Calculations

[File Properties]

File Name	DES_CAL_Attachment 8 - Pond Diagram (1) Final.pdf
Hash	CF52C1BC01A181C8CCBF58A9C256270350ADAD602177E140E2CA3241FA46E27F
MIME-Type	application/pdf

[File Properties]

File Name	DES_CAL_Attachment 8 - Pond Diagram (2) Final.pdf
Hash	05E25749BED909E9995042DEA9A603A20A591328CFD5DFF915E288CAAED6D828
MIME-Type	application/pdf

7) Solids Management Plan

8) Water Balance

9) Other Attachments

[File Properties]

File Name	OTHER_Attachment 6 - USDA Natural Resources Conservation Service Soil Map.pdf
Hash	3EC9C20144BF9B912ECC3C677C07998C0DB7B5E6109E75A89AE2E0C05F583872
MIME-Type	application/pdf

[File Properties]

File Name	OTHER_Attachment 5 - Highway Map (Final).pdf
Hash	328E03F57FF1AC28E688A1DC0C204ACD8259E93F8AA0CB8896E32CDF566F4905
MIME-Type	application/pdf

[File Properties]

File Name	OTHER_Attachment 7 - FEMA Map.pdf
Hash	08691CE0B459AF50973EDD4E2BA3A5A25304A38E7CA1791293F1FC3315612B5F
MIME-Type	application/pdf

[File Properties]

File Name	OTHER_Attachment 9 - Insurance - Liability Declarations of Coverage.pdf
Hash	56440C9A18510333726844EF4BB1BA4FA1DBB4BEBAB98C2E22C55A3B645E7414
MIME-Type	application/pdf

[File Properties]

File Name	OTHER_Attachment 11 - TCLP Soil Analysis.pdf
Hash	9ACBFC4E50967246CD527BD50AC55C296747AFBFFFEBE3ABFE764BCD59FF9ECC
MIME-Type	application/pdf

[File Properties]

File Name	OTHER_Soil Survey.pdf
Hash	6EE3685E53EF0A04F2F680FA9D7917EBF5713754759A7A98E4B806F6854D401A
MIME-Type	application/pdf

Certification

I certify that I am authorized under 30 Texas Administrative Code 305.44 to sign this document and can provide documentation in proof of such authorization upon request.

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 there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

1. I am Adam C Telfer, the owner of the STEERS account ER065813.
2. I have the authority to sign this data on behalf of the applicant named above.
3. I have personally examined the foregoing and am familiar with its content and the content of any attachments, and based upon my personal knowledge and/or inquiry of any individual responsible for information contained herein, that this information is true, accurate, and complete.
4. I further certify that I have not violated any term in my TCEQ STEERS participation agreement and that I have no reason to believe that the confidentiality or use of my password has been compromised at any time.
5. I understand that use of my password constitutes an electronic signature legally equivalent to my written signature.
6. I also understand that the attestations of fact contained herein pertain to the implementation, oversight and enforcement of a state and/or federal environmental program and must be true and complete to the best of my knowledge.
7. I am aware that criminal penalties may be imposed for statements or omissions that I know or have reason to believe are untrue or misleading.
8. I am knowingly and intentionally signing Update Domestic or Industrial Individual Permit WQ0014872001.
9. My signature indicates that I am in agreement with the information on this form, and authorize its submittal to the TCEQ.

OWNER Signature: Adam C Telfer OWNER

Customer Number:	CN605179324
Legal Name:	Canyon Regional Water Authority
Account Number:	ER065813
Signature IP Address:	198.46.13.4
Signature Date:	2025-05-21
Signature Hash:	CC6E0E1123C7BB882D01685D394C5CAA1BE83D937EA31E10A8422C2D3FD63AA2
Form Hash Code at time of Signature:	4DC08148A58DD996939BDF8B119D391DF2E17B4975F9A3878129A810049AF18C

Fee Payment

Transaction by:	The application fee payment transaction was made by ER065813/Adam C Telfer
Paid by:	The application fee was paid by ADAM TELFER
Fee Amount:	$800.00
Paid Date:	The application fee was paid on 2025-05-21
Transaction/Voucher number:	The transaction number is 582EA000669130 and the voucher number is 767650

Submission

Reference Number:	The application reference number is 788218
Submitted by:	The application was submitted by ER065813/ Adam C Telfer
Submitted Timestamp:	The application was submitted on 2025-05-21 at 14:37:12 CDT
Submitted From:	The application was submitted from IP address 198.46.13.4
Confirmation Number:	The confirmation number is 654559
Steers Version:	The STEERS version is 6.91
Permit Number:	The permit number is WQ0014872001

Additional Information

Application Creator: This account was created by Adam C Telfer

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUMMARY OF APPLICATION IN PLAIN LANGUAGE FOR TPDES OR TLAP PERMIT APPLICATIONS

Summary of Application (in plain language) Template and Instructions for Texas Pollutant Discharge Elimination System (TPDES) and Texas Land Application (TLAP) Permit Applications

Applicants should use this template to develop a plain language summary of your facility and application as required by Title 30, Texas Administrative Code (30 TAC), Chapter 39, Subchapter H. You may modify the template as necessary to accurately describe your facility as long as the summary includes the following information: (1) the function of the proposed plant or facility; (2) the expected output of the proposed plant or facility; (3) the expected pollutants that may be emitted or discharged by the proposed plant or facility; and (4) how you will control those pollutants, so that the proposed plant will not have an adverse impact on human health or the environment.

Fill in the highlighted areas below to describe your facility and application in plain language. Instructions and examples are provided below. Make any other edits necessary to improve readability or grammar and to comply with the rule requirements. After filling in the information for your facility delete these instructions.

If you are subject to the alternative language notice requirements in 30 TAC Section 39.426, **you must provide a translated copy of the completed plain language summary in the appropriate alternative language as part of your application package**. For your convenience, a Spanish template has been provided below.

ENGLISH TEMPLATE FOR TPDES or TLAP NEW/RENEWAL/AMENDMENT APPLICATIONS DOMESTIC WASTEWATER/STORMWATER

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and is not a federal enforceable representation of the permit application.

Canyon Regional Water Authority (CN605179324) operates Wells Ranch Water Treatment Plant (RN105446850), a groundwater facility that produces and delivers drinking water to its wholesale costumers. The facility is located at 383 High Point Ridge, in Seguin, Guadalupe County, Texas 78155. The Wells Ranch Treatment Plant is renewing its TPDES and SLUDGE permits. This permit will not authorize a discharge of pollutants into water in the state.

Discharges from the facility are expected to contain iron and manganese. The plant process water flows to settling ponds and is treated by settling and then discharged to a receiving stream.

PLANTILLA EN ESPAÑOL PARA SOLICITUDES NUEVAS/RENOVACIONES/ENMIENDAS DE TPDES o TLAP

AGUAS RESIDUALES DOMESTICAS /AGUAS PLUVIALES

El siguiente resumen se proporciona para esta solicitud de permiso de calidad del agua pendiente que está siendo revisada por la Comisión de Calidad Ambiental de Texas según lo requerido por el Capítulo 39 del Código Administrativo de Texas 30. La información proporcionada en este resumen puede cambiar durante la revisión técnica de la solicitud y no es una representación ejecutiva fedérale de la solicitud de permiso.

Canyon Regional Water Authority (CN605179324) opera Wells Ranch Water Treatment Plant RN105446850, un instalación de agua subterránea que produce y entrega agua potable a sus clientes mayoristas. La instalación está ubicada en 383 High Point Ridge, en Seguin, Condado de Guadalupe County, Texas 78155. La Planta de Tratamiento Wells Ranch está renovando sus permisos TPDES y TLAP . Este permiso no autorizará una descarga de contaminantes en el agua en el estado.

Se espera que las descargas de la instalación contengan hierro y manganeso. Las aguas del proceso de la planta fluyen hacia los estanques de sedimentación y. está tratado por asentándose y luego descargado en un arroyo receptor.

INSTRUCTIONS

1. Enter the name of applicant in this section. The applicant name should match the name associated with the customer number.
2. Enter the Customer Number in this section. Each Individual or Organization is issued a unique 11-digit identification number called a CN (e.g. CN123456789).
3. Choose “operates” in this section for existing facility applications or choose “proposes to operate” for new facility applications.
4. Enter the name of the facility in this section. The facility name should match the name associated with the regulated entity number.
5. Enter the Regulated Entity number in this section. Each site location is issued a unique 11-digit identification number called an RN (e.g. RN123456789).
6. Choose the appropriate article (a or an) to complete the sentence.
7. Enter a description of the facility in this section. For example: steam electric generating facility, nitrogenous fertilizer manufacturing facility, etc.
8. Choose “is” for an existing facility or “will be” for a new facility.
9. Enter the location of the facility in this section.
10. Enter the City nearest the facility in this section.
11. Enter the County nearest the facility in this section.
12. Enter the zip code for the facility address in this section.
13. Enter a summary of the application request in this section. For example: renewal to discharge 25,000 gallons per day of treated domestic wastewater, new application to discharge process wastewater and stormwater on an intermittent and flow-variable basis, or major amendment to reduce monitoring frequency for pH, etc. If more than one outfall is included in the application, provide applicable information for each individual outfall.
14. List all pollutants expected in the discharge from this facility in this section. If applicable, refer to the pollutants from any federal numeric effluent limitations that apply to your facility.
15. Enter the discharge types from your facility in this section (e.g., stormwater, process wastewater, once through cooling water, etc.)
16. Choose the appropriate verb tense to complete the sentence.
17. Enter a description of the wastewater treatment used at your facility. Include a description of each process, starting with initial treatment and finishing with the outfall/point of disposal. Use additional lines for individual discharge types if necessary.

Questions or comments concerning this form may be directed to the Water Quality Division’s Application Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by phone at (512) 239-4671.

Example 1: Industrial Wastewater TPDES Application (ENGLISH)

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 TAC Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.

ABC Corporation (CN600000000) operates the Starr Power Station (RN10000000000), a two-unit gas-fired electric generating facility. Unit 1 has a generating capacity of 393 megawatts (MWs) and Unit 2 has a generating capacity of 528 MWs. The facility is located at 1356 Starr Street, near the City of Austin, Travis County, Texas 78753.

This application is for a renewal to discharge 870,000,000 gallons per day of once through cooling water, auxiliary cooling water, and also authorizes the following waste streams monitored inside the facility (internal outfalls) before it is mixed with the other wastewaters authorized for discharge via main Outfall 001, referred to as "previously monitored effluents" (low-volume wastewater, metal-cleaning waste, and stormwater (from diked oil storage area yards and storm drains)) via Outfall 001. Low-volume waste sources, metal-cleaning waste, and stormwater drains on a continuous and flow-variable basis via internal Outfall 101.

The discharge of once through cooling water via Outfall 001 and low-volume waste and metal-cleaning waste via Outfall 101 from this facility is subject to federal effluent limitation guidelines at 40 CFR Part 423. The pollutants expected from these discharges based on 40 CFR Part 423 are: free available chlorine, total residual chlorine, total suspended solids, oil and grease, total iron, total copper, and pH. Temperature is also expected from these discharges. Additional potential pollutants are included in the Industrial Wastewater Application Technical Report, Worksheet 2.0.

Cooling water and boiler make-up water are supplied by Lake Starr Reservoir. The City of Austin municipal water plant (CN600000000, PWS 00000) supplies the facility's potable water and serves as an alternate source of boiler make-up water. Water from the Lake Starr Reservoir is withdrawn at the intake structure and treated with sodium hypochlorite to prevent biofouling and sodium bromide as a chlorine enhancer to improve efficacy and then passed through condensers and auxiliary equipment on a once-through basis to cool equipment and condense exhaust steam.

Low-volume wastewater from blowdown of boiler Units 1 and 2 and metal-cleaning wastes receive no treatment prior to discharge via Outfall 101. Plant floor and equipment drains and stormwater runoff from diked oil storage areas, yards, and storm drains are routed through an oil and water separator prior to discharge via Outfall 101. Domestic wastewater, blowdown, and backwash water from the service water filter, clarifier, and sand filter are routed to the Starr Creek Domestic Sewage Treatment Plant, TPDES Permit No. WQ0010000001, for treatment and disposal. Metal-cleaning waste from equipment cleaning is generally disposed of off-site.

Example 2: Domestic Wastewater TPDES Renewal application

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to discharge at an annual average flow of 1,200,000 gallons per day of treated domestic wastewater via Outfalls 001 and 002.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ($CBOD_5$), total suspended solids (TSS), ammonia nitrogen (NH_3-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent and Domestic Worksheet 4.0 in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

Example 3: Domestic Wastewater TPDES New Application

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations of the permit application.

The City of Texas (CN000000000) proposes to operate the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the extended aeration mode. The facility will be located at 123 Texas Street, in the City of More Texas, Texas County, Texas 71234.

This application is for a new application to discharge at a daily average flow of 200,000 gallons per day of treated domestic wastewater.

Discharges from the facility are expected to contain five-day carbonaceous biochemical oxygen demand ($CBOD_5$), total suspended solids (TSS), ammonia nitrogen (NH_3-N), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater will be treated by an activated sludge process plant and the treatment units will include a bar screen, a grit chamber, aeration basins, final clarifiers, sludge digesters, a belt filter press, chlorine contact chambers and a dechlorination chamber.

Example 4: Domestic Wastewater TLAP Renewal application

The following summary is provided for this pending water quality permit application being reviewed by the Texas Commission on Environmental Quality as required by 30 Texas Administrative Code Chapter 39. The information provided in this summary may change during the technical review of the application and are not federal enforceable representations

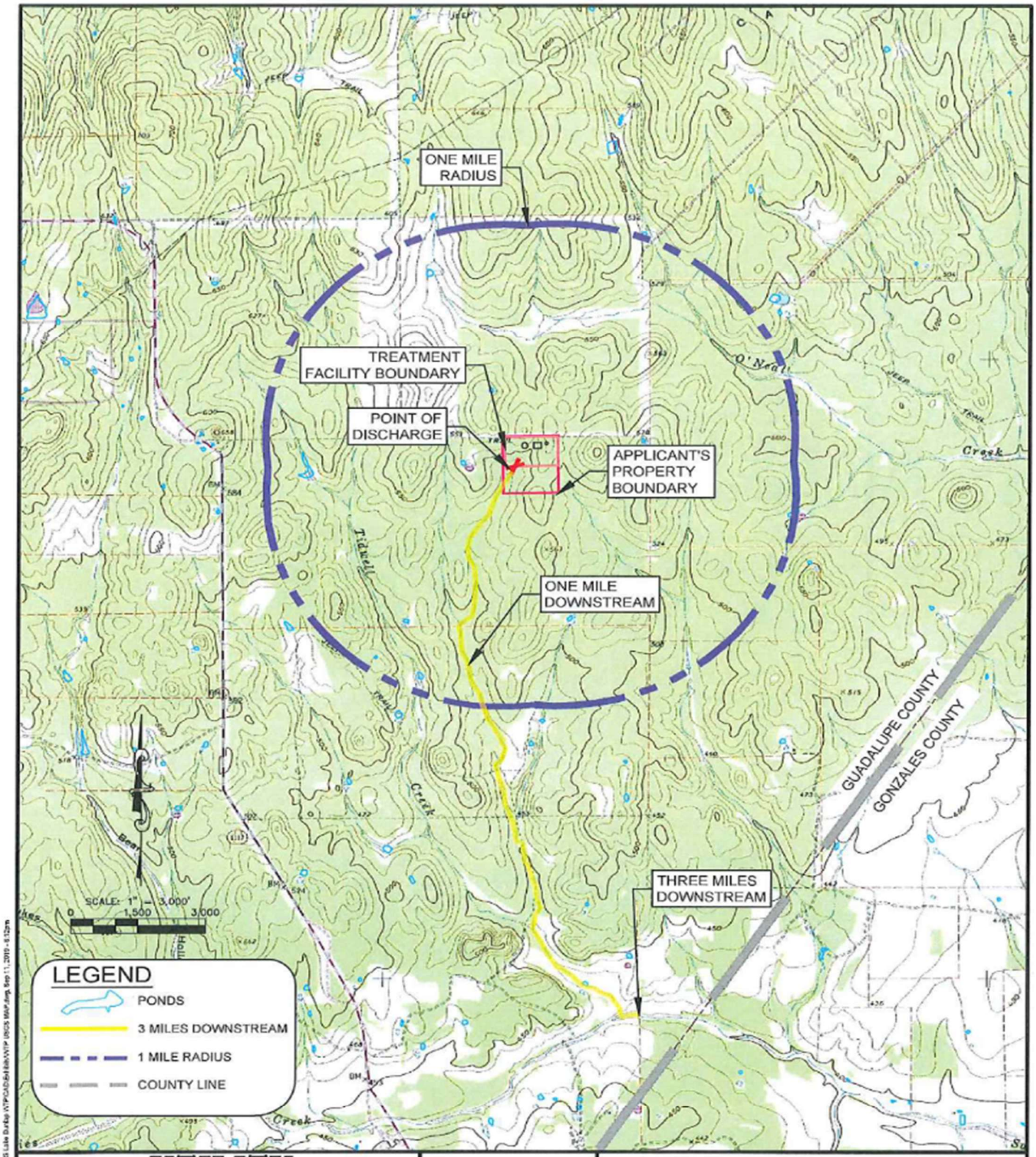
of the permit application.

The City of Texas (CN000000000) operates the City of Texas wastewater treatment plant (RN000000000), an activated sludge process plant operated in the complete mix mode. The facility is located at 123 Texas Street, near the City of More Texas, Texas County, Texas 71234.

This application is for a renewal to dispose a daily average flow not to exceed 76,500 gallons per day of treated domestic wastewater via public access subsurface drip irrigation system with a minimum area of 32 acres. This permit will not authorize a discharge of pollutants into water in the state.

Land application of domestic wastewater from the facility are expected to contain five-day biochemical oxygen demand (BOD_5), total suspended solids (TSS), and *Escherichia coli*. Additional potential pollutants are included in the Domestic Technical Report 1.0, Section 7. Pollutant Analysis of Treated Effluent in the permit application package. Domestic wastewater is treated by an activated sludge process plant and the treatment units include a bar screen, an equalization basin, an aeration basin, a final clarifier, an aerobic sludge digester, tertiary filters, and a chlorine contact chamber. In addition, the facility includes a temporary storage that equals to at least three days of the daily average flow.

Attachment: 2 – USGS Map



UTILITY ENGINEERING GROUP PLLC
256 Conrad Ave NEW BRAUNFELS, TEXAS 78130 PH: (830) 214-3821
Texas Engineering Firm F-18712

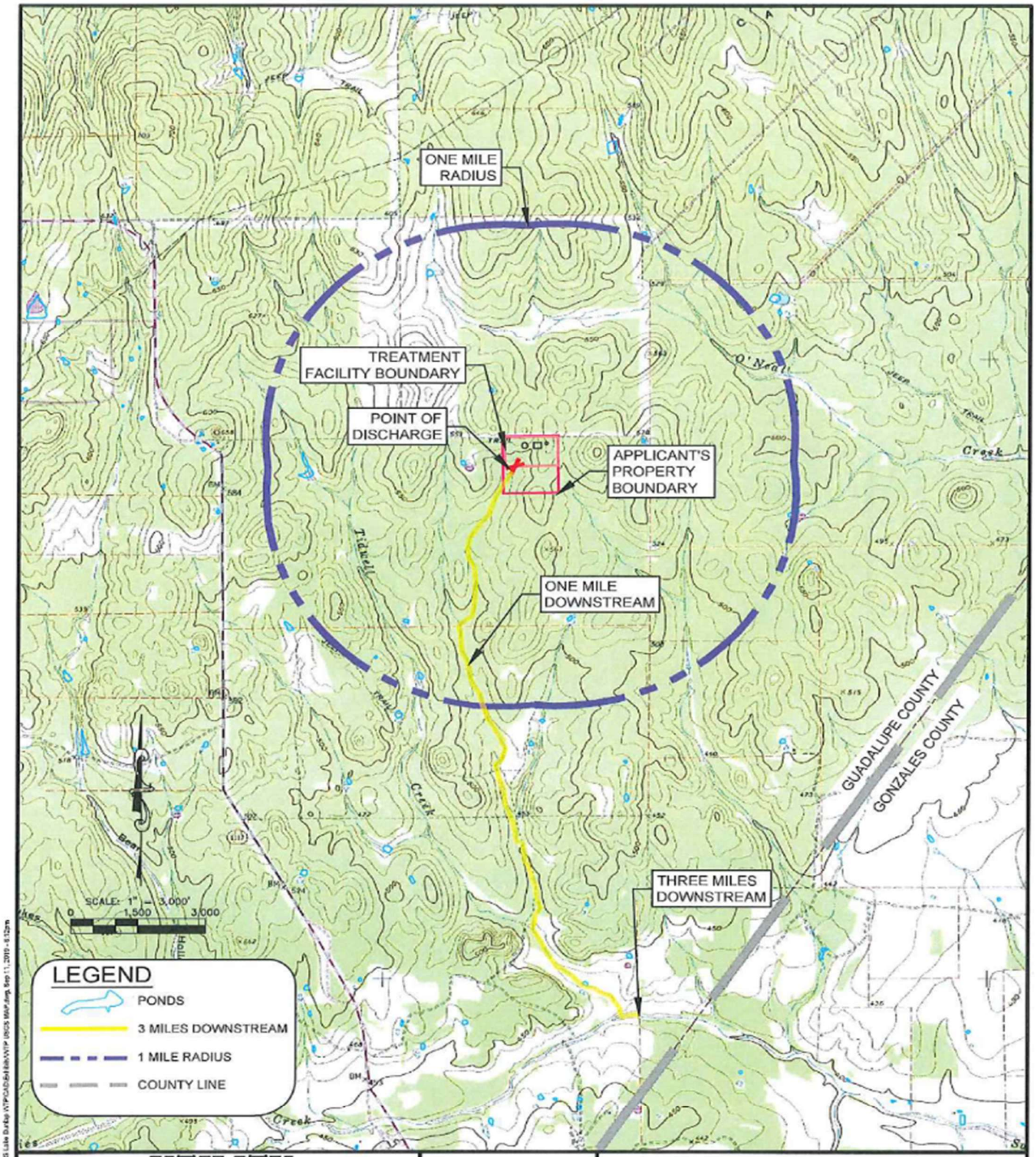
SCALE:	
DATE:	11 September, 2019
PROJECT NO:	
DESIGNED BY:	
DRAWN BY:	
CHECKED BY:	

CANYON REGIONAL WATER AUTHORITY

WELLS RANCH WATER TREATMENT PLANT
USGS MAP

SHEET: OF

Attachment: 2 – USGS Map



UTILITY ENGINEERING GROUP PLLC
256 Conrad Ave NEW BRAUNFELS, TEXAS 78130 PH: (830) 214-3821
Texas Engineering Firm F-18712

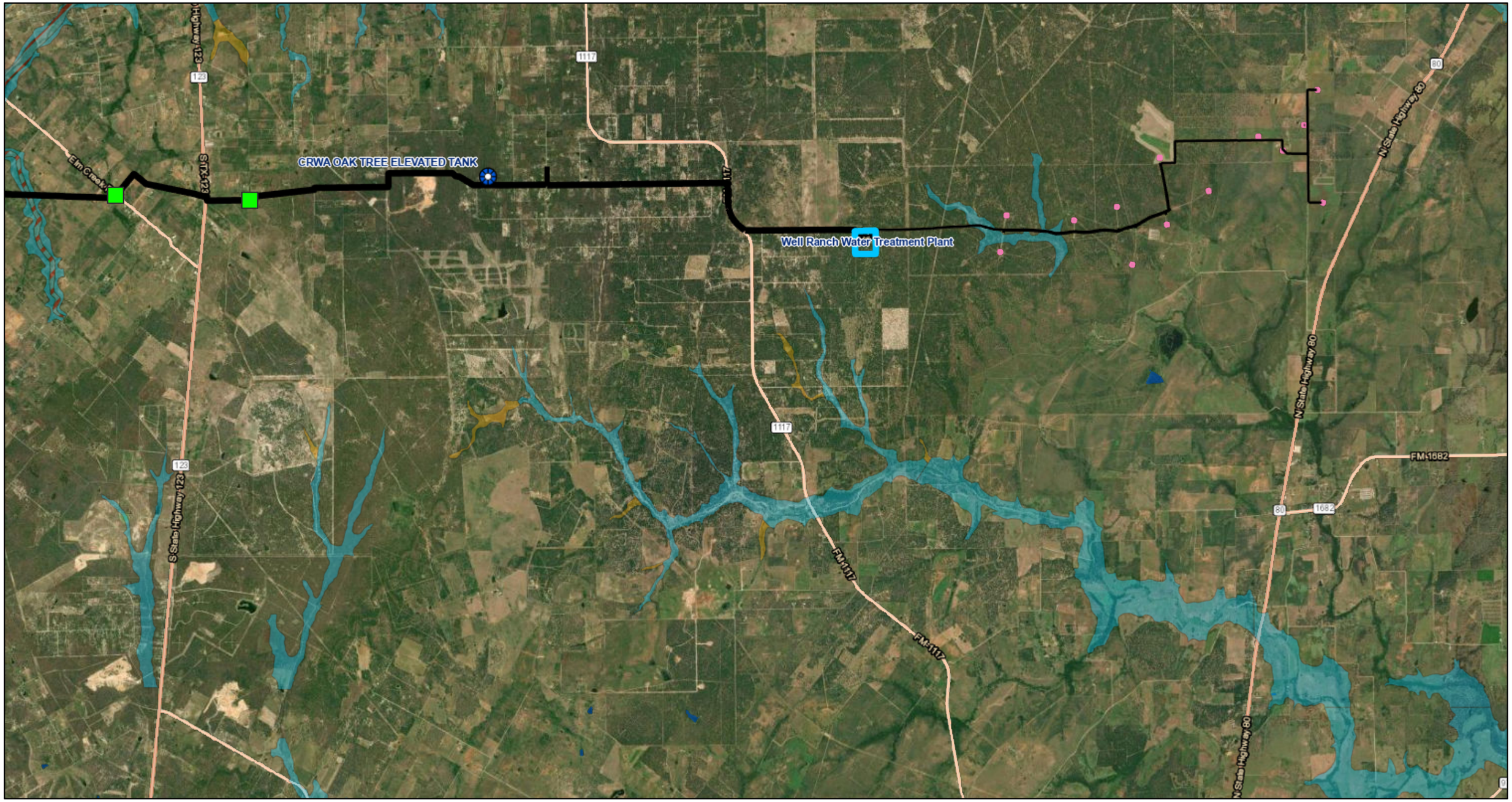
SCALE:	
DATE:	11 September, 2019
PROJECT NO:	
DESIGNED BY:	
DRAWN BY:	
CHECKED BY:	

CANYON REGIONAL WATER AUTHORITY

WELLS RANCH WATER TREATMENT PLANT
USGS MAP

SHEET: OF

Attachment: 7 - FEMA Map



5/19/2025, 10:00:41 AM

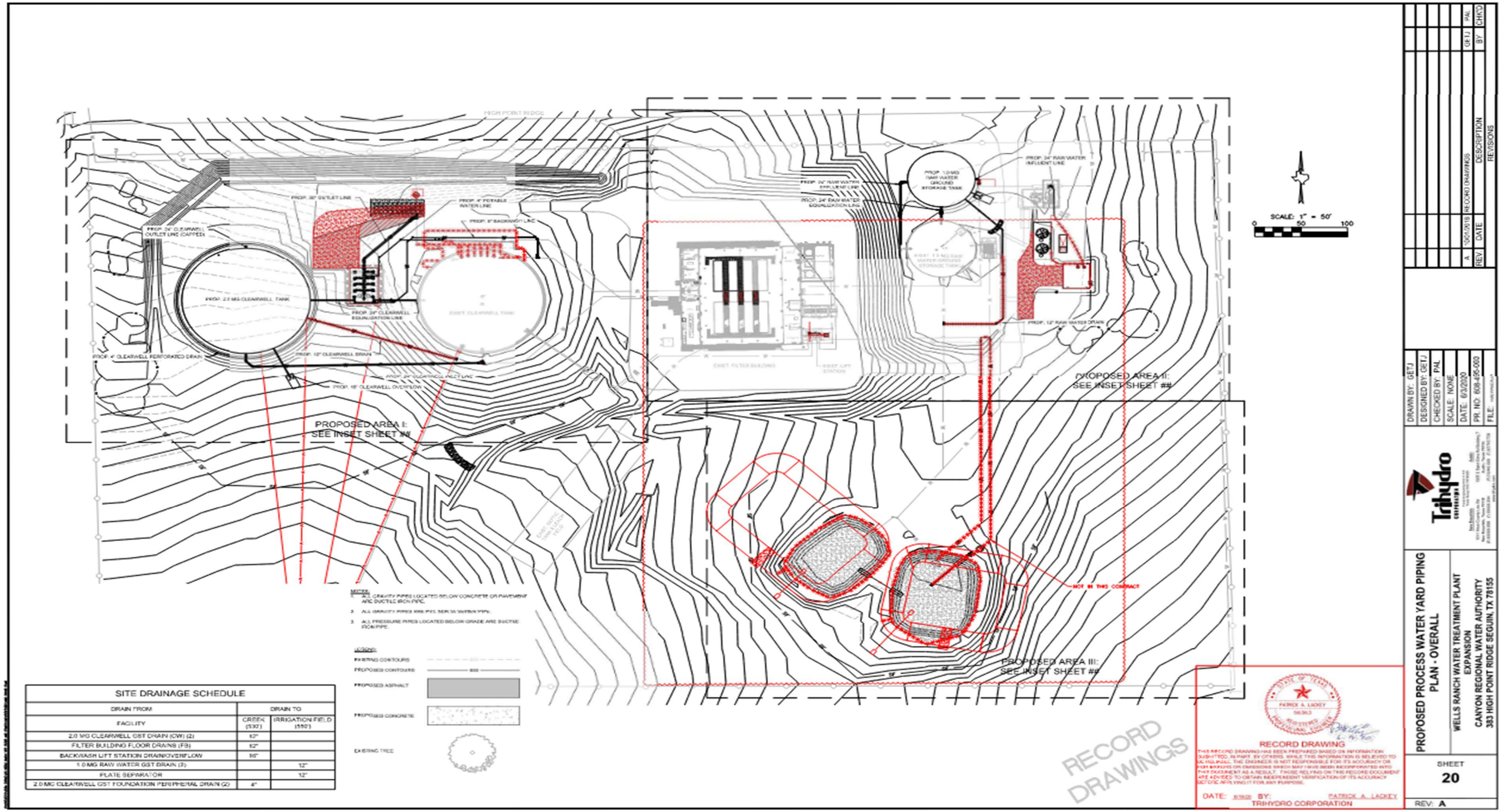
1:78,920

CRWA Vaults
Facilities
Water Treatment Plants
6" Water
12" Water
16" Water
30" Water
All Water Lines
Boundary
As-Builts
All Water Lines
Well 1 Acre Boundaries
Flood Hazard Zones
1% Annual Chance Flood Hazard
Regulatory Floodway
0.2% Annual Chance Flood Hazard
Water Areas
World_Transportation
World Imagery
Low Resolution 15m Imagery
High Resolution 60cm Imagery
High Resolution 30cm Imagery
Citations
19m Resolution Metadata

0 0.75 1.5 3 mi
0 1.25 2.5 5 km

Esri, HERE, Earthstar Geographics, KFWGIS, SGarza

Attachment: 4 – Wells Ranch WTP Site Map



SITE DRAINAGE SCHEDULE

DRAIN FROM	DRAIN TO	
FACILITY	CREEK (530')	IRRIGATION FIELD (550')
2.0 MG CLEARWELL GST DRAIN (CW) (2)	12"	
FILTER BUILDING FLOOR DRAINS (FB)	12"	
BACKWASH LIFT STATION DRAIN/OVERFLOW	16"	
1.0 MG RAW WATER GST DRAIN (3)		12"
PLATE SEPARATOR		12"
2.0 MG CLEARWELL GST FOUNDATION PERIPHERAL DRAIN (2)	4"	

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

SUPPLEMENTAL PERMIT INFORMATION FORM (SPIF)

FOR AGENCIES REVIEWING DOMESTIC OR INDUSTRIAL TPDES WASTEWATER PERMIT APPLICATIONS

TCEQ USE ONLY:

Application type: ____Renewal ____Major Amendment ____Minor Amendment ____New

County: _____ Segment Number: _____

Admin Complete Date: _____

Agency Receiving SPIF:

_____ Texas Historical Commission _____ U.S. Fish and Wildlife

_____ Texas Parks and Wildlife Department _____ U.S. Army Corps of Engineers

This form applies to TPDES permit applications only. (Instructions, Page 53)

Complete this form as a separate document. TCEQ will mail a copy to each agency as required by our agreement with EPA. If any of the items are not completely addressed or further information is needed, we will contact you to provide the information before issuing the permit. Address each item completely.

Do not refer to your response to any item in the permit application form. Provide each attachment for this form separately from the Administrative Report of the application. The application will not be declared administratively complete without this SPIF form being completed in its entirety including all attachments. Questions or comments concerning this form may be directed to the Water Quality Division's Application Review and Processing Team by email at WQ-ARPTeam@tceq.texas.gov or by phone at (512) 239-4671.

The following applies to all applications:

1. Permittee: Canyon Regional Water Authority

   Permit No. WQ00 14872001 EPA ID No. TX 013151

   Address of the project (or a location description that includes street/highway, city/vicinity, and county):

   383 High Point Ridge, Seguin, TX 78155

Provide the name, address, phone and fax number of an individual that can be contacted to answer specific questions about the property.

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Adam Telfer

Credential (P.E, P.G., Ph.D., etc.): Click here to enter text.

Title: Compliance Manager

Mailing Address: 850 Lakeside Pass

City, State, Zip Code: New Braunfels, TX 78130

Phone No.: 830-609-0543 Ext.: Click here to enter text. Fax No.: Click here to enter text.

E-mail Address: adam@crwa.com

2. List the county in which the facility is located: Guadalupe
3. If the property is publicly owned and the owner is different than the permittee/applicant, please list the owner of the property.

N/A

4. Provide a description of the effluent discharge route. The discharge route must follow the flow of effluent from the point of discharge to the nearest major watercourse (from the point of discharge to a classified segment as defined in 30 TAC Chapter 307). If known, please identify the classified segment number.

Wells Ranch Water Treatment pumps filter effluent to two settling ponds. At times, the ponds will discharge effluent to an unnamed tributary of Sandies Creek.

5. Please provide a separate 7.5-minute USGS quadrangle map with the project boundaries plotted and a general location map showing the project area. Please highlight the discharge route from the point of discharge for a distance of one mile downstream. (This map is required in addition to the map in the administrative report).

Provide original photographs of any structures 50 years or older on the property.

Does your project involve any of the following? Check all that apply.

- ☐ Proposed access roads, utility lines, construction easements
- ☐ Visual effects that could damage or detract from a historic property's integrity
- ☐ Vibration effects during construction or as a result of project design
- ☐ Additional phases of development that are planned for the future
- ☐ Sealing caves, fractures, sinkholes, other karst features

☐ Disturbance of vegetation or wetlands

1. List proposed construction impact (surface acres to be impacted, depth of excavation, sealing of caves, or other karst features):

N/A

2. Describe existing disturbances, vegetation, and land use:

N/A

THE FOLLOWING ITEMS APPLY ONLY TO APPLICATIONS FOR NEW TPDES PERMITS AND MAJOR AMENDMENTS TO TPDES PERMITS

3. List construction dates of all buildings and structures on the property:

Click here to enter text.

4. Provide a brief history of the property, and name of the architect/builder, if known.

Click here to enter text.

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.0

For any questions about this form, please contact the Domestic Wastewater Permitting Team at 512-239-4671.

The following information is required for all renewal, new, and amendment applications.

Section 1. Permitted or Proposed Flows (Instructions Page 42)

A. Existing/Interim I Phase

Design Flow (MGD): .100

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: 2007

Estimated waste disposal start date: Click to enter text.

B. Interim II Phase

Design Flow (MGD): .100

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: 2019

Estimated waste disposal start date: Click to enter text.

C. Final Phase

Design Flow (MGD): .100

2-Hr Peak Flow (MGD): Click to enter text.

Estimated construction start date: 2019

Estimated waste disposal start date: Click to enter text.

D. Current Operating Phase

Provide the startup date of the facility: 2007

Section 2. Treatment Process (Instructions Page 42)

A. Current Operating Phase

Provide a detailed description of the treatment process. **Include the type of treatment plant, mode of operation, and all treatment units.** Start with the plant's head works and

finish with the point of discharge. Include all sludge processing and drying units. **If more than one phase exists or is proposed, a description of *each phase* must be provided**.

Well water from the Carrizo and Wilcox aquifers are pumped to the Wells Ranch WTP. Lime slurry is used to adjust water chemistry, chlorine is added for the oxidation of iron and manganese. The water is filtered through sand filters and a final injection of chlorine is added before flowing to clear wells. The backwash water from the sand filters is pumped to two settling ponds where the water percolates through the soil.

B. Treatment Units

In Table 1.0(1), provide the treatment unit type, the number of units, and dimensions (length, width, depth) **of each treatment unit, accounting for *all* phases of operation.**

Table 1.0(1) - Treatment Units

Treatment Unit Type	Number of Units	Dimensions (L x W x D)
Sand filters	8	37' x 10' x 10'

C. Process Flow Diagram

Provide flow diagrams for the existing facilities and **each** proposed phase of construction.

Attachment: 3 – Flow Diagram

Section 3. Site Information and Drawing (Instructions Page 43)

Provide the TPDES discharge outfall latitude and longitude. Enter N/A if not applicable.

- Latitude: 29.45249
- Longitude: -97.822884

Provide the TLAP disposal site latitude and longitude. Enter N/A if not applicable.

- Latitude: 29.45249
- Longitude: -97.822884

Provide a site drawing for the facility that shows the following:

- The boundaries of the treatment facility;
- The boundaries of the area served by the treatment facility;
- If land disposal of effluent, the boundaries of the disposal site and all storage/holding ponds; and
- If sludge disposal is authorized in the permit, the boundaries of the land application or disposal site.

Attachment: 4 – Site Drawing

Provide the name **and** a description of the area served by the treatment facility.

Wells Ranch WTP serves water utilities in the western side of Guadalupe County and the Northeast side of Bexar County.

Collection System Information **for wastewater TPDES permits only**: Provide information for each **uniquely owned** collection system, existing and new, served by this facility, including satellite collection systems. **Please see the instructions for a detailed explanation and examples.**

Collection System Information

Collection System Name	Owner Name	Owner Type	Population Served
N/A	N/A	Choose an item.	N/A
		Choose an item.	
		Choose an item.	
		Choose an item.	

Section 4. Unbuilt Phases (Instructions Page 44)

Is the application for a renewal of a permit that contains an unbuilt phase or phases?

☐ Yes ☒ No

If yes, does the existing permit contain a phase that has not been constructed **within five years** of being authorized by the TCEQ?

☐ Yes ☐ No

If yes, provide a detailed discussion regarding the continued need for the unbuilt phase. **Failure to provide sufficient justification may result in the Executive Director recommending denial of the unbuilt phase or phases**.

Click to enter text.

Section 5. Closure Plans (Instructions Page 44)

Have any treatment units been taken out of service permanently, or will any units be taken out of service in the next five years?

☐ Yes ☒ No

If yes, was a closure plan submitted to the TCEQ?

☐ Yes ☐ No

If yes, provide a brief description of the closure and the date of plan approval.

Click to enter text.

Section 6. Permit Specific Requirements (Instructions Page 44)

For applicants with an existing permit, check the Other Requirements or Special Provisions of the permit.

A. Summary transmittal

Have plans and specifications been approved for the existing facilities and each proposed phase?

☒ Yes ☐ No

If yes, provide the date(s) of approval for each phase: Click to enter text.

Provide information, including dates, on any actions taken to meet a *requirement or provision* pertaining to the submission of a summary transmittal letter. **Provide a copy of an approval letter from the TCEQ, if applicable**.

Click to enter text.

B. Buffer zones

Have the buffer zone requirements been met?

☒ Yes ☐ No

Provide information below, including dates, on any actions taken to meet the conditions of the buffer zone. If available, provide any new documentation relevant to maintaining the buffer zones.

No land application events have occurred yet to record.

C. Other actions required by the current permit

Does the *Other Requirements* or *Special Provisions* section in the existing permit require submission of any other information or other required actions? Examples include Notification of Completion, progress reports, soil monitoring data, etc.

☒ Yes ☒ No

If yes, provide information below on the status of any actions taken to meet the conditions of an *Other Requirement* or *Special Provision*.

Soil monitoring is required on an annual basis. Results are submitted to TCEQ in the Annual Sludge Summary Report.

D. Grit and grease treatment

1. Acceptance of grit and grease waste

Does the facility have a grit and/or grease processing facility onsite that treats and decants or accepts transported loads of grit and grease waste that are discharged directly to the wastewater treatment plant prior to any treatment?

☐ Yes ☒ No

If No, stop here and continue with Subsection E. Stormwater Management.

2. Grit and grease processing

Describe below how the grit and grease waste is treated at the facility. In your description, include how and where the grit and grease is introduced to the treatment works and how it is separated or processed. Provide a flow diagram showing how grit and grease is processed at the facility.

Click to enter text.

3. Grit disposal

Does the facility have a Municipal Solid Waste (MSW) registration or permit for grit disposal?

☐ Yes ☒ No

If No, contact the TCEQ Municipal Solid Waste team at 512-239-2335. Note: A registration or permit is required for grit disposal. Grit shall not be combined with treatment plant sludge. See the instruction booklet for additional information on grit disposal requirements and restrictions.

Describe the method of grit disposal.

Click to enter text.

4. *Grease and decanted liquid disposal*

Note: A registration or permit is required for grease disposal. Grease shall not be combined with treatment plant sludge. For more information, contact the TCEQ Municipal Solid Waste team at 512-239-2335.

Describe how the decant and grease are treated and disposed of after grit separation.

Click to enter text.

E. Stormwater management

1. *Applicability*

Does the facility have a design flow of 1.0 MGD or greater in any phase?

☐ Yes ☒ No

Does the facility have an approved pretreatment program, under 40 CFR Part 403?

☐ Yes ☒ No

If no to both of the above, then skip to Subsection F, Other Wastes Received.

2. *MSGP coverage*

Is the stormwater runoff from the WWTP and dedicated lands for sewage disposal currently permitted under the TPDES Multi-Sector General Permit (MSGP), TXR050000?

☐ Yes ☒ No

If yes, please provide MSGP Authorization Number and skip to Subsection F, Other Wastes Received:

TXR05 Click to enter text. or TXRNE Click to enter text.

If no, do you intend to seek coverage under TXR050000?

☐ Yes ☒ No

3. *Conditional exclusion*

Alternatively, do you intend to apply for a conditional exclusion from permitting based TXR050000 (Multi Sector General Permit) Part II B.2 or TXR050000 (Multi Sector General Permit) Part V, Sector T 3(b)?

☐ Yes ☒ No

If yes, please explain below then proceed to Subsection F, Other Wastes Received:

Click to enter text.

4. ***Existing coverage in individual permit***

Is your stormwater discharge currently permitted through this individual TPDES or TLAP permit?

☐ Yes ☒ No

If yes, provide a description of stormwater runoff management practices at the site that are authorized in the wastewater permit then skip to Subsection F, Other Wastes Received.

Click to enter text.

5. ***Zero stormwater discharge***

Do you intend to have no discharge of stormwater via use of evaporation or other means?

☐ Yes ☒ No

If yes, explain below then skip to Subsection F. Other Wastes Received.

Click to enter text.

Note: If there is a potential to discharge any stormwater to surface water in the state as the result of any storm event, then permit coverage is required under the MSGP or an individual discharge permit. This requirement applies to all areas of facilities with treatment plants or systems that treat, store, recycle, or reclaim domestic sewage, wastewater or sewage sludge (including dedicated lands for sewage sludge disposal located within the onsite property boundaries) that meet the applicability criteria of above. You have the option of obtaining coverage under the MSGP for direct discharges, (recommended), or obtaining coverage under this individual permit.

6. ***Request for coverage in individual permit***

Are you requesting coverage of stormwater discharges associated with your treatment plant under this individual permit?

☐ Yes ☒ No

If yes, provide a description of stormwater runoff management practices at the site for which you are requesting authorization in this individual wastewater permit and describe whether you intend to comingle this discharge with your treated effluent or discharge it via a separate dedicated stormwater outfall. Please also indicate if you

intend to divert stormwater to the treatment plant headworks and indirectly discharge it to water in the state.

Click to enter text.

Note: Direct stormwater discharges to waters in the state authorized through this individual permit will require the development and implementation of a stormwater pollution prevention plan (SWPPP) and will be subject to additional monitoring and reporting requirements. Indirect discharges of stormwater via headworks recycling will require compliance with all individual permit requirements including 2-hour peak flow limitations. All stormwater discharge authorization requests will require additional information during the technical review of your application.

F. Discharges to the Lake Houston Watershed

Does the facility discharge in the Lake Houston watershed?

☐ Yes ☒ No

If yes, attach a Sewage Sludge Solids Management Plan. See Example 5 in the instructions.
Click to enter text.

G. Other wastes received including sludge from other WWTPs and septic waste

1. Acceptance of sludge from other WWTPs

Does or will the facility accept sludge from other treatment plants at the facility site?

☐ Yes ☒ No

If yes, attach sewage sludge solids management plan. See Example 5 of instructions.

In addition, provide the date the plant started or is anticipated to start accepting sludge, an estimate of monthly sludge acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the sludge, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.

2. Acceptance of septic waste

Is the facility accepting or will it accept septic waste?

☐ Yes ☒ No

If yes, does the facility have a Type V processing unit?

☐ Yes ☐ No

If yes, does the unit have a Municipal Solid Waste permit?

☐ Yes ☐ No

If yes to any of the above, provide the date the plant started or is anticipated to start accepting septic waste, an estimate of monthly septic waste acceptance (gallons or millions of gallons), an estimate of the BOD_5 concentration of the septic waste, and the design BOD_5 concentration of the influent from the collection system. Also note if this information has or has not changed since the last permit action.

Click to enter text.

Note: Permits that accept sludge from other wastewater treatment plants may be required to have influent flow and organic loading monitoring.

3. ***Acceptance of other wastes (not including septic, grease, grit, or RCRA, CERCLA or as discharged by IUs listed in Worksheet 6)***

Is or will the facility accept wastes that are not domestic in nature excluding the categories listed above?

☐ Yes ☒ No

If yes, provide the date that the plant started accepting the waste, an estimate how much waste is accepted on a monthly basis (gallons or millions of gallons), a description of the entities generating the waste, and any distinguishing chemical or other physical characteristic of the waste. Also note if this information has or has not changed since the last permit action.

Click to enter text.

Section 7. Pollutant Analysis of Treated Effluent (Instructions Page 49)

Is the facility in operation?

☒ Yes ☐ No

If no, this section is not applicable. Proceed to Section 8.

If yes, provide effluent analysis data for the listed pollutants. ***Wastewater treatment facilities*** complete Table 1.0(2). **W*ater treatment facilities*** discharging filter backwash water, complete Table 1.0(3). Provide copies of the laboratory results sheets. **These tables are not applicable for a minor amendment without renewal.** See the instructions for guidance.

Note: The sample date must be within 1 year of application submission.

Table1.0(2) – Pollutant Analysis for Wastewater Treatment Facilities

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
$CBOD_5$, mg/l					
Total Suspended Solids, mg/l					
Ammonia Nitrogen, mg/l					
Nitrate Nitrogen, mg/l					
Total Kjeldahl Nitrogen, mg/l					
Sulfate, mg/l					
Chloride, mg/l					
Total Phosphorus, mg/l					
pH, standard units					
Dissolved Oxygen*, mg/l					
Chlorine Residual, mg/l					
E.coli (CFU/100ml) freshwater					
Entercocci (CFU/100ml) saltwater					
Total Dissolved Solids, mg/l					
Electrical Conductivity, µmohs/cm, †					
Oil & Grease, mg/l					
Alkalinity ($CaCO_3$)*, mg/l					

*TPDES permits only
†TLAP permits only

Table1.0(3) – Pollutant Analysis for Water Treatment Facilities

Pollutant	Average Conc.	Max Conc.	No. of Samples	Sample Type	Sample Date/Time
Total Suspended Solids, mg/l		4.80 mg/L	1	Grab	4/24/2025
Total Dissolved Solids, mg/l					
pH, standard units		8.2 mg/L	1	Grab	4/24/2025
Fluoride, mg/l					
Aluminum, mg/l					
Alkalinity ($CaCO_3$), mg/l		123 mg/L	1	Grab	4/21/2025

Section 8. Facility Operator (Instructions Page 49)

Facility Operator Name: Austin Shirk

Facility Operator's License Classification and Level: Surface Water C, Ground Water C

Facility Operator's License Number: WS0014601, WG0017486

Section 9. Sludge and Biosolids Management and Disposal (Instructions Page 50)

A. WWTP's Sewage Sludge or Biosolids Management Facility Type

Check all that apply. See instructions for guidance

☐ Design flow>= 1 MGD

☐ Serves >= 10,000 people

☐ Class I Sludge Management Facility (per 40 CFR § 503.9)

☐ Biosolids generator

☐ Biosolids end user – land application (onsite)

☐ Biosolids end user – surface disposal (onsite)

☐ Biosolids end user – incinerator (onsite)

B. WWTP's Sewage Sludge or Biosolids Treatment Process

Check all that apply. See instructions for guidance.

☐ Aerobic Digestion

☐ Air Drying (or sludge drying beds)

☐ Lower Temperature Composting

☐ Lime Stabilization

☐ Higher Temperature Composting

☐ Heat Drying

☐ Thermophilic Aerobic Digestion

☐ Beta Ray Irradiation

☐ Gamma Ray Irradiation

☐ Pasteurization

☐ Preliminary Operation (e.g. grinding, de-gritting, blending)

☐ Thickening (e.g. gravity thickening, centrifugation, filter press, vacuum filter)

☐ Sludge Lagoon

☐ Temporary Storage (< 2 years)

☐ Long Term Storage (>= 2 years)

☐ Methane or Biogas Recovery

☐ Other Treatment Process: Click to enter text.

C. Sewage Sludge or Biosolids Management

Provide information on the *intended* sewage sludge or biosolids management practice. Do not enter every management practice that you want authorized in the permit, as the

permit will authorize all sewage sludge or biosolids management practices listed in the instructions. Rather indicate the management practice the facility plans to use.

Biosolids Management

Management Practice	Handler or Preparer Type	Bulk or Bag Container	Amount (dry metric tons)	Pathogen Reduction Options	Vector Attraction Reduction Option
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.
Choose an item.	Choose an item.	Choose an item.		Choose an item.	Choose an item.

If "Other" is selected for Management Practice, please explain (e.g. monofill or transport to another WWTP): Click to enter text.

D. Disposal site

Disposal site name: Canyon Regional Water Authority – Wells Ranch Facility

TCEQ permit or registration number: 730125

County where disposal site is located: Guadalupe

E. Transportation method

Method of transportation (truck, train, pipe, other): Click to enter text.

Name of the hauler: Click to enter text.

Hauler registration number: Click to enter text.

Sludge is transported as a:

Liquid ☐ semi-liquid ☐ semi-solid ☐ solid ☐

Section 10. Permit Authorization for Sewage Sludge Disposal (Instructions Page 52)

A. Beneficial use authorization

Does the existing permit include authorization for land application of biosolids for beneficial use?

☒ Yes ☐ No

If yes, are you requesting to continue this authorization to land apply biosolids for beneficial use?

☒ Yes ☐ No

If yes, is the completed **Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)** attached to this permit application (see the instructions for details)?

☒ Yes ☐ No

B. Sludge processing authorization

Does the existing permit include authorization for any of the following sludge processing, storage or disposal options?

Sludge Composting	☐ Yes ☒ No
Marketing and Distribution of Biosolids	☐ Yes ☒ No
Sludge Surface Disposal or Sludge Monofill	☐ Yes ☒ No
Temporary storage in sludge lagoons	☐ Yes ☒ No

If yes to any of the above sludge options and the applicant is requesting to continue this authorization, is the completed **Domestic Wastewater Permit Application: Sewage Sludge Technical Report (TCEQ Form No. 10056)** attached to this permit application?

☐ Yes ☒ No

Section 11. Sewage Sludge Lagoons (Instructions Page 53)

Does this facility include sewage sludge lagoons?

☒ Yes ☐ No

If yes, complete the remainder of this section. If no, proceed to Section 12.

A. Location information

The following maps are required to be submitted as part of the application. For each map, provide the Attachment Number.

- Original General Highway (County) Map:

  Attachment: 5 – Highway Map
- USDA Natural Resources Conservation Service Soil Map:

  Attachment: 6 – Soil Map
- Federal Emergency Management Map:

  Attachment: 7 – FEMA Map
- Site map:

  Attachment: 8 – Pond Diagram

Discuss in a description if any of the following exist within the lagoon area. Check all that apply.

☐ Overlap a designated 100-year frequency flood plain

☐ Soils with flooding classification

☐ Overlap an unstable area

☐ Wetlands

☐ Located less than 60 meters from a fault

☒ None of the above

Attachment: Click to enter text.

If a portion of the lagoon(s) is located within the 100-year frequency flood plain, provide the protective measures to be utilized including type and size of protective structures:

Click to enter text.

B. Temporary storage information

Provide the results for the pollutant screening of sludge lagoons. These results are in addition to pollutant results in *Section 7 of Technical Report 1.0.*

Nitrate Nitrogen, mg/kg: Click to enter text.

Total Kjeldahl Nitrogen, mg/kg: Click to enter text.

Total Nitrogen (=nitrate nitrogen + TKN), mg/kg: Click to enter text.

Phosphorus, mg/kg: Click to enter text.

Potassium, mg/kg: Click to enter text.

pH, standard units: Click to enter text.

Ammonia Nitrogen mg/kg: Click to enter text.

Arsenic: Click to enter text.

Cadmium: Click to enter text.

Chromium: Click to enter text.

Copper: Click to enter text.

Lead: Click to enter text.

Mercury: Click to enter text.

Molybdenum: Click to enter text.

Nickel: Click to enter text.

Selenium: Click to enter text.

Zinc: Click to enter text.

Total PCBs: Click to enter text.

Provide the following information:

Volume and frequency of sludge to the lagoon(s): Click to enter text.

Total dry tons stored in the lagoons(s) per 365-day period: Click to enter text.

Total dry tons stored in the lagoons(s) over the life of the unit: Click to enter text.

C. Liner information

Does the active/proposed sludge lagoon(s) have a liner with a maximum hydraulic conductivity of $1x10^{-7}$ cm/sec?

☒ Yes ☐ No

If yes, describe the liner below. Please note that a liner is required.

Liner is made of natural materials found on site

D. Site development plan

Provide a detailed description of the methods used to deposit sludge in the lagoon(s):

Sludge deposited in the lagoon as a liquid with high solids content. This is accomplished by opening a valve at the bottom of the plate separator and/or the raw water tank via an existing pipe to the lagoon.

Attach the following documents to the application.

- Plan view and cross-section of the sludge lagoon(s)

  Attachment: 8 – Pond Diagram
- Copy of the closure plan

  Attachment: Click to enter text.
- Copy of deed recordation for the site

  Attachment: Click to enter text.
- Size of the sludge lagoon(s) in surface acres and capacity in cubic feet and gallons

  Attachment: 8 – Pond Diagram
- Description of the method of controlling infiltration of groundwater and surface water from entering the site

  Attachment: Click to enter text.
- Procedures to prevent the occurrence of nuisance conditions

  Attachment: Click to enter text.

E. Groundwater monitoring

Is groundwater monitoring currently conducted at this site, or are any wells available for groundwater monitoring, or are groundwater monitoring data otherwise available for the sludge lagoon(s)?

☐ Yes ☒ No

If groundwater monitoring data are available, provide a copy. Provide a profile of soil types encountered down to the groundwater table and the depth to the shallowest groundwater as a separate attachment.

Attachment: Click to enter text.

Section 12. Authorizations/Compliance/Enforcement (Instructions Page 54)

A. Additional authorizations

Does the permittee have additional authorizations for this facility, such as reuse authorization, sludge permit, etc?

☒ Yes ☐ No

If yes, provide the TCEQ authorization number and description of the authorization:

TCEQ Registration No. 730125

B. Permittee enforcement status

Is the permittee currently under enforcement for this facility?

☐ Yes ☒ No

Is the permittee required to meet an implementation schedule for compliance or enforcement?

☐ Yes ☒ No

If yes to either question, provide a brief summary of the enforcement, the implementation schedule, and the current status:

Click to enter text.

Section 13. RCRA/CERCLA Wastes (Instructions Page 55)

A. RCRA hazardous wastes

Has the facility received in the past three years, does it currently receive, or will it receive RCRA hazardous waste?

☐ Yes ☒ No

B. Remediation activity wastewater

Has the facility received in the past three years, does it currently receive, or will it receive CERCLA wastewater, RCRA remediation/corrective action wastewater or other remediation activity wastewater?

☐ Yes ☒ No

C. Details about wastes received

If yes to either Subsection A or B above, provide detailed information concerning these wastes with the application.

Attachment: Click to enter text.

Section 14. Laboratory Accreditation (Instructions Page 55)

All laboratory tests performed must meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification*, which includes the following general exemptions from National Environmental Laboratory Accreditation Program (NELAP) certification requirements:

- The laboratory is an in-house laboratory and is:
  - periodically inspected by the TCEQ; or
  - located in another state and is accredited or inspected by that state; or
  - performing work for another company with a unit located in the same site; or
  - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

The applicant should review 30 TAC Chapter 25 for specific requirements.

The following certification statement shall be signed and submitted with every application. See the Signature Page section in the Instructions, for a list of designated representatives who may sign the certification.

CERTIFICATION:

I certify that all laboratory tests submitted with this application meet the requirements of *30 TAC Chapter 25, Environmental Testing Laboratory Accreditation and Certification.*

Printed Name: Kerry Averyt, P.E.

Title: General Manager

Signature: _____

Date: _____

DOMESTIC WASTEWATER PERMIT APPLICATION TECHNICAL REPORT 1.1

The following information is required for new and amendment major applications.

Section 1. Justification for Permit (Instructions Page 56)

A. Justification of permit need

Provide a detailed discussion regarding the need for any phase(s) not currently permitted. Failure to provide sufficient justification may result in the Executive Director recommending denial of the proposed phase(s) or permit.

Click to enter text.

B. Regionalization of facilities

For additional guidance, please review TCEQ's Regionalization Policy for Wastewater Treatment[1].

Provide the following information concerning the potential for regionalization of domestic wastewater treatment facilities:

1. Municipally incorporated areas

If the applicant is a city, then Item 1 is not applicable. Proceed to Item 2 Utility CCN areas.

Is any portion of the proposed service area located in an incorporated city?

☐ Yes ☐ No ☐ Not Applicable

If yes, within the city limits of: Click to enter text.

If yes, attach correspondence from the city.

Attachment: Click to enter text.

If consent to provide service is available from the city, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the city versus the cost of the proposed facility or expansion attached.

Attachment: Click to enter text.

2. Utility CCN areas

Is any portion of the proposed service area located inside another utility's CCN area?

☐ Yes ☐ No

[1] https://www.tceq.texas.gov/permitting/wastewater/tceq-regionalization-for-wastewater

If yes, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the CCN facilities versus the cost of the proposed facility or expansion.

Attachment: Click to enter text.

3. Nearby WWTPs or collection systems

Are there any domestic permitted wastewater treatment facilities or collection systems located within a three-mile radius of the proposed facility?

☐ Yes ☐ No

If yes, attach a list of these facilities and collection systems that includes each permittee's name and permit number, and an area map showing the location of these facilities and collection systems.

Attachment: Click to enter text.

If yes, attach proof of mailing a request for service to each facility and collection system, the letters requesting service, and correspondence from each facility and collection system.

Attachment: Click to enter text.

If the facility or collection system agrees to provide service, attach a justification for the proposed facility and a cost analysis of expenditures that includes the cost of connecting to the facility or collection system versus the cost of the proposed facility or expansion.

Attachment: Click to enter text.

Section 2. Proposed Organic Loading (Instructions Page 58)

Is this facility in operation?

☐ Yes ☐ No

If no, proceed to Item B, Proposed Organic Loading.

If yes, provide organic loading information in Item A, Current Organic Loading

A. Current organic loading

Facility Design Flow (flow being requested in application): Click to enter text.

Average Influent Organic Strength or BOD_5 Concentration in mg/l: Click to enter text.

Average Influent Loading (lbs/day = total average flow X average BOD_5 conc. X 8.34): Click to enter text.

Provide the source of the average organic strength or BOD_5 concentration.

Click to enter text.

B. Proposed organic loading

This table must be completed if this application is for a facility that is not in operation or if this application is to request an increased flow that will impact organic loading.

Table 1.1(1) – Design Organic Loading

Source	Total Average Flow (MGD)	Influent BOD5 Concentration (mg/l)
Municipality		
Subdivision		
Trailer park – transient		
Mobile home park		
School with cafeteria and showers		
School with cafeteria, no showers		
Recreational park, overnight use		
Recreational park, day use		
Office building or factory		
Motel		
Restaurant		
Hospital		
Nursing home		
Other		
TOTAL FLOW from all sources		
AVERAGE BOD_5 from all sources		

Section 3. Proposed Effluent Quality and Disinfection (Instructions Page 58)

A. Existing/Interim I Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: Click to enter text.

Total Suspended Solids, mg/l: Click to enter text.

Ammonia Nitrogen, mg/l: Click to enter text.

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: Click to enter text.

Other: Click to enter text.

B. Interim II Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: Click to enter text.

Total Suspended Solids, mg/l: Click to enter text.

Ammonia Nitrogen, mg/l: Click to enter text.

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: Click to enter text.

Other: Click to enter text.

C. Final Phase Design Effluent Quality

Biochemical Oxygen Demand (5-day), mg/l: Click to enter text.

Total Suspended Solids, mg/l: Click to enter text.

Ammonia Nitrogen, mg/l: Click to enter text.

Total Phosphorus, mg/l: Click to enter text.

Dissolved Oxygen, mg/l: Click to enter text.

Other: Click to enter text.

D. Disinfection Method

Identify the proposed method of disinfection.

☐ Chlorine: Click to enter text. mg/l after Click to enter text. minutes detention time at peak flow

Dechlorination process: Click to enter text.

☐ Ultraviolet Light: Click to enter text. seconds contact time at peak flow

☐ Other: Click to enter text.

Section 4. Design Calculations (Instructions Page 58)

Attach design calculations and plant features for each proposed phase. Example 4 of the instructions includes sample design calculations and plant features.

Attachment: Click to enter text.

Section 5. Facility Site (Instructions Page 59)

A. 100-year floodplain

Will the proposed facilities be located above the 100-year frequency flood level?

☐ Yes ☐ No

If no, describe measures used to protect the facility during a flood event. Include a site map showing the location of the treatment plant within the 100-year frequency flood level. If applicable, provide the size and types of protective structures.

Click to enter text.

Provide the source(s) used to determine 100-year frequency flood plain.

Click to enter text.

For a new or expansion of a facility, will a wetland or part of a wetland be filled?

☐ Yes ☐ No

If yes, has the applicant applied for a US Corps of Engineers 404 Dredge and Fill Permit?

☐ Yes ☐ No

If yes, provide the permit number: Click to enter text.

If no, provide the approximate date you anticipate submitting your application to the Corps: Click to enter text.

B. Wind rose

Attach a wind rose: Click to enter text.

Section 6. Permit Authorization for Sewage Sludge Disposal (Instructions Page 59)

A. Beneficial use authorization

Are you requesting to include authorization to land apply sewage sludge for beneficial use on property located adjacent to the wastewater treatment facility under the wastewater permit?

☐ Yes ☐ No

If yes, attach the completed **Application for Permit for Beneficial Land Use of Sewage Sludge (TCEQ Form No. 10451)**: Click to enter text.

B. Sludge processing authorization

Identify the sludge processing, storage or disposal options that will be conducted at the wastewater treatment facility:

☐ Sludge Composting

☐ Marketing and Distribution of sludge

☐ Sludge Surface Disposal or Sludge Monofill

If any of the above, sludge options are selected, attach the completed **Domestic Wastewater Permit Application: Sewage Sludge Technical Report (TCEQ Form No. 10056)**: Click to enter text.

Section 7. Sewage Sludge Solids Management Plan (Instructions Page 60)

Attach a solids management plan to the application.

Attachment: Click to enter text.

The sewage sludge solids management plan must contain the following information:

- Treatment units and processes dimensions and capacities

- Solids generated at 100, 75, 50, and 25 percent of design flow
- Mixed liquor suspended solids operating range at design and projected actual flow
- Quantity of solids to be removed and a schedule for solids removal
- Identification and ownership of the ultimate sludge disposal site
- For facultative lagoons, design life calculations, monitoring well locations and depths, and the ultimate disposal method for the sludge from the facultative lagoon

An example of a sewage sludge solids management plan has been included as Example 5 of the instructions.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 2.0: RECEIVING WATERS

The following information is required for all TPDES permit applications.

Section 1. Domestic Drinking Water Supply (Instructions Page 63)

Is there a surface water intake for domestic drinking water supply located within 5 miles downstream from the point or proposed point of discharge?

☐ Yes ☒ No

If **no**, proceed it Section 2. **If yes**, provide the following:

Owner of the drinking water supply: Click to enter text.

Distance and direction to the intake: Click to enter text.

Attach a USGS map that identifies the location of the intake.

Attachment: Click to enter text.

Section 2. Discharge into Tidally Affected Waters (Instructions Page 63)

Does the facility discharge into tidally affected waters?

☐ Yes ☒ No

If **no**, proceed to Section 3. **If yes**, complete the remainder of this section. If no, proceed to Section 3.

A. Receiving water outfall

Width of the receiving water at the outfall, in feet: Click to enter text.

B. Oyster waters

Are there oyster waters in the vicinity of the discharge?

☐ Yes ☒ No

If yes, provide the distance and direction from outfall(s).

Click to enter text.

C. Sea grasses

Are there any sea grasses within the vicinity of the point of discharge?

☐ Yes ☒ No

If yes, provide the distance and direction from the outfall(s).

Click to enter text.

Section 3. Classified Segments (Instructions Page 63)

Is the discharge directly into (or within 300 feet of) a classified segment?

☐ Yes ☒ No

If yes, this Worksheet is complete.

If no, complete Sections 4 and 5 of this Worksheet.

Section 4. Description of Immediate Receiving Waters (Instructions Page 63)

Name of the immediate receiving waters: Unnamed tributary of Sandies Creek

A. Receiving water type

Identify the appropriate description of the receiving waters.

☒ Stream

☐ Freshwater Swamp or Marsh

☐ Lake or Pond

Surface area, in acres: Click to enter text.

Average depth of the entire water body, in feet: Click to enter text.

Average depth of water body within a 500-foot radius of discharge point, in feet: Click to enter text.

☐ Man-made Channel or Ditch

☐ Open Bay

☐ Tidal Stream, Bayou, or Marsh

☐ Other, specify: Click to enter text.

B. Flow characteristics

If a stream, man-made channel or ditch was checked above, provide the following. For existing discharges, check one of the following that best characterizes the area *upstream* of the discharge. For new discharges, characterize the area *downstream* of the discharge (check one).

☒ Intermittent - dry for at least one week during most years

☐ Intermittent with Perennial Pools - enduring pools with sufficient habitat to maintain significant aquatic life uses

☐ Perennial - normally flowing

Check the method used to characterize the area upstream (or downstream for new dischargers).

☐ USGS flow records

☐ Historical observation by adjacent landowners

☒ Personal observation

☐ Other, specify: Click to enter text.

C. Downstream perennial confluences

List the names of all perennial streams that join the receiving water within three miles downstream of the discharge point.

Sandies Creek

D. Downstream characteristics

Do the receiving water characteristics change within three miles downstream of the discharge (e.g., natural or man-made dams, ponds, reservoirs, etc.)?

☐ Yes ☒ No

If yes, discuss how.

Click to enter text.

E. Normal dry weather characteristics

Provide general observations of the water body during normal dry weather conditions.

Typical seasonal creek

Date and time of observation: 03/24/2025

Was the water body influenced by stormwater runoff during observations?

☐ Yes ☒ No

Section 5. General Characteristics of the Waterbody (Instructions Page 65)

A. Upstream influences

Is the immediate receiving water upstream of the discharge or proposed discharge site influenced by any of the following? Check all that apply.

☐ Oil field activities
☐ Urban runoff
☐ Upstream discharges
☐ Agricultural runoff
☒ Septic tanks
☐ Other(s), specify: Click to enter text.

B. Waterbody uses

Observed or evidences of the following uses. Check all that apply.

- ☐ Livestock watering
- ☐ Irrigation withdrawal
- ☐ Fishing
- ☐ Domestic water supply
- ☐ Park activities
- ☐ Contact recreation
- ☐ Non-contact recreation
- ☐ Navigation
- ☐ Industrial water supply
- ☐ Other(s), specify: Click to enter text.

C. Waterbody aesthetics

Check one of the following that best describes the aesthetics of the receiving water and the surrounding area.

- ☐ Wilderness: outstanding natural beauty; usually wooded or unpastured area; water clarity exceptional
- ☒ Natural Area: trees and/or native vegetation; some development evident (from fields, pastures, dwellings); water clarity discolored
- ☐ Common Setting: not offensive; developed but uncluttered; water may be colored or turbid
- ☐ Offensive: stream does not enhance aesthetics; cluttered; highly developed; dumping areas; water discolored

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 2.1: STREAM PHYSICAL CHARACTERISTICS

Required for new applications, major facilities, and applications adding an outfall.

Worksheet 2.1 is not required for discharges to intermittent streams or discharges directly to (or within 300 feet of) a classified segment.

Section 1. General Information (Instructions Page 65)

Date of study: Click to enter text. Time of study: Click to enter text.

Stream name: Click to enter text.

Location: Click to enter text.

Type of stream upstream of existing discharge or downstream of proposed discharge (check one).

☐ Perennial ☐ Intermittent with perennial pools

Section 2. Data Collection (Instructions Page 65)

Number of stream bends that are well defined: Click to enter text.

Number of stream bends that are moderately defined: Click to enter text.

Number of stream bends that are poorly defined: Click to enter text.

Number of riffles: Click to enter text.

Evidence of flow fluctuations (check one):

☐ Minor ☐ moderate ☐ severe

Indicate the observed stream uses and if there is evidence of flow fluctuations or channel obstruction/modification.

Click to enter text.

Stream transects

In the table below, provide the following information for each transect downstream of the existing or proposed discharges. Use a separate row for each transect.

Table 2.1(1) - Stream Transect Records

Stream type at transect Select riffle, run, glide, or pool. See Instructions, Definitions section.	**Transect location**	**Water surface width (ft)**	**Stream depths (ft)** at 4 to 10 points along each transect from the channel bed to the water surface. Separate the measurements with commas.
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			
Choose an item.			

Section 3. Summarize Measurements (Instructions Page 65)

Streambed slope of entire reach, from USGS map in feet/feet: Click to enter text.

Approximate drainage area above the most downstream transect (from USGS map or county highway map, in square miles): Click to enter text.

Length of stream evaluated, in feet: Click to enter text.

Number of lateral transects made: Click to enter text.

Average stream width, in feet: Click to enter text.

Average stream depth, in feet: Click to enter text.

Average stream velocity, in feet/second: Click to enter text.

Instantaneous stream flow, in cubic feet/second: Click to enter text.

Indicate flow measurement method (type of meter, floating chip timed over a fixed distance, etc.): Click to enter text.

Size of pools (large, small, moderate, none): Click to enter text.

Maximum pool depth, in feet: Click to enter text.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.0: LAND DISPOSAL OF EFFLUENT

The following is required for renewal, new, and amendment permit applications.

Section 1. Type of Disposal System (Instructions Page 67)

Identify the method of land disposal:

☒ Surface application
☐ Subsurface application
☐ Irrigation
☐ Subsurface soils absorption
☐ Drip irrigation system
☐ Subsurface area drip dispersal system
☒ Evaporation
☐ Evapotranspiration beds
☐ Other (describe in detail): Click to enter text.

NOTE: All applicants without authorization or proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0.

For existing authorizations, provide Registration Number: Click to enter text.

Section 2. Land Application Site(s) (Instructions Page 67)

In table 3.0(1), provide the requested information for the land application sites. Include the agricultural or cover crop type (wheat, cotton, alfalfa, bermuda grass, native grasses, etc.), land use (golf course, hayland, pastureland, park, row crop, etc.), irrigation area, amount of effluent applied, and whether or not the public has access to the area. Specify the amount of land area and the amount of effluent that will be allotted to each agricultural or cover crop, if more than one crop will be used.

Table 3.0(1) – Land Application Site Crops

Crop Type & Land Use	Irrigation Area (acres)	Effluent Application (GPD)	Public Access? Y/N
Native grasses	31	<=0.1 MGD	N

Section 3. Storage and Evaporation Lagoons/Ponds (Instructions Page 67)

Table 3.0(2) – Storage and Evaporation Ponds

Pond Number	Surface Area (acres)	Storage Volume (acre-feet)	Dimensions	Liner Type
1	0.56	4.5	190’ x 129’ x 8’	Clay/Sand
2	0.44	3.55	150’ x 129’ x 8’	Clay/Sand

Attach a copy of a liner certification that was prepared, signed, and sealed by a Texas licensed professional engineer for each pond.

Attachment: Click to enter text.

Section 4. Flood and Runoff Protection (Instructions Page 67)

Is the land application site within the 100-year frequency flood level?

☐ Yes ☒ No

If yes, describe how the site will be protected from inundation.

Click to enter text.

Provide the source used to determine the 100-year frequency flood level:

Attachment: 7 – FEMA Map

Provide a description of tailwater controls and rainfall run-on controls used for the land application site.

The plant will not land apply during or directly after rain events.

Section 5. Annual Cropping Plan (Instructions Page 67)

Attach an Annual Cropping Plan which includes a discussion of each of the following items. If not applicable, provide a detailed explanation indicating why. **Attachment**: 12 – Cropping Plan

- Soils map with crops
- Cool and warm season plant species
- Crop yield goals
- Crop growing season
- Crop nutrient requirements
- Additional fertilizer requirements
- Minimum/maximum harvest height (for grass crops)
- Supplemental watering requirements
- Crop salt tolerances
- Harvesting method/number of harvests
- Justification for not removing existing vegetation to be irrigated

Section 6. Well and Map Information (Instructions Page 68)

Attach a USGS map with the following information shown and labeled. If not applicable, provide a detailed explanation indicating why. **Attachment**: 2 – USGS Map, 4- Site Drawing

- The boundaries of the land application site(s)
- Waste disposal or treatment facility site(s)
- On-site buildings
- Buffer zones
- Effluent storage and tailwater control facilities
- All water wells within 1-mile radius of the disposal site or property boundaries
- All springs and seeps onsite and within 500 feet of the property boundaries
- All surface waters in the state onsite and within 500 feet of the property boundaries
- All faults and sinkholes onsite and within 500 feet of the property

List and cross reference all water wells located within a half-mile radius of the disposal site or property boundaries shown on the USGS map in the following table. Attach additional pages as necessary to include all of the wells.

Table 3.0(3) – Water Well Data

Well ID	Well Use	Producing? Y/N	Open, cased, capped, or plugged?	Proposed Best Management Practice
			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	
			Choose an item.	

If water quality data or well log information is available please include the information in an attachment listed by Well ID.

Attachment: Click to enter text.

Section 7. Groundwater Quality (Instructions Page 68)

Attach a Groundwater Quality Technical Report which assesses the impact of the wastewater disposal system on groundwater. This report shall include an evaluation of the water wells (including the information in the well table provided in Item 6. above), the wastewater application rate, and pond liners. Indicate by a check mark that this report is provided.

Attachment: Click to enter text.

Are groundwater monitoring wells available onsite? ☐ Yes ☒ No

Do you plan to install ground water monitoring wells or lysimeters around the land application site? ☐ Yes ☒ No

If yes, provide the proposed location of the monitoring wells or lysimeters on a site map.

Attachment: Click to enter text.

Section 8. Soil Map and Soil Analyses (Instructions Page 69)

A. Soil map

Attach a USDA Soil Survey map that shows the area to be used for effluent disposal.

Attachment: 6 – Soil Map

B. Soil analyses

Attach the laboratory results sheets from the soil analyses. **Note**: for renewal applications, the current annual soil analyses required by the permit are acceptable as long as the test date is less than one year prior to the submission of the application.

Attachment: 13 – Soil Analyses

List all USDA designated soil series on the proposed land application site. Attach additional pages as necessary.

Table 3.0(4) – Soil Data

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number
Patilo	0-84”	Moderately	0.20 - 0.57 in/hr	
Arenosa	0-96”	Excessively	5.95 – 19.98 in/hr	

Soil Series	Depth from Surface	Permeability	Available Water Capacity	Curve Number

Section 9. Effluent Monitoring Data (Instructions Page 70)

Is the facility in operation?

☒ Yes ☐ No

If no, this section is not applicable and the worksheet is complete.

If yes, provide the effluent monitoring data for the parameters regulated in the existing permit. If a parameter is not regulated in the existing permit, enter N/A.

Table 3.0(5) – Effluent Monitoring Data

Date	30 Day Avg Flow MGD	BOD5 mg/l	TSS mg/l	pH	Chlorine Residual mg/l	Acres irrigated
March, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
April, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
May, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
June, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
July, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
August, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
September, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
October, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
November, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000

Date	30 Day Avg Flow MGD	BOD5 mg/l	TSS mg/l	pH	Chlorine Residual mg/l	Acres irrigated
December, 2023	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
January, 2024	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
February, 2024	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
March, 2024	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
April, 2024	Failed to Sample	N/A	Failed to Sample	Failed to Sample	N/A	0.000
May, 2024	0.008	N/A	1.18	8.15	N/A	0.000
June, 2024	0.027	N/A	11.49	8.11	N/A	0.000
July, 2024	0.003	N/A	0.02	8.13	N/A	0.000
August, 2024	0.032	N/A	0.6	7.90	N/A	0.000
September, 2024	0.032	N/A	0.57	7.95	N/A	0.000
October, 2024	0.038	N/A	1.03	8.63	N/A	0.000
November, 2024	0.032	N/A	4.32	8.43	N/A	0.000
December, 2024	0.025	N/A	2.02	8.34	N/A	0.000
January, 2025	0.028	N/A	3.27	8.39	N/A	0.000
February, 2025	0.022	N/A	0.75	8.01	N/A	0.000
March, 2025	0.045	N/A	3.34	8.22	N/A	0.000

Provide a discussion of all persistent excursions above the permitted limits and any corrective actions taken.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.1: SURFACE LAND DISPOSAL OF EFFLUENT

The following is required for new and major amendment permit applications. Renewal and minor amendment permit applications may be asked for this worksheet on a case by case basis.

Section 1. Surface Disposal (Instructions Page 71)

Complete the item that applies for the method of disposal being used.

A. Irrigation

Area under irrigation, in acres: Click to enter text.

Design application frequency:

hours/day Click to enter text. **And** days/week Click to enter text.

Land grade (slope):

average percent (%): Click to enter text.

maximum percent (%): Click to enter text.

Design application rate in acre-feet/acre/year: Click to enter text.

Design total nitrogen loading rate, in lbs N/acre/year: Click to enter text.

Soil conductivity (mmhos/cm): Click to enter text.

Method of application: Click to enter text.

Attach a separate engineering report with the water balance and storage volume calculations, method of application, irrigation efficiency, and nitrogen balance.

Attachment: Click to enter text.

B. Evaporation ponds

Daily average effluent flow into ponds, in gallons per day: Click to enter text.

Attach a separate engineering report with the water balance and storage volume calculations.

Attachment: Click to enter text.

C. Evapotranspiration beds

Number of beds: Click to enter text.

Area of bed(s), in acres: Click to enter text.

Depth of bed(s), in feet: Click to enter text.

Void ratio of soil in the beds: Click to enter text.

Storage volume within the beds, in acre-feet: Click to enter text.

Attach a separate engineering report with the water balance and storage volume calculations, and a description of the lining.

Attachment: Click to enter text.

D. Overland flow

Area used for application, in acres: Click to enter text.

Slopes for application area, percent (%): Click to enter text.

Design application rate, in gpm/foot of slope width: Click to enter text.

Slope length, in feet: Click to enter text.

Design BOD_5 loading rate, in lbs BOD_5/acre/day: Click to enter text.

Design application frequency:

hours/day: Click to enter text. **And** days/week: Click to enter text.

Attach a separate engineering report with the method of application and design requirements according to *30 TAC Chapter 217*.

Attachment: Click to enter text.

Section 2. Edwards Aquifer (Instructions Page 72)

Is the facility subject to *30 TAC Chapter 213*, Edwards Aquifer Rules?

☐ Yes ☐ No

If **yes**, is the facility located on the Edwards Aquifer Recharge Zone?

☐ Yes ☐ No

If yes, attach a geological report addressing potential recharge features.

Attachment: Click to enter text.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.2: SURFACE LAND DISPOSAL OF EFFLUENT

The following **is required** for **new and major amendment** permit applications. Renewal and minor amendments applicants may be asked for the worksheet on a case by case basis.

NOTE: All applicants proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that **does not meet** the definition of a subsurface area drip dispersal system as defined in *30 TAC Chapter 222, Subsurface Area Drip Dispersal System.*

Section 1. Subsurface Application (Instructions Page 73)

Identify the type of system:

- ☐ Conventional Gravity Drainfield, Beds, or Trenches (new systems must be less than 5,000 GPD)
- ☐ Low Pressure Dosing
- ☐ Other, specify: Click to enter text.

Application area, in acres: Click to enter text.

Area of drainfield, in square feet: Click to enter text.

Application rate, in gal/square foot/day: Click to enter text.

Depth to groundwater, in feet: Click to enter text.

Area of trench, in square feet: Click to enter text.

Dosing duration per area, in hours: Click to enter text.

Number of beds: Click to enter text.

Dosing amount per area, in inches/day: Click to enter text.

Infiltration rate, in inches/hour: Click to enter text.

Storage volume, in gallons: Click to enter text.

Area of bed(s), in square feet: Click to enter text.

Soil Classification: Click to enter text.

Attach a separate engineering report with the information required in *30 TAC § 309.20,* excluding the requirements of *§* 309.20 b(3)(A) and (B) design analysis which may be asked for on a case by case basis. Include a description of the schedule of dosing basin rotation.

Attachment: Click to enter text.

Section 2. Edwards Aquifer (Instructions Page 73)

Is the subsurface system over the Edwards Aquifer Recharge Zone as mapped by TCEQ?

☐ Yes ☐ No

Is the subsurface system over the Edwards Aquifer Transition Zone as mapped by TCEQ?

☐ Yes ☐ No

If yes to either question, the subsurface system may be prohibited by *30 TAC §213.8*. Please call the Municipal Permits Team, at 512-239-4671, to schedule a pre-application meeting.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 3.3: SUBSURFACE AREA DRIP DISPERSAL (SADDS) LAND DISPOSAL OF EFFLUENT

The following **is required** for **new and major amendment** subsurface area drip dispersal system permit applications. Renewal and minor amendments applicants may be asked for the worksheet on a case by case basis.

NOTE: All applicants proposing new/amended subsurface disposal MUST complete and submit Worksheet 7.0. This worksheet applies to any subsurface disposal system that **meets** the definition of a subsurface area drip dispersal system as defined in *30 TAC Chapter 222, Subsurface Area Drip Dispersal System.*

Section 1. Administrative Information (Instructions Page 74)

A. Provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the treatment facility:

B. Click to enter text. Is the owner of the land where the treatment facility is located the same as the owner of the treatment facility?

☐ Yes ☐ No

If **no**, provide the legal name of all corporations or other business entities managed, owned, or otherwise closely related to the owner of the land where the treatment facility is located.

Click to enter text.

C. Owner of the subsurface area drip dispersal system: Click to enter text.

D. Is the owner of the subsurface area drip dispersal system the same as the owner of the wastewater treatment facility or the site where the wastewater treatment facility is located?

☐ Yes ☐ No

If **no**, identify the names of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in Item 1.C.

Click to enter text.

E. Owner of the land where the subsurface area drip dispersal system is located: Click to enter text.

F. Is the owner of the land where the subsurface area drip dispersal system is located the same as owner of the wastewater treatment facility, the site where the wastewater treatment facility is located, or the owner of the subsurface area drip dispersal system?

☐ Yes ☐ No

If **no**, identify the name of all corporations or other business entities managed, owned, or otherwise closely related to the entity identified in item 1.E.

Click to enter text.

Section 2. Subsurface Area Drip Dispersal System (Instructions Page 74)

A. Type of system

☐ Subsurface Drip Irrigation

☐ Surface Drip Irrigation

☐ Other, specify: Click to enter text.

B. Irrigation operations

Application area, in acres: Click to enter text.

Infiltration Rate, in inches/hour: Click to enter text.

Average slope of the application area, percent (%): Click to enter text.

Maximum slope of the application area, percent (%): Click to enter text.

Storage volume, in gallons: Click to enter text.

Major soil series: Click to enter text.

Depth to groundwater, in feet: Click to enter text.

C. Application rate

Is the facility located **west** of the boundary shown in *30 TAC § 222.83* **and** also using a vegetative cover of non-native grasses over seeded with cool season grasses during the winter months (October-March)?

☐ Yes ☐ No

If yes, then the facility may propose a hydraulic application rate not to exceed 0.1 gal/square foot/day.

Is the facility located **east** of the boundary shown in *30 TAC § 222.83* **or** in any part of the state when the vegetative cover is any crop other than non-native grasses?

☐ Yes ☐ No

If **yes**, the facility must use the formula in *30 TAC §222.83* to calculate the maximum hydraulic application rate.

Do you plan to submit an alternative method to calculate the hydraulic application rate for approval by the executive director?

☐ Yes ☐ No

Hydraulic application rate, in gal/square foot/day: Click to enter text.

Nitrogen application rate, in lbs/gal/day: Click to enter text.

D. Dosing information

Number of doses per day: Click to enter text.

Dosing duration per area, in hours: Click to enter text.

Rest period between doses, in hours: Click to enter text.

Dosing amount per area, in inches/day: Click to enter text.

Number of zones: Click to enter text.

Does the proposed subsurface drip irrigation system use tree vegetative cover as a crop?

☐ Yes ☐ No

If **yes**, provide a vegetation survey by a certified arborist. Please call the Water Quality Assessment Team at (512) 239-4671 to schedule a pre-application meeting.

Attachment: Click to enter text.

Section 3. Required Plans (Instructions Page 74)

A. Recharge feature plan

Attach a Recharge Feature Plan with all information required in *30 TAC §222.79*.

Attachment: Click to enter text.

B. Soil evaluation

Attach a Soil Evaluation with all information required in *30 TAC §222.73*.

Attachment: Click to enter text.

C. Site preparation plan

Attach a Site Preparation Plan with all information required in *30 TAC §222.75*.

Attachment: Click to enter text.

D. Soil sampling/testing

Attach soil sampling and testing that includes all information required in *30 TAC §222.157*.

Attachment: Click to enter text.

Section 4. Floodway Designation (Instructions Page 75)

A. Site location

Is the existing/proposed land application site within a designated floodway?

☐ Yes ☐ No

B. Flood map

Attach either the FEMA flood map or alternate information used to determine the floodway.

Attachment: Click to enter text.

Section 5. Surface Waters in the State (Instructions Page 75)

A. Buffer Map

Attach a map showing appropriate buffers on surface waters in the state, water wells, and springs/seeps.

Attachment: Click to enter text.

B. Buffer variance request

Do you plan to request a buffer variance from water wells or waters in the state?

☐ Yes ☐ No

If yes, then attach the additional information required in *30 TAC § 222.81(c).*

Attachment: Click to enter text.

Section 6. Edwards Aquifer (Instructions Page 75)

A. Is the SADDS located over the Edwards Aquifer Recharge Zone as mapped by TCEQ?

☐ Yes ☐ No

B. Is the SADDS located over the Edwards Aquifer Transition Zone as mapped by TCEQ?

☐ Yes ☐ No

If yes to either question, then the SADDS may be prohibited by *30 TAC §213.8*. Please call the Municipal Permits Team at 512-239-4671 to schedule a pre-application meeting.

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 4.0: POLLUTANT ANALYSIS REQUIREMENTS

The following **is required** for facilities with a permitted or proposed flow of **1.0 MGD or greater**, facilities with an approved **pretreatment** program, or facilities classified as a **major** facility. See instructions for further details.

This worksheet is not required minor amendments without renewal.

Section 1. Toxic Pollutants (Instructions Page 76)

For pollutants identified in Table 4.0(1), indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: Click to enter text.

Table 4.0(1) – Toxics Analysis

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrylonitrile				50
Aldrin				0.01
Aluminum				2.5
Anthracene				10
Antimony				5
Arsenic				0.5
Barium				3
Benzene				10
Benzidine				50
Benzo(a)anthracene				5
Benzo(a)pyrene				5
Bis(2-chloroethyl)ether				10
Bis(2-ethylhexyl)phthalate				10
Bromodichloromethane				10
Bromoform				10
Cadmium				1
Carbon Tetrachloride				2
Carbaryl				5
Chlordane*				0.2
Chlorobenzene				10
Chlorodibromomethane				10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Chloroform				10
Chlorpyrifos				0.05
Chromium (Total)				3
Chromium (Tri) **(*1)**				N/A
Chromium (Hex)				3
Copper				2
Chrysene				5
p-Chloro-m-Cresol				10
4,6-Dinitro-o-Cresol				50
p-Cresol				10
Cyanide **(*2)**				10
4,4'- DDD				0.1
4,4'- DDE				0.1
4,4'- DDT				0.02
2,4-D				0.7
Demeton (O and S)				0.20
Diazinon				0.5/0.1
1,2-Dibromoethane				10
m-Dichlorobenzene				10
o-Dichlorobenzene				10
p-Dichlorobenzene				10
3,3'-Dichlorobenzidine				5
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
Dichloromethane				20
1,2-Dichloropropane				10
1,3-Dichloropropene				10
Dicofol				1
Dieldrin				0.02
2,4-Dimethylphenol				10
Di-n-Butyl Phthalate				10
Diuron				0.09
Endosulfan I (alpha)				0.01

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Epichlorohydrin				---
Ethylbenzene				10
Ethylene Glycol				---
Fluoride				500
Guthion				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclohexane (alpha)				0.05
Hexachlorocyclohexane (beta)				0.05
gamma-Hexachlorocyclohexane (Lindane)				0.05
Hexachlorocyclopentadiene				10
Hexachloroethane				20
Hexachlorophene				10
4,4'-Isopropylidenediphenol				1
Lead				0.5
Malathion				0.1
Mercury				0.005
Methoxychlor				2
Methyl Ethyl Ketone				50
Methyl tert-butyl ether				---
Mirex				0.02
Nickel				2
Nitrate-Nitrogen				100
Nitrobenzene				10
N-Nitrosodiethylamine				20
N-Nitroso-di-n-Butylamine				20
Nonylphenol				333

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Parathion (ethyl)				0.1
Pentachlorobenzene				20
Pentachlorophenol				5
Phenanthrene				10
Polychlorinated Biphenyls (PCB's) **(*3)**				0.2
Pyridine				20
Selenium				5
Silver				0.5
1,2,4,5-Tetrachlorobenzene				20
1,1,2,2-Tetrachloroethane				10
Tetrachloroethylene				10
Thallium				0.5
Toluene				10
Toxaphene				0.3
2,4,5-TP (Silvex)				0.3
Tributyltin (see instructions for explanation)				0.01
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
2,4,5-Trichlorophenol				50
TTHM (Total Trihalomethanes)				10
Vinyl Chloride				10
Zinc				5

(*1) Determined by subtracting hexavalent Cr from total Cr.

(*2) Cyanide, amenable to chlorination or weak-acid dissociable.

(*3) The sum of seven PCB congeners 1242, 1254, 1221, 1232, 1248, 1260, and 1016.

Section 2. Priority Pollutants

For pollutants identified in Tables 4.0(2)A-E, indicate type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: Click to enter text.

Table 4.0(2)A – Metals, Cyanide, and Phenols

Pollutant	**AVG Effluent Conc. (µg/l)**	**MAX Effluent Conc. (µg/l)**	**Number of Samples**	**MAL (µg/l)**
Antimony				5
Arsenic				0.5
Beryllium				0.5
Cadmium				1
Chromium (Total)				3
Chromium (Hex)				3
Chromium (Tri) **(*1)**				N/A
Copper				2
Lead				0.5
Mercury				0.005
Nickel				2
Selenium				5
Silver				0.5
Thallium				0.5
Zinc				5
Cyanide **(*2)**				10
Phenols, Total				10

(*1) Determined by subtracting hexavalent Cr from total Cr.

(*2) Cyanide, amenable to chlorination or weak-acid dissociable

Table 4.0(2)B – Volatile Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acrolein				50
Acrylonitrile				50
Benzene				10
Bromoform				10
Carbon Tetrachloride				2
Chlorobenzene				10
Chlorodibromomethane				10
Chloroethane				50
2-Chloroethylvinyl Ether				10
Chloroform				10
Dichlorobromomethane [Bromodichloromethane]				10
1,1-Dichloroethane				10
1,2-Dichloroethane				10
1,1-Dichloroethylene				10
1,2-Dichloropropane				10
1,3-Dichloropropylene [1,3-Dichloropropene]				10
1,2-Trans-Dichloroethylene				10
Ethylbenzene				10
Methyl Bromide				50
Methyl Chloride				50
Methylene Chloride				20
1,1,2,2-Tetrachloroethane				10
Tetrachloroethylene				10
Toluene				10
1,1,1-Trichloroethane				10
1,1,2-Trichloroethane				10
Trichloroethylene				10
Vinyl Chloride				10

Table 4.0(2)C – Acid Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
2-Chlorophenol				10
2,4-Dichlorophenol				10
2,4-Dimethylphenol				10
4,6-Dinitro-o-Cresol				50
2,4-Dinitrophenol				50
2-Nitrophenol				20
4-Nitrophenol				50
P-Chloro-m-Cresol				10
Pentalchlorophenol				5
Phenol				10
2,4,6-Trichlorophenol				10

Table 4.0(2)D – Base/Neutral Compounds

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Acenaphthene				10
Acenaphthylene				10
Anthracene				10
Benzidine				50
Benzo(a)Anthracene				5
Benzo(a)Pyrene				5
3,4-Benzofluoranthene				10
Benzo(ghi)Perylene				20
Benzo(k)Fluoranthene				5
Bis(2-Chloroethoxy)Methane				10
Bis(2-Chloroethyl)Ether				10
Bis(2-Chloroisopropyl)Ether				10
Bis(2-Ethylhexyl)Phthalate				10
4-Bromophenyl Phenyl Ether				10
Butyl benzyl Phthalate				10
2-Chloronaphthalene				10
4-Chlorophenyl phenyl ether				10
Chrysene				5
Dibenzo(a,h)Anthracene				5
1,2-(o)Dichlorobenzene				10
1,3-(m)Dichlorobenzene				10
1,4-(p)Dichlorobenzene				10
3,3-Dichlorobenzidine				5
Diethyl Phthalate				10
Dimethyl Phthalate				10
Di-n-Butyl Phthalate				10
2,4-Dinitrotoluene				10
2,6-Dinitrotoluene				10
Di-n-Octyl Phthalate				10
1,2-Diphenylhydrazine (as Azo-benzene)				20
Fluoranthene				10

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Fluorene				10
Hexachlorobenzene				5
Hexachlorobutadiene				10
Hexachlorocyclo-pentadiene				10
Hexachloroethane				20
Indeno(1,2,3-cd)pyrene				5
Isophorone				10
Naphthalene				10
Nitrobenzene				10
N-Nitrosodimethylamine				50
N-Nitrosodi-n-Propylamine				20
N-Nitrosodiphenylamine				20
Phenanthrene				10
Pyrene				10
1,2,4-Trichlorobenzene				10

Table 4.0(2)E – Pesticides

Pollutant	AVG Effluent Conc. (µg/l)	MAX Effluent Conc. (µg/l)	Number of Samples	MAL (µg/l)
Aldrin				0.01
alpha-BHC (Hexachlorocyclohexane)				0.05
beta-BHC (Hexachlorocyclohexane)				0.05
gamma-BHC (Hexachlorocyclohexane)				0.05
delta-BHC (Hexachlorocyclohexane)				0.05
Chlordane				0.2
4,4-DDT				0.02
4,4-DDE				0.1
4,4,-DDD				0.1
Dieldrin				0.02
Endosulfan I (alpha)				0.01
Endosulfan II (beta)				0.02
Endosulfan Sulfate				0.1
Endrin				0.02
Endrin Aldehyde				0.1
Heptachlor				0.01
Heptachlor Epoxide				0.01
PCB-1242				0.2
PCB-1254				0.2
PCB-1221				0.2
PCB-1232				0.2
PCB-1248				0.2
PCB-1260				0.2
PCB-1016				0.2
Toxaphene				0.3

* For PCBS, if all are non-detects, enter the highest non-detect preceded by a “<”.

Section 3. Dioxin/Furan Compounds

A. Indicate which of the following compounds from may be present in the influent from a contributing industrial user or significant industrial user. Check all that apply.

☐ 2,4,5-trichlorophenoxy acetic acid

Common Name 2,4,5-T, CASRN 93-76-5

☐ 2-(2,4,5-trichlorophenoxy) propanoic acid

Common Name Silvex or 2,4,5-TP, CASRN 93-72-1

☐ 2-(2,4,5-trichlorophenoxy) ethyl 2,2-dichloropropionate

Common Name Erbon, CASRN 136-25-4

☐ 0,0-dimethyl 0-(2,4,5-trichlorophenyl) phosphorothioate

Common Name Ronnel, CASRN 299-84-3

☐ 2,4,5-trichlorophenol

Common Name TCP, CASRN 95-95-4

☐ hexachlorophene

Common Name HCP, CASRN 70-30-4

For each compound identified, provide a brief description of the conditions of its/their presence at the facility.

Click to enter text.

B. Do you know or have any reason to believe that 2,3,7,8 Tetrachlorodibenzo-P-Dioxin (TCDD) or any congeners of TCDD may be present in your effluent?

☐ Yes ☐ No

If **yes**, provide a brief description of the conditions for its presence.

Click to enter text.

C. If any of the compounds in Subsection A **or** B are present, complete Table 4.0(2)F.

For pollutants identified in Table 4.0(2)F, indicate the type of sample.

Grab ☐ Composite ☐

Date and time sample(s) collected: Click to enter text.

Table 4.0(2)F – Dioxin/Furan Compounds

Compound	Toxic Equivalency Factors	Wastewater Concentration (ppq)	Wastewater Equivalents (ppq)	Sludge Concentration (ppt)	Sludge Equivalents (ppt)	MAL (ppq)
2,3,7,8 TCDD	1					10
1,2,3,7,8 PeCDD	0.5					50
2,3,7,8 HxCDDs	0.1					50
1,2,3,4,6,7,8 HpCDD	0.01					50
2,3,7,8 TCDF	0.1					10
1,2,3,7,8 PeCDF	0.05					50
2,3,4,7,8 PeCDF	0.5					50
2,3,7,8 HxCDFs	0.1					50
2,3,4,7,8 HpCDFs	0.01					50
OCDD	0.0003					100
OCDF	0.0003					100
PCB 77	0.0001					0.5
PCB 81	0.0003					0.5
PCB 126	0.1					0.5
PCB 169	0.03					0.5
Total						

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 5.0: TOXICITY TESTING REQUIREMENTS

The following **is required** for facilities with a current operating design flow of**1.0 MGD or greater**, with an EPA-approved **pretreatment** program (or those required to have one under 40 CFR Part 403), or are required to perform Whole Effluent Toxicity testing. See Page 86 of the instructions for further details.

This worksheet is not required minor amendments without renewal.

Section 1. Required Tests

Indicate the number of 7-day chronic or 48-hour acute Whole Effluent Toxicity (WET) tests performed in the four and one-half years prior to submission of the application.

7-day Chronic: Click to enter text.

48-hour Acute: Click to enter text.

Section 2. Toxicity Reduction Evaluations (TREs)

Has this facility completed a TRE in the past four and a half years? Or is the facility currently performing a TRE?

☐ Yes ☐ No

If yes, describe the progress to date, if applicable, in identifying and confirming the toxicant.

Click to enter text.

Section 3. Summary of WET Tests

If the required biomonitoring test information has not been previously submitted via both the Discharge Monitoring Reports (DMRs) and the Table 1 (as found in the permit), provide a summary of the testing results for all valid and invalid tests performed over the past four and one-half years. Make additional copies of this table as needed.

Table 5.0(1) Summary of WET Tests

Test Date	Test Species	NOEC Survival	NOEC Sub-lethal

DOMESTIC WASTEWATER PERMIT APPLICATION WORKSHEET 6.0: INDUSTRIAL WASTE CONTRIBUTION

The following **is required** for **all publicly owned treatment works**.

Section 1. All POTWs (Instructions Page 87)

A. Industrial users (IUs)

Provide the number of each of the following types of industrial users (IUs) that discharge to your POTW and the daily flows from each user. See the Instructions for definitions of Categorical IUs, Significant IUs – non-categorical, and Other IUs.

If there are no users, enter 0 (zero).

Categorical IUs:

Number of IUs: Click to enter text.

Average Daily Flows, in MGD: Click to enter text.

Significant IUs – non-categorical:

Number of IUs: Click to enter text.

Average Daily Flows, in MGD: Click to enter text.

Other IUs:

Number of IUs: Click to enter text.

Average Daily Flows, in MGD: Click to enter text.

B. Treatment plant interference

In the past three years, has your POTW experienced treatment plant interference (see instructions)?

☐ Yes ☐ No

If yes, identify the dates, duration, description of interference, and probable cause(s) and possible source(s) of each interference event. Include the names of the IUs that may have caused the interference.

Click to enter text.

C. Treatment plant pass through

In the past three years, has your POTW experienced pass through (see instructions)?

☐ Yes ☐ No

If yes, identify the dates, duration, a description of the pollutants passing through the treatment plant, and probable cause(s) and possible source(s) of each pass through event. Include the names of the IUs that may have caused pass through.

Click to enter text.

D. Pretreatment program

Does your POTW have an approved pretreatment program?

☐ Yes ☐ No

If yes, complete Section 2 only of this Worksheet.

Is your POTW required to develop an approved pretreatment program?

☐ Yes ☐ No

If yes, complete Section 2.c. and 2.d. only, and skip Section 3.

If no to either question above, skip Section 2 and complete Section 3 for each significant industrial user and categorical industrial user.

Section 2. POTWs with Approved Programs or Those Required to Develop a Program (Instructions Page 87)

A. Substantial modifications

Have there been any **substantial modifications** to the approved pretreatment program that have not been submitted to the TCEQ for approval according to *40 CFR §403.18*?

☐ Yes ☐ No

If yes, identify the modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

B. Non-substantial modifications

Have there been any **non-substantial modifications** to the approved pretreatment program that have not been submitted to TCEQ for review and acceptance?

☐ Yes ☐ No

If yes, identify all non-substantial modifications that have not been submitted to TCEQ, including the purpose of the modification.

Click to enter text.

C. Effluent parameters above the MAL

In Table 6.0(1), list all parameters measured above the MAL in the POTW's effluent monitoring during the last three years. Submit an attachment if necessary.

Table 6.0(1) – Parameters Above the MAL

Pollutant	Concentration	MAL	Units	Date

D. Industrial user interruptions

Has any SIU, CIU, or other IU caused or contributed to any problems (excluding interferences or pass throughs) at your POTW in the past three years?

☐ Yes ☐ No

If yes, identify the industry, describe each episode, including dates, duration, description of the problems, and probable pollutants.

Click to enter text.

Section 3. Significant Industrial User (SIU) Information and Categorical Industrial User (CIU) (Instructions Page 88)

A. General information

Company Name: Click to enter text.

SIC Code: Click to enter text.

Contact name: Click to enter text.

Address: Click to enter text.

City, State, and Zip Code: Click to enter text.

Telephone number: Click to enter text.

Email address: Click to enter text.

B. Process information

Describe the industrial processes or other activities that affect or contribute to the SIU(s) or CIU(s) discharge (i.e., process and non-process wastewater).

Click to enter text.

C. Product and service information

Provide a description of the principal product(s) or services performed.

Click to enter text.

D. Flow rate information

See the Instructions for definitions of "process" and "non-process wastewater."

Process Wastewater:

Discharge, in gallons/day: Click to enter text.

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

Non-Process Wastewater:

Discharge, in gallons/day: Click to enter text.

Discharge Type: ☐ Continuous ☐ Batch ☐ Intermittent

E. Pretreatment standards

Is the SIU or CIU subject to technically based local limits as defined in the *i*nstructions?

☐ Yes ☐ No

Is the SIU or CIU subject to categorical pretreatment standards found in *40 CFR Parts 405-471*?

☐ Yes ☐ No

If subject to categorical pretreatment standards, indicate the applicable category and subcategory for each categorical process.

Category: Subcategories: Click to enter text.

Click or tap here to enter text. Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

Category: Click to enter text.

Subcategories: Click to enter text.

F. Industrial user interruptions

Has the SIU or CIU caused or contributed to any problems (e.g., interferences, pass through, odors, corrosion, blockages) at your POTW in the past three years?

☐ Yes ☐ No

If yes, identify the SIU, describe each episode, including dates, duration, description of problems, and probable pollutants.

Click to enter text.

WORKSHEET 7.0

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

CLASS V INJECTION WELL INVENTORY/AUTHORIZATION FORM

Submit the completed form to:

TCEQ
IUC Permits Team
Radioactive Materials Division
MC-233
PO Box 13087
Austin, Texas 78711-3087
512-239-6466

For TCEQ Use Only
Reg. No._____
Date Received_____
Date Authorized_____

Section 1. General Information (Instructions Page 90)

1. TCEQ Program Area

Program Area (PST, VCP, IHW, etc.): Click to enter text.

Program ID: Click to enter text.

Contact Name: Click to enter text.

Phone Number: Click to enter text.

2. Agent/Consultant Contact Information

Contact Name: Click to enter text.

Address: Click to enter text.

City, State, and Zip Code: Click to enter text.

Phone Number: Click to enter text.

3. Owner/Operator Contact Information

☐ Owner ☐ Operator

Owner/Operator Name: Click to enter text.

Contact Name: Click to enter text.

Address: Click to enter text.

City, State, and Zip Code: Click to enter text.

Phone Number: Click to enter text.

4. Facility Contact Information

Facility Name: Click to enter text.

Address: Click to enter text.

City, State, and Zip Code: Click to enter text.

Location description (if no address is available): Click to enter text.

Facility Contact Person: Click to enter text.

Phone Number: Click to enter text.

5. **Latitude and Longitude, in degrees-minutes-seconds**

Latitude: Click to enter text.

Longitude: Click to enter text.

Method of determination (GPS, TOPO, etc.): Click to enter text.

Attach topographic quadrangle map as attachment A.

6. **Well Information**

Type of Well Construction, select one:

- ☐ Vertical Injection
- ☐ Subsurface Fluid Distribution System
- ☐ Infiltration Gallery
- ☐ Temporary Injection Points
- ☐ Other, Specify: Click to enter text.

Number of Injection Wells: Click to enter text.

7. **Purpose**

Detailed Description regarding purpose of Injection System:

Click to enter text.

Attach a Site Map as Attachment B (Attach the Approved Remediation Plan, if appropriate.)

8. **Water Well Driller/Installer**

Water Well Driller/Installer Name: Click to enter text.

City, State, and Zip Code: Click to enter text.

Phone Number: Click to enter text.

License Number: Click to enter text.

Section 2. Proposed Down Hole Design

Attach a diagram signed and sealed by a licensed engineer as Attachment C.

Table 7.0(1) – Down Hole Design Table

Name of String	Size	Setting Depth	Sacks Cement/Grout – Slurry Volume – Top of Cement	Hole Size	Weight (lbs/ft) PVC/Steel
Casing					
Tubing					
Screen					

Section 3. Proposed Trench System, Subsurface Fluid Distribution System, or Infiltration Gallery

Attach a diagram signed and sealed by a licensed engineer as Attachment D.

System(s) Dimensions: Click to enter text.

System(s) Construction: Click to enter text.

Section 4. Site Hydrogeological and Injection Zone Data

1. Name of Contaminated Aquifer: Click to enter text.

2. Receiving Formation Name of Injection Zone: Click to enter text.

3. Well/Trench Total Depth: Click to enter text.

4. Surface Elevation: Click to enter text.

5. Depth to Ground Water: Click to enter text.

6. Injection Zone Depth: Click to enter text.

7. Injection Zone vertically isolated geologically? ☐ Yes ☐ No

Impervious Strata between Injection Zone and nearest Underground Source of Drinking Water:

Name: Click to enter text.

Thickness: Click to enter text.

8. Provide a list of contaminants and the levels (ppm) in contaminated aquifer

Attach as Attachment E.

9. Horizontal and Vertical extent of contamination and injection plume

Attach as Attachment F.

10. Formation (Injection Zone) Water Chemistry (Background levels) TDS, etc.

Attach as Attachment G.

11. Injection Fluid Chemistry in PPM at point of injection

Attach as Attachment H.

12. Lowest Known Depth of Ground Water with < 10,000 PPM TDS: Click to enter text.

13. Maximum injection Rate/Volume/Pressure: Click to enter text.

14. Water wells within 1/4 mile radius (attach map as Attachment I): Click to enter text.

15. Injection wells within 1/4 mile radius (attach map as Attachment J): Click to enter text.

16. Monitor wells within 1/4 mile radius (attach drillers logs and map as Attachment K): Click to enter text.

17. Sampling frequency: Click to enter text.

18. Known hazardous components in injection fluid: Click to enter text.

Section 5. Site History

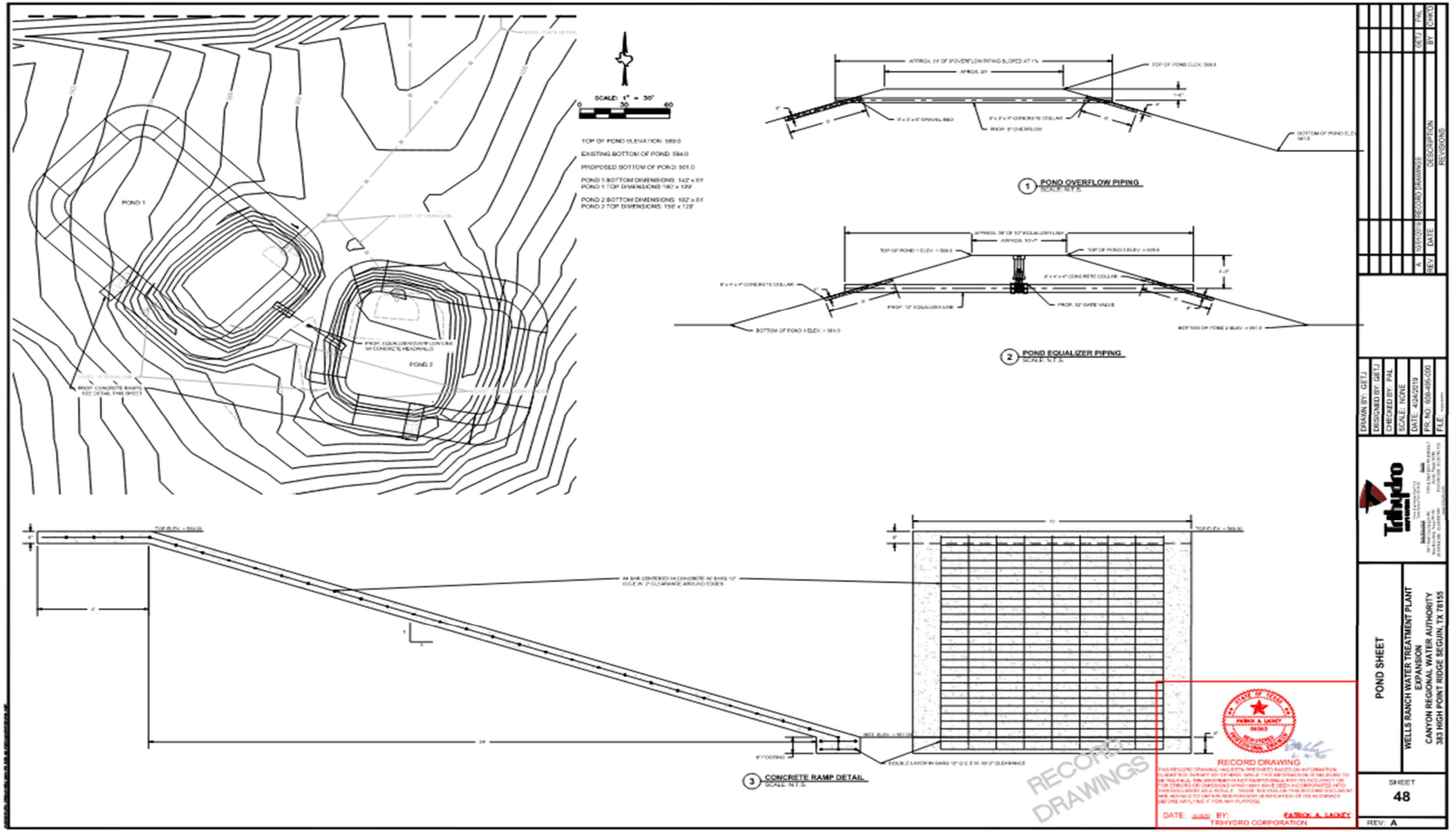
1. Type of Facility: Click to enter text.
2. Contamination Dates: Click to enter text.
3. Original Contamination (VOCs, TPH, BTEX, etc.) and Concentrations (attach as Attachment L): Click to enter text.
4. Previous Remediation (attach results of any previous remediation as attachment M): Click to enter text.

NOTE: Authorization Form should be completed in detail and authorization given by the TCEQ before construction, operation, and/or conversion can begin. Attach additional pages as necessary.

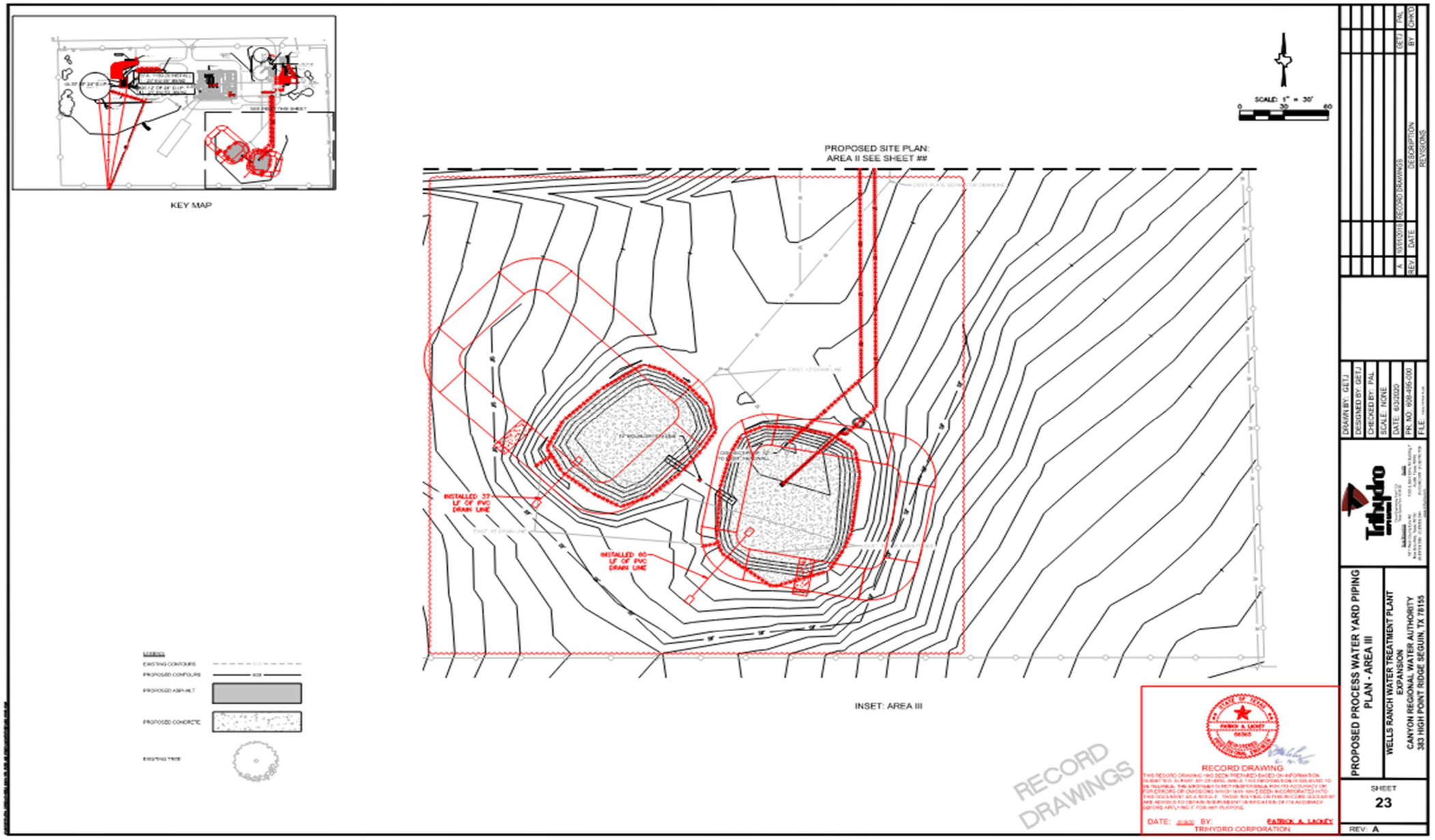
Class V Injection Well Designations

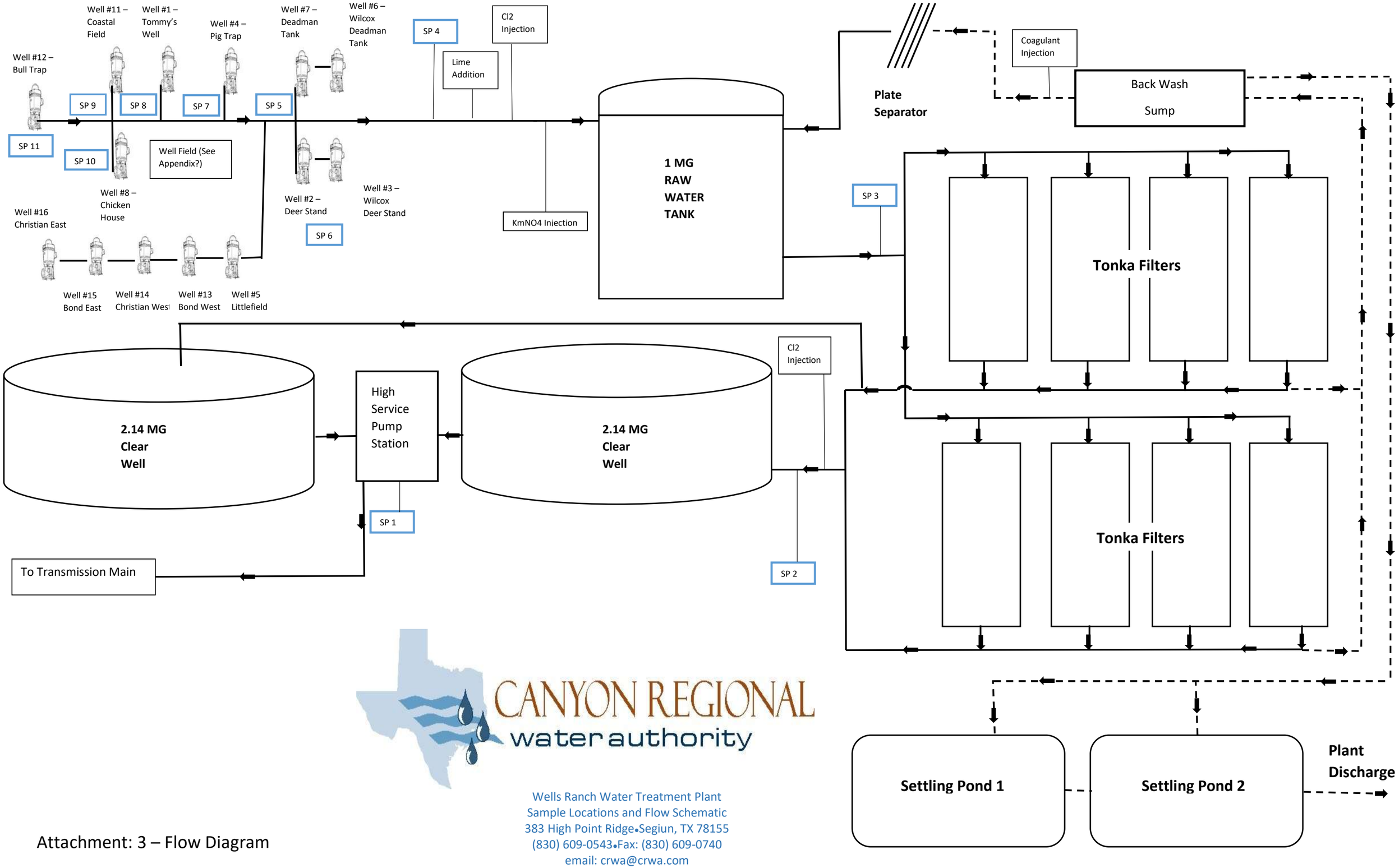
5A07 Heat Pump/AC return (IW used for groundwater to heat and/or cool buildings)
5A19 Industrial Cooling Water Return Flow (IW used to cool industrial process equipment)
5B22 Salt Water Intrusion Barrier (IW used to inject fluids to prevent the intrusion of salt water into an aquifer)
5D02 Storm Water Drainage (IW designed for the disposal of rain water)
5D04 Industrial Stormwater Drainage Wells (IW designed for the disposal of rain water associated with industrial facilities)
5F01 Agricultural Drainage (IW that receive agricultural runoff)
5R21 Aquifer Recharge (IW used to inject fluids to recharge an aquifer)
5S23 Subsidence Control Wells (IW used to control land subsidence caused by ground water withdrawal)
5W09 Untreated Sewage
5W10 Large Capacity Cesspools (Cesspools that are designed for 5,000 gpd or greater)
5W11 Large Capacity Septic systems (Septic systems designed for 5,000 gpd or greater)
5W12 WTTP disposal
5W20 Industrial Process Waste Disposal Wells
5W31 Septic System (Well Disposal method)
5W32 Septic System Drainfield Disposal
5X13 Mine Backfill (IW used to control subsidence, dispose of mining byproducts, and/or fill sections of a mine)
5X25 Experimental Wells (Pilot Test) (IW used to test new technologies or tracer dye studies)
5X26 Aquifer Remediation (IW used to clean up, treat, or prevent contamination of a USDW)
5X27 Other Wells
5X28 Motor Vehicle Waste Disposal Wells (IW used to dispose of waste from a motor vehicle site - These are currently banned)
5X29 Abandoned Drinking Water Wells (waste disposal)

Attachment: 8 – Pond Diagram (1)



Attachment: 8 – Pond Diagram (2)



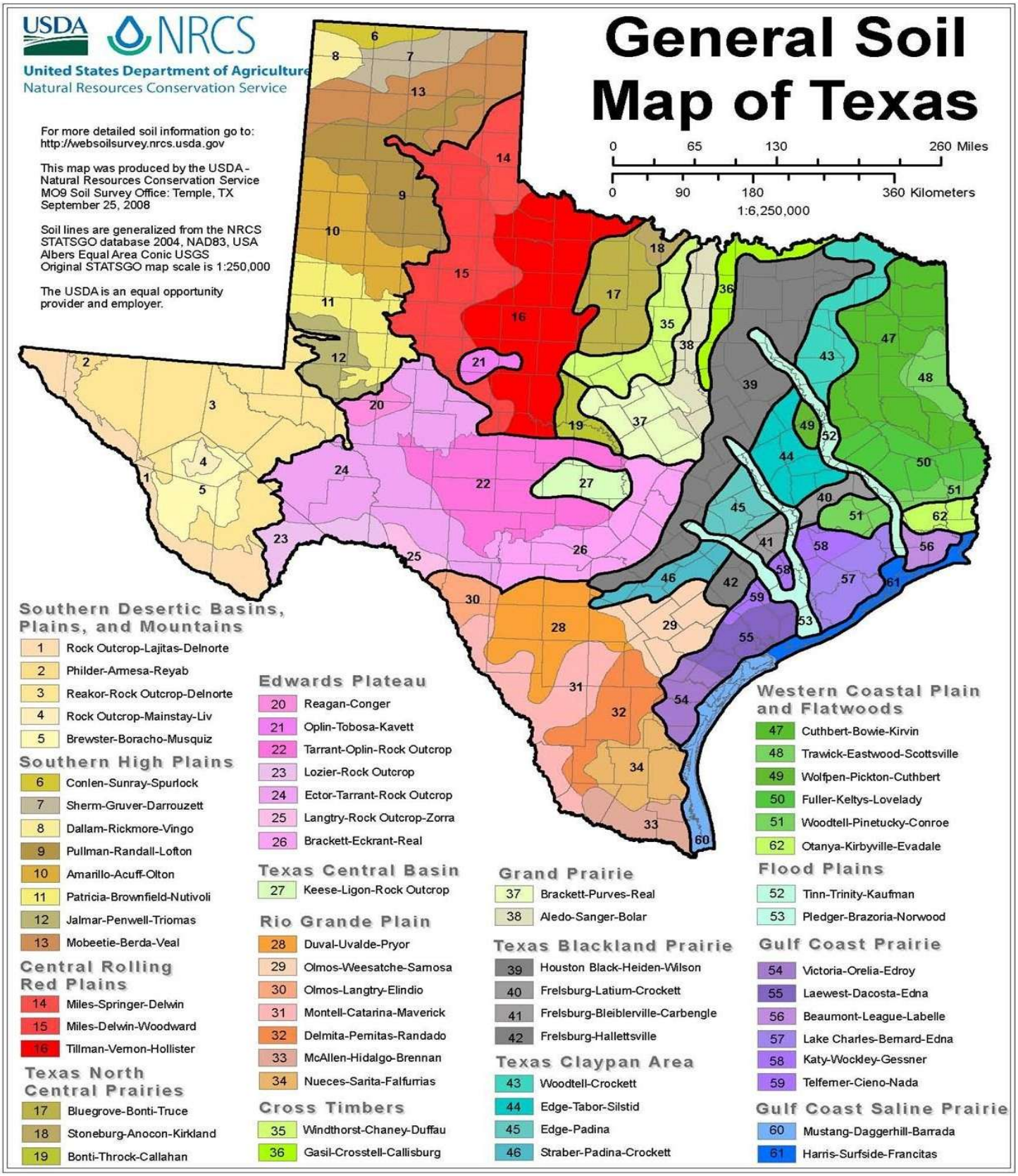


CANYON REGIONAL water authority

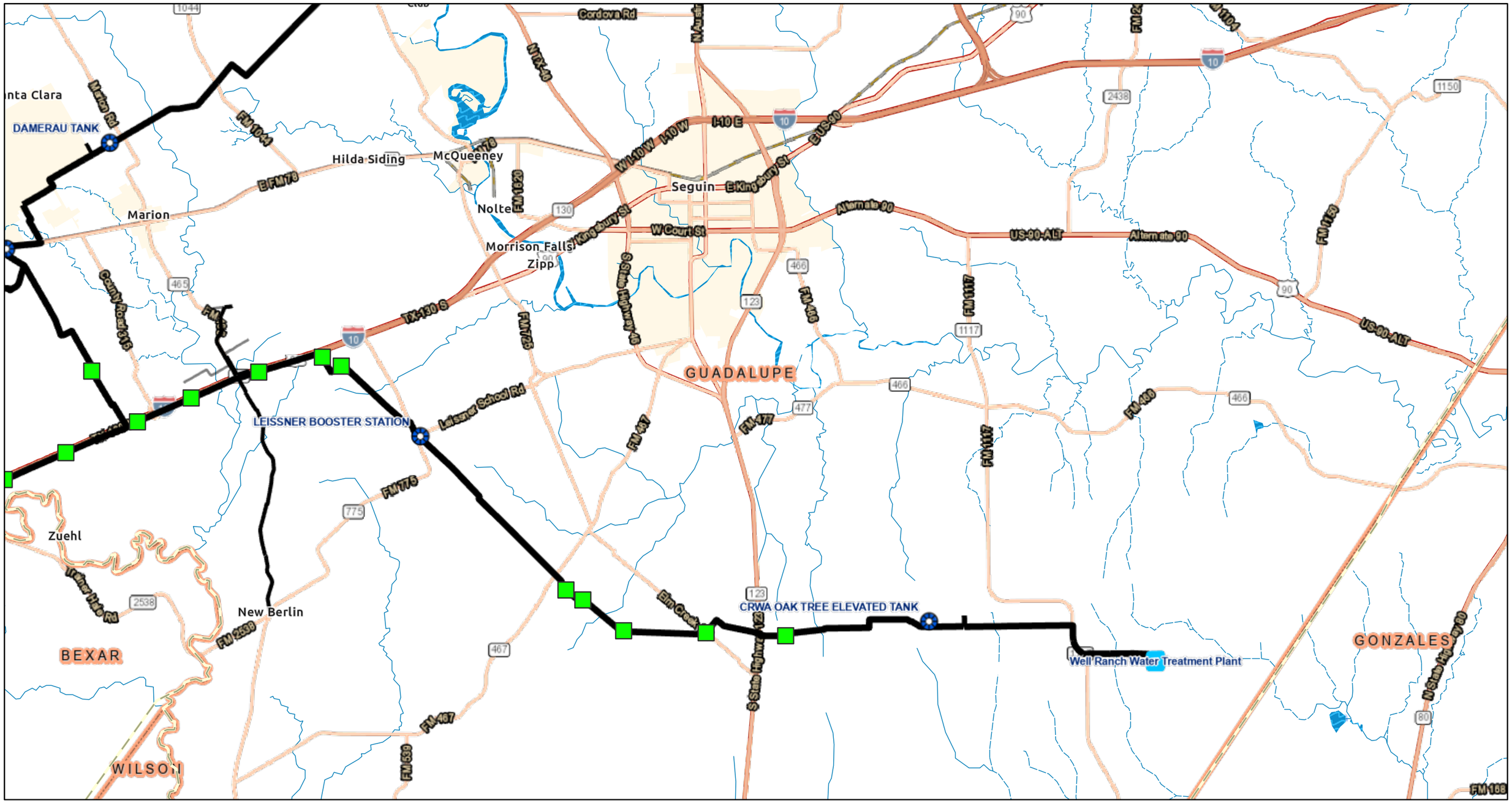
Wells Ranch Water Treatment Plant
Sample Locations and Flow Schematic
383 High Point Ridge•Segiun, TX 78155
(830) 609-0543•Fax: (830) 609-0740
email: crwa@crwa.com

Attachment: 3 – Flow Diagram

Attachment: 6 – Natural Resources Conservation Service Soil Map



Attachment: 5 - Highway Map



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1:131,533

- CRWA Vaults
- Facilities
- Water Treatment Plants
- 6" Water
- 8" Water
- 12" Water
- 16" Water
- 24" Water
- 30" Water
- All Water Lines
- Boundary
- Boundary
- Boundary
- Boundary
- Counties
- World_Transportation

0 1.25 2.5 5 mi

0 2.25 4.5 9 km

JJackson, Esri, HERE, Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, (c) OpenStreetMap contributors, and the GIS User Community, Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, © OpenStreetMap contributors, and the GIS User Community

LIABILITY DECLARATIONS OF COVERAGE

Member Name:	Canyon Regional Water Authority
Member ID:	7814
Contract Type:	Liability
Coverage Period:	10/01/2024 to 10/01/2025

GENERAL LIABILITY

Limits of Liability	: $	5,000,000	Each Occurrence	
Sudden Events Involving Pollution	: $	2,000,000	Each Occurrence	
	$	10,000,000	Annual Aggregate	
Deductible	: $	5,000	Each Occurrence	
			Effective:	10/01/2024
Billable Contribution	: $	3,172	Anniversary:	10/01/2025

LAW ENFORCEMENT LIABILITY

**** Coverage Not Selected ****

ERRORS & OMISSIONS LIABILITY

Limits of Liability	: $	5,000,000	Each Wrongful Act	
	: $	10,000,000	Annual Aggregate	
Deductible	: $	5,000	Each Wrongful Act	
			Effective:	10/01/2024
Billable Contribution	: $	2,410	Anniversary:	10/01/2025

TOTAL CONTRIBUTION

Total Billable Contribution	: $	5,582	Contract Effective:	10/01/2024
			Contract Anniversary:	10/01/2025

Coverage is continuous until cancelled. Contributions are subject to adjustment each year on the anniversary date based on updated exposure information and changes in rating.

AUTOMOBILE DECLARATIONS OF COVERAGE

Member Name:	Canyon Regional Water Authority
Member ID:	7814
Contract Type:	Liability
Coverage Period:	10/01/2024 to 10/01/2025

AUTOMOBILE LIABILITY

Limits of Liability	: $	5,000,000	Each Occurrence	
Medical Payments Limit	: $	25,000	Each person	
Deductible	: $	5,000	Each Occurrence	
			Effective :	10/01/2024
Billable Contribution	: $	2,161	Anniversary :	10/01/2025

AUTOMOBILE PHYSICAL DAMAGE

Limits of Coverage	:	Per Schedule and Endorsements	Each Occurrence	
Deductible	: $	500	Each Vehicle	
	$	10,000	*Each Occurrence	
			Effective:	10/01/2024
Billable Contribution	: $	2,602	Anniversary:	10/01/2025

AUTOMOBILE CATASTROPHE

**** Coverage Not Selected ****

TOTAL CONTRIBUTION

Total Billable Contribution	: $	4,763	Contract Effective:	10/01/2024
			Contract Anniversary:	10/01/2025

Coverage is continuous until cancelled. Contributions are subject to adjustment each year on the anniversary date based on updated exposure information and changes in rating.

* Automobile Physical Damage Each Occurrence Deductible does not apply to hail.

Attachment: 13 – Soil Analyses

POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 0-6"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1030**	**PCS Sample #: 774190 Page 1 of 3** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024** **Approved by:** Chuck Wallgren, President

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
pH		8.1	S.U.	N/A	09/11/2024 08:56	SW846 9045	LCC
Conductivity, Specific		48	µmhos/cm at 25° C	N/A	09/11/2024 11:19	SM 2510B	LCC
Nitrate-N	R	0.3	mg/kg	0.1	09/17/2024 12:50	EPA 352.1	LCC
Kjeldahl-N, Total	!	150	mg/kg	3	09/17/2024 10:20	SM 4500-N B/C	BMR
Ammonia-N		<3	mg/kg	3	09/20/2024 11:20	SM 4500-NH3 B/C	BMR
Arsenic/ICP (Total)		0.520	mg/kg	0.277	09/25/2024 10:05	SW846 3050/6010	DJL
Cadmium/ICP (Total)		<0.138	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Chromium/ICP (Total)		2.40	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
pH	N/A	N/A	N/A			N/A			
Conductivity, Specific	N/A	N/A	N/A			N/A			
Nitrate-N	3	10	70	*57	*55	130	93	85 - 115	
Kjeldahl-N, Total	1	13	83	98	99	114	101	85 - 115	<3
Ammonia-N	7	10	88	97	90	113	101	85 - 115	
Arsenic/ICP (Total)	3	20	75	93	93	125	100	85 - 115	
Cadmium/ICP (Total)	3	20	75	97	97	125	100	85 - 115	
Chromium/ICP (Total)	5	20	75	109	107	125	105	85 - 115	

Quality Statement: All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
! *Parameter not NELAP certifiable*
R *Spike recovery outside control limits due to matrix effect - LCS within limits*
§ *Reported on a Dry Weight Basis*

These analytical results relate only to the sample tested.
All data is reported on an 'As Is' basis unless designated as 'Dry Wt'.
RL = Reporting Limits

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chuck@pcslab.net
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Attachment: 13 – Soil Analyses

POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 0-6"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1030**	**PCS Sample #: 774190 Page 2 of 3** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024**

Test Description	Result	Units	RL	Analysis Date/Time	Method	Analyst
Copper/ICP (Total)	0.720	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Lead/ICP (Total)	2.80	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Molybdenum/ICP (Total)	<0.130	mg/kg	0.277	09/25/2024 10:05	SW846 3050/6010	DJL
Nickel/ICP (Total)	0.780	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Selenium/ICP (Total)	<0.277	mg/kg	0.277	09/25/2024 10:05	SW846 3050/6010	DJL
Sodium/ICP (Mehlich III)	<22.6	mg/kg	22.6	09/25/2024 07:18	Mehlich 3/EPA 200.7	DJL
Zinc/ICP (Total)	2.00	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Calcium/ICP (Mehlich III)	200	mg/kg	22.6	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
Copper/ICP (Total)	3	20	75	103	103	125	105	85 - 115	
Lead/ICP (Total)	5	20	75	101	98	125	105	85 - 115	
Molybdenum/ICP (Total)	<1	20	75	97	100	125	105	85 - 115	
Nickel/ICP (Total)	3	20	75	98	98	125	105	85 - 115	
Selenium/ICP (Total)	<1	20	75	84	86	125	95	85 - 115	
Sodium/ICP (Mehlich III)	2	20	70	87	89	130	102	85 - 115	
Zinc/ICP (Total)	<1	20	75	97	100	125	100	85 - 115	
Calcium/ICP (Mehlich III)	6	20	70	*N/C	*N/C	130	100	85 - 115	

Quality Statement: All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
§ Reported on a Dry Weight Basis

These analytical results relate only to the sample tested.
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RL = Reporting Limits
**N/C = Not Calculated, Sample Concentration Greater than 5 times the Spike Level*

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chuck@pcslab.net
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Attachment: 13 – Soil Analyses

POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 0-6"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1030**	**PCS Sample #: 774190 Page 3 of 3** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024**

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
Magnesium/ICP (Mehlich III)		24.0	mg/kg	11.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Phosphorous/ICP (Mehlich III)	M	<11.3	mg/kg	11.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Potassium/ICP (Mehlich III)		<22.6	mg/kg	22.6	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Mercury/CVAA (Total)		0.010	mg/kg	0.009	09/19/2024 13:52	SW846 7471	EMV
Total Solids		87.9	%	0.10	09/10/2024 18:00	SM 2540 G	EMV

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
Magnesium/ICP (Mehlich III)	4	20	70	*N/C	*N/C	130	100	85 - 115	
Phosphorous/ICP (Mehlich III)	2	20	75	*135	*132	125	105	85 - 115	
Potassium/ICP (Mehlich III)	5	20	70	102	108	130	95	85 - 115	
Mercury/CVAA (Total)	1	20	70	101	103	130	99	85 - 115	
Total Solids	<1	12	N/A			N/A			

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
M Post digestion spike passed, values >= RL are estimated
§ Reported on a Dry Weight Basis

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Attachment: 13 – Soil Analyses

POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 6-24"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1040**	**PCS Sample #: 774191 Page 1 of 2** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024** **Approved by:** Chuck Wallgren, President

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
pH		7.8	S.U.	N/A	09/11/2024 08:59	SW846 9045	LCC
Conductivity, Specific		72	µmhos/cm at 25° C	N/A	09/11/2024 11:20	SM 2510B	LCC
Nitrate-N		0.1	mg/kg	0.1	09/20/2024 13:40	EPA 352.1	LCC
Kjeldahl-N, Total	!	152	mg/kg	3	09/17/2024 10:20	SM 4500-N B/C	BMR
Ammonia-N		<3	mg/kg	3	09/20/2024 11:20	SM 4500-NH3 B/C	BMR
Sodium/ICP (Mehlich III)		26.6	mg/kg	24.3	09/25/2024 07:18	Mehlich 3/EPA 200.7	DJL
Calcium/ICP (Mehlich III)		150	mg/kg	24.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Magnesium/ICP (Mehlich III)		17.0	mg/kg	12.2	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
pH	N/A	N/A	N/A			N/A			
Conductivity, Specific	N/A	N/A	N/A			N/A			
Nitrate-N	6	10	70	102	108	130	100	85 - 115	
Kjeldahl-N, Total	1	13	83	98	99	114	101	85 - 115	<3
Ammonia-N	7	10	88	97	90	113	101	85 - 115	
Sodium/ICP (Mehlich III)	2	20	70	87	89	130	102	85 - 115	
Calcium/ICP (Mehlich III)	6	20	70	*N/C	*N/C	130	100	85 - 115	
Magnesium/ICP (Mehlich III)	4	20	70	*N/C	*N/C	130	100	85 - 115	

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
! Parameter not NELAP certifiable
§ Reported on a Dry Weight Basis

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Attachment: 13 – Soil Analyses

POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **[$]Sample ID: 6-24"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1040**	**PCS Sample #: 774191 Page 2 of 2** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024**

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
Phosphorous/ICP (Mehlich III)	M	<12.2	mg/kg	12.2	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Potassium/ICP (Mehlich III)		<24.3	mg/kg	24.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Total Solids		80.5	%	0.10	09/10/2024 18:00	SM 2540 G	EMV

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
Phosphorous/ICP (Mehlich III)	2	20	75	*135	*132	125	105	85 - 115	
Potassium/ICP (Mehlich III)	5	20	70	102	108	130	95	85 - 115	
Total Solids	<1	12	N/A			N/A			

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
[M] Post digestion spike passed, values >= RL are estimated
§ Reported on a Dry Weight Basis

These analytical results relate only to the sample tested.
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RL = Reporting Limits

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Attachment: 13 – Soil Analyses

POLLUTION CONTROL SERVICES

MULTIPLE SAMPLE ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

Chain of Custody Number: 774190

Stamp 1st sample and COC as same number

CUSTOMER INFORMATION	**REPORT INFORMATION**		
Name: Canyon Regional Water Authority	Attention: Austin Shirk	Phone: (830) 386-0619	Fax:

SAMPLE INFORMATION

Project Information: Wells Ranch WTP Discharge

Report "Soils" ☐ As Is ☐ Dry Wt.

Collected By: Austin Shirk

Requested Analysis

Instructions/Comments:

Client / Field Sample ID	**Collected** Date	**Collected** Time	Field Chlorine Residual mg/L	Composite or Grab	**Matrix** DW-Drinking Water; NPW-Non-potable water; WW-Wastewater; LW-Liquid Waste	**Container** Type	**Container** Number	**Container** Preservative	See Attached								**PCS Sample Number**
0-6 in	Start: 9/10/24 End:	Start: 10:30 End:		☐ C ☒ G	☐ DW ☐ NPW ☐ WW ☒ Soil ☐ Sludge ☐ LW ☐ Other	☑ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____	★								774190 ☐S ☐B ☐N ☐HEM Other:
6-24 in	Start: 9/10/29 End:	Start: 10:40 End:		☐ C ☒ G	☐ DW ☐ NPW ☐ WW ☒ Soil ☐ Sludge ☐ LW ☐ Other	☑ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____	★								774191 ☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐ C ☐ G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐ C ☐ G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐ C ☐ G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐ C ☐ G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐ C ☐ G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐ C ☐ G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐ P ☐ G ☐ O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ____									☐S ☐B ☐N ☐HEM Other:

Required Turnaround: ☐ Routine (6-10 days) *EXPEDITE*: (See Surcharge Schedule) ☐ < 8 Hrs. ☐ < 16 Hrs. ☐ < 24 Hrs. ☐ 5 days ☐ Other: ________ ***Rush Charges Authorized by:***

Sample Archive/Disposal: ☐ Laboratory Standard ☐ Hold for client pick up **Container Type:** P = Plastic, G = Glass, O = Other ____________ Carrier ID: ____________

Relinquished By:		Date:	9/10/24	Time:	11:50	Received By:		Date:		Time:	
Relinquished By:		Date:		Time:		Received By:		Date:	9-10-24	Time:	1150

Rev. Multiple Sample COC_20180628

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Login at www.pcslab.net

Attachment: 13 – Soil Analyses

No.	PARAMETER	NOTE	FREQUENCY	SAMPLE DEPTH	
				0" - 6"	6" - 24"
1.	Nitrate Nitrogen (NO_3-N, mg/kg)	1	1 per year	X	X
2.	Ammonium Nitrogen (NH_4-N, mg/kg)	1	1 per year	X	X
3.	Total Nitrogen (TKN, mg/kg)	2	1 per year	X	X
4.	Phosphorus (plant available, mg/kg)	3	1 per year	X	X
5.	Potassium (plant available, mg/kg)	3	1 per year	X	X
6.	Sodium (plant available, mg/kg)	3	1 per year	X	X
7.	Magnesium (plant available, mg/kg)	3	1 per year	X	X
8.	Calcium (plant available, mg/kg)	3	1 per year	X	X
9.	Electrical Conductivity	4	1 per year	X	X
10.	Soil Water pH (S.U.)	5	1 per year	X	X
11.	Total Arsenic (mg/kg)	6	1 per 5 years	X	N/A
12.	Total Cadmium (mg/kg)	6	1 per 5 years	X	N/A
13.	Total Chromium (mg/kg)	6	1 per 5 years	X	N/A
14.	Total Copper (mg/kg)	6	1 per 5 years	X	N/A
15.	Total Lead (mg/kg)	6	1 per 5 years	X	N/A
16.	Total Mercury (mg/kg)	6	1 per 5 years	X	N/A
17.	Total Molybdenum (mg/kg)	6	1 per 5 years	X	N/A
18.	Total Nickel (mg/kg)	6	1 per 5 years	X	N/A
19.	Total Selenium (mg/kg)	6	1 per 5 years	X	N/A
20.	Total Zinc (mg/kg)	6	1 per 5 years	X	N/A

Attachment: 13 – Soil Analyses

Pollution Control Services
Universal City, Tx

Sample Log-In Checklist
DCN: SL-001, Rev. 1
Effective Date: 6/07/2022

Pollution Control Services
Sample Log-In Checklist

PCS Sample No(s) 774190 774191 **COC No.** 774190

Client/Company Name: CRWA **Checklist Completed by:** JAA

Sample Delivery to Lab Via:
Client Drop Off ✓ Commercial Carrier: Bus ____ UPS ____ Lone Star ____ FedEx ____ USPS ____
PCS Field Services: Collection/Pick Up____ Other:____

Sample Kit/Coolers
Sample Kit/Cooler? Yes ✓ No____ Sample Kit/Cooler: Intact? Yes ✓ No___
Custody Seals on Sample Kit/Cooler: Not Present ✓ If Present, Intact ___ Broken ___
Sample Containers Intact; Unbroken and Not Leaking? Yes ✓ No ___
Custody Seals on Sample Bottles: Not Present ✓ If Present, Intact ___ Broken ___
COC Present with Shipment or Delivery or Completed at Drop Off? Yes ✓ No ___
Has COC sample date/time and other pertinent information been provided by client/sampler? Yes: ✓ No: ___
Has COC been properly Signed when Received/Relinquished? Yes ✓ No ___
Does COC agree with Sample Bottle Information, Bottle Types, Preservation, etc.? Yes ✓ No ___
All Samples Received before Hold Time Expiration? Yes ✓ No ___
Sufficient Sample Volumes for Analysis Requested? Yes ✓ No ___
Zero Headspace in VOA Vial? Yes ___ No ___

Sample Preservation:
* ***Cooling:*** **Not Required** ✓ **or Required** ____
If cooling required, record temperature of submitted samples Observed/Corrected 24.2 / 24.1 °C
Is Ice Present in Sample Kit/Cooler? ____ Yes ✓ No Samples received same day as collected? ✓ Yes ____ No
Lab Thermometer Make and Serial Number: Vaughan 1807009583 Other: ____

Acid Preserved Sample - If present, is pH <2? **Yes** ____ **No** ____ ** ____H_2SO_4 ____HNO_3 ____H_3PO_4
Base Preserved Sample - If present, is pH >12? Yes ____ No ____ ____NaOH
Other Preservation:____ If Present, Meets Requirements? Yes____ No____
Sample Preservations Checked by:____ Date ____ Time ____
pH paper used to check sample preservation (PCS log #): ____ (HEM pH checked at analysis).
Samples Preserved/Adjusted by Lab:

Lab #	Parameters Preserved	Preservative Used	Log #

Adjusted by Tech/Analyst:____ Date :____Time:____

Client Notification/ Documentation for "No" Responses Above/ Discrepancies/ RevisionComments
Person Notified: ____ Contacted by:____
Notified Date: ____Time: ____
Method of Contact: At Drop Off:____ Phone ___ Left Voice Mail ____ E-Mail ____ Fax ____
Unable to Contact____ Authorized Laboratory to Proceed :____(Lab Director)
Regarding / Comments:____

Actions taken to correct problems/discrepancies:____

Receiving qualifier needed (*requires client notification above*) Temp. ___ Holding Time ___ Initails: ____
Receiving qualifier entered into LIMS at login Initial/Date: ____
Revision Comments: ____

Attachment: 13 – Soil Analyses

Attachment: 13 – Soil Analyses

Attachment: 13 – Soil Analyses

Attachment: 13 – Soil Analyses

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POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 0-6"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1030**	**PCS Sample #: 774190 Page 1 of 3** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024** Approved by: Chuck Wallgren, President

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
pH		8.1	S.U.	N/A	09/11/2024 08:56	SW846 9045	LCC
Conductivity, Specific		48	µmhos/cm at 25° C	N/A	09/11/2024 11:19	SM 2510B	LCC
Nitrate-N	R	0.3	mg/kg	0.1	09/17/2024 12:50	EPA 352.1	LCC
Kjeldahl-N, Total	!	150	mg/kg	3	09/17/2024 10:20	SM 4500-N B/C	BMR
Ammonia-N		<3	mg/kg	3	09/20/2024 11:20	SM 4500-NH3 B/C	BMR
Arsenic/ICP (Total)		0.520	mg/kg	0.277	09/25/2024 10:05	SW846 3050/6010	DJL
Cadmium/ICP (Total)		<0.138	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Chromium/ICP (Total)		2.40	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
pH	N/A	N/A	N/A			N/A			
Conductivity, Specific	N/A	N/A	N/A			N/A			
Nitrate-N	3	10	70	*57	*55	130	93	85 - 115	
Kjeldahl-N, Total	1	13	83	98	99	114	101	85 - 115	<3
Ammonia-N	7	10	88	97	90	113	101	85 - 115	
Arsenic/ICP (Total)	3	20	75	93	93	125	100	85 - 115	
Cadmium/ICP (Total)	3	20	75	97	97	125	100	85 - 115	
Chromium/ICP (Total)	5	20	75	109	107	125	105	85 - 115	

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
! Parameter not NELAP certifiable
[R] Spike recovery outside control limits due to matrix effect - LCS within limits
§ Reported on a Dry Weight Basis

These analytical results relate only to the sample tested.
All data is reported on an 'As Is' basis unless designated as 'Dry Wt'.
RL = Reporting Limits

www.pcslab.net
chuck@pcslab.net
1532 Universal City Blvd
Universal City, TX 78148-3318
Main: 210-340-0343
Fax: 210-658-7903
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Map Unit Description

The map units delineated on the detailed soil maps in a soil survey represent the soils or miscellaneous areas in the survey area. The map unit descriptions in this report, along with the maps, can be used to determine the composition and properties of a unit.

A map unit delineation on a soil map represents an area dominated by one or more major kinds of soil or miscellaneous areas. A map unit is identified and named according to the taxonomic classification of the dominant soils. Within a taxonomic class there are precisely defined limits for the properties of the soils. On the landscape, however, the soils are natural phenomena, and they have the characteristic variability of all natural phenomena. Thus, the range of some observed properties may extend beyond the limits defined for a taxonomic class. Areas of soils of a single taxonomic class rarely, if ever, can be mapped without including areas of other taxonomic classes. Consequently, every map unit is made up of the soils or miscellaneous areas for which it is named, soils that are similar to the named components, and some minor components that differ in use and management from the major soils.

Most of the soils similar to the major components have properties similar to those of the dominant soil or soils in the map unit, and thus they do not affect use and management. These are called noncontrasting, or similar, components. They may or may not be mentioned in a particular map unit description. Some minor components, however, have properties and behavior characteristics divergent enough to affect use or to require different management. These are called contrasting, or dissimilar, components. They generally are in small areas and could not be mapped separately because of the scale used. Some small areas of strongly contrasting soils or miscellaneous areas are identified by a special symbol on the maps. If included in the database for a given area, the contrasting minor components are identified in the map unit descriptions along with some characteristics of each. A few areas of minor components may not have been observed, and consequently they are not mentioned in the descriptions, especially where the pattern was so complex that it was impractical to make enough observations to identify all the soils and miscellaneous areas on the landscape.

The presence of minor components in a map unit in no way diminishes the usefulness or accuracy of the data. The objective of mapping is not to delineate pure taxonomic classes but rather to separate the landscape into landforms or landform segments that have similar use and management requirements. The delineation of such segments on the map provides sufficient information for the development of resource plans. If intensive use of small areas is planned, however, onsite investigation is needed to define and locate the soils and miscellaneous areas.

An identifying symbol precedes the map unit name in the map unit descriptions. Each description includes general facts about the unit and gives important soil properties and qualities.

Soils that have profiles that are almost alike make up a *soil series*. All the soils of a series have major horizons that are similar in composition, thickness, and arrangement. Soils of a given series can differ in texture of the surface layer, slope, stoniness, salinity, degree of erosion, and other characteristics that affect their use. On the basis of such differences, a soil series is divided into *soil phases*. Most of the areas shown on the detailed soil maps are phases of soil series. The name of a soil phase commonly indicates a feature that affects use or management. For example, Alpha silt loam, 0 to 2 percent slopes, is a phase of the Alpha series.

Some map units are made up of two or more major soils or miscellaneous areas. These map units are complexes, associations, or undifferentiated groups.

A *complex* consists of two or more soils or miscellaneous areas in such an intricate pattern or in such small areas that they cannot be shown separately on the maps. The pattern and proportion of the soils or miscellaneous areas are somewhat similar in all areas. Alpha-Beta complex, 0 to 6 percent slopes, is an example.

An *association* is made up of two or more geographically associated soils or miscellaneous areas that are shown as one unit on the maps. Because of present or anticipated uses of the map units in the survey area, it was not considered practical or necessary to map the soils or miscellaneous areas separately. The pattern and relative proportion of the soils or miscellaneous areas are somewhat similar. Alpha-Beta association, 0 to 2 percent slopes, is an example.

An *undifferentiated group* is made up of two or more soils or miscellaneous areas that could be mapped individually but are mapped as one unit because similar interpretations can be made for use and management. The pattern and proportion of the soils or miscellaneous areas in a mapped area are not uniform. An area can be made up of only one of the major soils or miscellaneous areas, or it can be made up of all of them. Alpha and Beta soils, 0 to 2 percent slopes, is an example.

Some surveys include *miscellaneous areas*. Such areas have little or no soil material and support little or no vegetation. Rock outcrop is an example.

Additional information about the map units described in this report is available in other soil reports, which give properties of the soils and the limitations, capabilities, and potentials for many uses. Also, the narratives that accompany the soil reports define some of the properties included in the map unit descriptions.

Guadalupe County, Texas

PaD—Patilo and Arenosa soils, 1 to 8 percent slopes

Map Unit Setting

National map unit symbol: d9rh
Elevation: 400 to 1,500 feet
Mean annual precipitation: 24 to 40 inches
Mean annual air temperature: 64 to 70 degrees F
Frost-free period: 220 to 275 days

Farmland classification: Not prime farmland

Map Unit Composition

Patilo and similar soils: 49 percent
Arenosa and similar soils: 29 percent
Minor components: 22 percent
Estimates are based on observations, descriptions, and transects of the mapunit.

Description of Patilo

Setting

Landform: Ridges
Landform position (two-dimensional): Summit, backslope
Landform position (three-dimensional): Interfluve, side slope
Down-slope shape: Linear
Across-slope shape: Convex
Parent material: Residuum weathered from eocene sandstones of carrizo, queen city, simsboro and sparta formations

Typical profile

H1 - 0 to 8 inches: fine sand
H2 - 8 to 52 inches: fine sand
H3 - 52 to 84 inches: sandy clay loam

Properties and qualities

Slope: 1 to 8 percent
Depth to restrictive feature: More than 80 inches
Drainage class: Moderately well drained
Runoff class: Very low
Capacity of the most limiting layer to transmit water (Ksat): Moderately high (0.20 to 0.57 in/hr)
Depth to water table: About 48 to 72 inches
Frequency of flooding: None
Frequency of ponding: None
Maximum salinity: Nonsaline to very slightly saline (0.0 to 2.0 mmhos/cm)
Available water supply, 0 to 60 inches: Low (about 5.3 inches)

Interpretive groups

Land capability classification (irrigated): 3s
Land capability classification (nonirrigated): 3s
Hydrologic Soil Group: A
Ecological site: R087AY007TX - Deep Sand
Hydric soil rating: No

Description of Arenosa

Setting

Landform: Ridges
Landform position (two-dimensional): Summit, shoulder
Landform position (three-dimensional): Interfluve
Down-slope shape: Linear
Across-slope shape: Convex

Parent material: Residuum weathered from eocene age sandstones in the carrizo, queen city and sparta formations

Typical profile

H1 - 0 to 5 inches: fine sand
H2 - 5 to 96 inches: fine sand

Properties and qualities

Slope: 1 to 8 percent
Depth to restrictive feature: More than 80 inches
Drainage class: Somewhat excessively drained
Runoff class: Very low
Capacity of the most limiting layer to transmit water (Ksat): High to very high (5.95 to 19.98 in/hr)
Depth to water table: More than 80 inches
Frequency of flooding: None
Frequency of ponding: None
Maximum salinity: Nonsaline to very slightly saline (0.0 to 2.0 mmhos/cm)
Available water supply, 0 to 60 inches: Low (about 3.1 inches)

Interpretive groups

Land capability classification (irrigated): None specified
Land capability classification (nonirrigated): 4s
Hydrologic Soil Group: A
Ecological site: R087AY007TX - Deep Sand
Hydric soil rating: No

Minor Components

Unnamed

Percent of map unit: 15 percent
Hydric soil rating: No

Unnamed

Percent of map unit: 7 percent
Hydric soil rating: No

Data Source Information

Soil Survey Area: Guadalupe County, Texas
Survey Area Data: Version 20, Aug 30, 2024

TCEQ Office Use Only
Permit No:
CN:
RN:
Region:

TEXAS COMMISSION ON ENVIRONMENTAL QUALITY

APPLICATION FOR A PERMIT FOR BENEFICIAL LAND USE OF BIOSOLIDS

If you have questions about completing this form please contact the Applications Review and Processing Team at 512-239-4671.

SECTION 1. TYPE OF APPLICATION

☐ New (original, site not permitted)

☐ New (previously permitted but allowed to expire or canceled)

☐ Major Amendment (including renewals with changes to substantive provisions of the permit)

☐ Minor Amendment (including non-substantive provisions of the registration, expiration date remains the same)

☒ Renewal

☐ Renewal with Minor Amendment

For amendments, describe the proposed changes:

Click here to enter text.

For existing permits:

What is the permit number? WQ0014872001

SECTION 2. APPLICATION FEE

The application fee varies from $1,000 to $5,000 based on the quantity of biosolids to be applied annually. See instructions to determine the appropriate fee.

Provide your payment information below, for verification of payment

Check/Money Order Number: ePay Voucher #767971

Check/Money Order Amount: Click here to enter text.

Name Printed on Check: Click here to enter text.

SECTION 3. APPLICANT INFORMATION

A. The **site operator** must apply for the permit. What is the legal name of the site operator (applicant)? The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.
Canyon Regional Water Authority

B. If the applicant is an existing TCEQ customer, provide the Customer Number (CN) issued to this entity. CN605179324

C. What is the contact information for this applicant?

Contact Name: Adam Telfer

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: adam@crwa.com

SECTION 4. CO-APPLICANT INFORMATION

Complete this section only if more than one person or entity is a site operator.

A. What is the legal name of the co-applicant? The legal name must be spelled exactly as filed with the Texas Secretary of State, County, or in the legal document forming the entity.

Click here to enter text.

B. If the co-applicant is an existing TCEQ customer, provide the Customer Number (CN) issued to this entity. CN Click here to enter text.

C. What is the contact information for this applicant?

Contact Name: Click here to enter text.

Mailing Address: Click here to enter text.

City, State, and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

E-mail Address: Click here to enter text.

SECTION 5. APPLICATION CONTACT INFORMATION

These are the individuals that TCEQ will contact if additional information is needed about this application.

A. Prefix (Mr., Ms., Miss): Mr.

Application Contact First and Last Name: Adam Telfer

Title: Compliance Manager Credentials: Click here to enter text.

Organization Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: adam@crwa.com

B. Prefix (Mr., Ms., Miss): Mr.

Application Contact First and Last Name: Kerry Averyt

Title: General Manager Credentials: P.E.

Organization Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: kaveryt@crwa.com

SECTION 6. PERMIT CONTACT INFORMATION

These are the individuals that TCEQ can contact during the term of the permit.

A. Prefix (Mr., Ms., Miss): Mr.

Permit Contact First and Last Name: Adam Telfer

Title: Compliance Manager Credentials: Click here to enter text.

Organization Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: adam@crwa.com

B. Prefix (Mr., Ms., Miss): Mr.

Permit Contact First and Last Name: Kerry Averyt

Title: General Manager Credentials: P.E.

Organization Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: Kaveryt@crwa.com

SECTION 7. BILLING CONTACT INFORMATION

This is the person that TCEQ will contact if additional information is needed about the annual fee invoices.

Prefix (Mr., Ms., Miss): Mr.

Billing Contact First and Last Name: Adam Telfer

Title: Compliance Manager Credentials: Click here to enter text.

Organization Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: adam@crwa.com

SECTION 8. REPORTING CONTACT INFORMATION

This is the person that TCEQ will contact if additional information is needed about the annual biosolids land application reports.

Prefix (Mr., Ms., Miss): Mr.

Reporting Contact First and Last Name: Adam Telfer

Title: Compliance Manager Credentials: Click here to enter text.

Organization Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: adam@crwa.com

SECTION 9. NOTICE INFORMATION

A. Individual responsible for publishing the notices in the newspaper

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Adam Telfer

Title: Compliance Manager Credentials: Click here to enter text.

Company Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543 Fax Number: 830-609-0740

E-mail Address: adam@crwa.com

B. Method for receiving the notice package for the Notice of Receipt and Intent

☒ E-mail: adam@crwa.com

☐ Fax Number: Click here to enter text.

☐ Regular Mail:

Mailing Address: Click here to enter text.

City, State, and Zip Code: Click here to enter text.

C. Contact person to be listed in the notice

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Adam Telfer

Title: Compliance Manager Credentials: Click here to enter text.

Company Name: Canyon Regional Water Authority

Phone Number: 830-609-0543

D. Public viewing location

If the facility is located in more than one county, a public viewing location for each county must be provided.

Public Building Name: Canyon Regional Water Authority

Physical Address of Building: 850 Lakeside Pass

City: New Braunfels County: Guadalupe

Phone Number: 830-609-0543

E. Bilingual Notice Requirement

For new, major amendment, and renewal applications. This information can be obtained by contacting the bilingual/ESL coordinator at the nearest elementary or middle school.

1. Is a bilingual education program required by the Texas Education Code at the nearest elementary or middle school to the facility or proposed facility?

   Yes ☐ No ☒

   (**If No**, alternative language notice publication is not required; skip to Section 10. Regulated Entity (Site) Information.)

2. Are the students who attend either the elementary school or the middle school enrolled in a bilingual education program at that school?
   Yes ☐ No ☒

3. Do the students at these schools attend a bilingual education program at another location?
   Yes ☐ No ☒

4. Would the school be required to provide a bilingual education program but the school has waived out of this requirement under 19 TAC §89.1205(g)?
   Yes ☐ No ☒

5. If the answer is yes to 1, 2, 3, or 4, public notice in an alternative language is required. Which language is required by the bilingual program? Click here to enter text.

F. Public Involvement Plan
Complete the Public Involvement Plan (PIP) Form (TCEQ-20960) for each application for a **new permit** or **major amendment to a permit** and include as an attachment.

Attachment Number: Click here to enter text.

SECTION 10. REGULATED ENTITY (SITE) INFORMATION

A. Site Name: Wells Ranch Water Treatment Plant

B. If this is an existing permitted site, provide the Regulated Entity Number (RN) issued to this site. RN 105446850

C. Site Address/Location:

Is the location of the application site used in the existing permit accurate?

☒ Yes ☐ No

If **YES**, skip to D. If **NO**, or if this application is for a new site, provide the physical address of the site such as: 12100 Park 35 Circle, Austin, TX 78753. If the site does not have a physical address, provide a location description such as: located on the north side of FM 123, 2 miles west of the intersection of FM 123 and Highway 1.

Click here to enter text.

D. County where the site is located: Guadalupe

E. Latitude: 29 Deg 27'09.25" Longitude: -97 Deg 49'22.05 West

F. Landowner Information:

Attach an additional sheet if more than one landowner.

Prefix (Mr., Ms., Miss): Click here to enter text.

First and Last Name: Click here to enter text.

Organization Name: Canyon Regional Water Authority

Mailing Address: 850 Lakeside Pass

City, State, and Zip Code: New Braunfels, Texas, 78130

Phone Number: 830-609-0543

G. County Judge

Provide the name of the county judge in each county where the site is located. Attach an additional sheet if more than one county.

Prefix (Mr., Ms., Miss): Mr.

First and Last Name: Kyle Kutscher

Mailing Address: 101 East Court Street

City, State, and Zip Code: Seguin, Texas, 78155

Phone Number: 830-303-8867

Name of County: Guadalupe

SECTION 11. LAND APPLICATION INFORMATION

A. Provide the anticipated date (MM/DD/YY) of the first application of biosolids after issuance or re-issuance of the permit. NOTE: This date must be at least 330 days after the date TCEQ receives this application. 2002

B. The application area is:

☐ within the city limit of: Click here to enter text.

☐ within the extraterritorial jurisdiction of: Click here to enter text.

☒ outside the extraterritorial jurisdiction of: Seguin

C. Types of Waste

Identify the types of waste that will be land applied at this site.

☐ Wastewater Treatment Plant Class B Biosolids

☒ Water Treatment Plant Residuals

☐ Domestic Septage

D. Sources of Biosolids or Residuals

Provide the sources of generation, any water quality or public water supply permit number issued by TCEQ, and the location of the sources. Complete Table 1 for each source identified below.

Facility Name	Permit Number	Location
Wells Ranch Water Treatment Plant	WQ0014872001	383 High Point Ridge, Seguin, Texas, 78155

E. Property Acreage

Total acreage of the entire property, including the application area and buffer zones: 31

F. Application Area Acreage

Total acreage where the biosolids may be applied, excluding the buffer zones: 31

SECTION 12. MISCELLANEOUS INFORMATION

A. Did any person who was formerly employed by the TCEQ represent your company and get paid for service regarding this application?

Yes ☐ No ☒

If yes, provide the name(s) of the former TCEQ employee(s): Click here to enter text.

B. Is the site located on Indian Lands?

Yes ☐ No ☒

C. Is any permanent school fund land affected by this application?

Yes ☐ No ☒

If yes, provide the location, forseeable impacts, and effects this application has on the land(s). Click here to enter text.

D. Delinquent Fees and Penalties:

Do you owe fees to the TCEQ? Yes ☐ No ☒

Do you owe any penalties to the TCEQ? Yes ☐ No ☒

If you answered yes to either of the above questions, provide the amount owed, the type of fee or penalty, and an identifying number. Click here to enter text.

SECTION 13. AFFECTED LANDOWNER INFORMATION

A. Landowner map. Attach a landowner map or drawing. See instructions for information that must be displayed on the map.

Attachment Number: Click here to enter text.

B. Landowner list. Attach a list of the landowners' names and mailing addresses. The list must be cross-referenced to the letter or number identified on the landowner map.

Attachment Number: Click here to enter text.

C. Landowner list media. Indicate the format of the landowners list.

☐ Read/Writeable CD

☐ 4 sets of mailing labels

D. Landowner data source. Provide the source of the landowners' names and mailing addresses. Guadalupe County Appraisal District

SECTION 14. INSURANCE INFORMATION

This information is not required for an applicant that is a political subdivision (e.g. city, county, state agency, water district, etc.).

A. Commercial Liability Insurance

Attach a copy of the certificate of insurance in regard to commercial liability.

Attachment Number: Attachment 9 - Insurance Certificate

B. Environmental Impairment Insurance

Attach a copy of the certificate of insurance in regard to environmental impairment.

Attachment Number: Click here to enter text.

SECTION 15. MAPS AND ATTACHMENTS

A. TCEQ Core Data Form

Complete and submit a TCEQ Core Data Form (TCEQ-10400).

Attachment Number: Attachment: 1 - Core Data Form

B. TCEQ Public Involvement Plan Form

Complete and submit a TCEQ Public Involvement Plan Form (TCEQ-20960) for new and major amendment applications.

Attachment Number: Click here to enter text.

C. General Highway (County) Map

Submit an ORIGINAL General Highway (County) Map. See instructions for information that must be displayed on the map.

Attachment Number: Attachment: 5 - Highway Map

D. United States Geological Survey (USGS) Topographic Map

Submit an ORIGINAL United States Geological Survey (USGS) Topographic Map (1:24,000 scale). See instructions for information that must be displayed on the map.

Attachment Number: Attachment: 2 - USGS Map

E. USDA-NRCS Soil Map

Submit a legible copy of a USDA-NRCS Soil Map. See instructions for information that must be displayed on the map.

Attachment Number: Attachment: 6 - Soil Map

F. Federal Emergency Management Agency (FEMA) Map

Submit a copy of the FEMA map that shows the approximate application area boundaries, the surrounding area within one-quarter mile of the application area, and the appropriate legend.

Attachment Number: Attachment: 7 - FEMA Map

G. Nutrient Management Plan

Attach a copy of the nutrient management plan that has been prepared by a certified nutrient management specialist, in accordance with the NRCS.

Attachment Number: Click here to enter text.

H. TCEQ Transporters Registration Approval Documents

Attach a copy of the TCEQ Transporters Registration approval documents.

Attachment Number: Click here to enter text.

I. Soil Analysis

Attach a copy of the soil laboratory analysis for the application area.

Attachment Number: Attachment: 11 - Soil Analysis

H. Biosolids or Residuals Analyses

Attach a laboratory analysis for each source.

Attachment Number: Click here to enter text.

I. Metal and Nutrient Concentrations (Table 1)

Use the laboratory analyses to complete Table 1 for each source.

J. Volume Weighted Averages of Metal and Nutrient Concentrations (Table 2)

If more than one source of biosolids or residuals are land applied, complete Table 2.

K. Agronomic Rate Calculations (Appendix A)

Determine the agronomic application rate by completing and attaching Appendix A.

L. Pathogen Reduction Options (Appendix B)

Identify the pathogen reduction options by completing and attaching Appendix B.

M. Vector Attraction Reduction Options (Appendix C)

Identify the vector attraction reduction options by completing and attaching Appendix C.

N. On-Site Storage (Appendix D)

If on-site storage will occur at this site, complete and attach Appendix D.

LABORATORY ACCREDITATION

All laboratory tests performed must meet the requirements of 30 TAC Chapter 25, *Environmental Testing Laboratory Accreditation and Certification*, unless the laboratory meets the following general exemptions from National Environmental Laboratory Accreditation Program (NELAP) certification requirements.

- The laboratory is an in-house laboratory and is:
  - periodically inspected by the TCEQ;
  - located in another state and is accredited or inspected by that state;
  - performing work for another company with a unit located in the same site; or
  - performing pro bono work for a governmental agency or charitable organization.
- The laboratory is accredited under federal law.
- The data are needed for emergency-response activities, and a laboratory accredited under the Texas Laboratory Accreditation Program is not available.
- The laboratory supplies data for which the TCEQ does not offer accreditation.

The applicant should review 30 TAC Chapter 25 for specific requirements. The following certification statement shall be signed and submitted with every application.

CERTIFICATION

I certify that all laboratory tests submitted with this application meet the requirements of 30 TAC Chapter 25, *Environmental Testing Laboratory Accreditation and Certification.*

Printed Name: Kerry Averyt, P.E.

Title: General Manager

Signature: _____ Date: 5-21-'25

SITE OPERATOR SIGNATURE PAGE

If co-applicants are necessary, each co-applicant must submit an original, separate signature page.

Permit Number: WQ0014872001

Applicant: Canyon Regional Water Authority

I understand that I am responsible for operating the site described in this permit application in accordance with the requirements in 30 TAC Chapter 312, the conditions set forth in this application, and any additional conditions as required by the Texas Commission on Environmental Quality.

I certify, under penalty of law, that all information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware there are significant penalties for submitting false information, including the possibility of fine, imprisonment for violations, and revocation of this permit.

I further certify that I am authorized under 30 Texas Administrative Code §305.44 to sign and submit this document, and can provide documentation in proof of such authorization upon request.

Signatory Name: Austin Shirk

Title: Wells Ranch Plant Manager

Signature (use blue ink): Austin Shirk Date: 5/21/2025

SUBSCRIBED AND SWORN to before me by the said Austin Shirk on this 21st day of May, 2025

My commission expires on the 11th day of July, 2027

Hanna Diaz

(Seal)

Notary Public

HANNA DIAZ
Notary Public, State of
mm. Expires

Guadalupe, TX

County, Texas

LANDOWNER SIGNATURE PAGE

Required if the landowner is not the applicant or co-applicant. Each landowner must submit an original, separate signature page.

Permit Number: Click here to enter text.

Applicant: Click here to enter text.

I certify, as the owner of the land described in this permit application, that I have all rights and covenants to authorize the applicant to use this site for the land application of _____ (*identify the type(s) of waste*). I understand that 30 TAC Chapter 312 requires me to make a reasonable effort to see that the applicant complies with the requirements in 30 TAC Chapter 312, the conditions set forth in this application, and any additional conditions as required by the TCEQ. I also certify, under penalty of law, that all 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, imprisonment for violations, and revocation of the permit.

Signatory Name: Click here to enter text.

Title: Click here to enter text.

Signature (use blue ink): _____Date: _____

SUBSCRIBED AND SWORN to before me by the said _____on

this_____day of_____, 20_____

My commission expires on the_____day of_____, 20_____

_____

(Seal) Notary Public

_____

County, Texas

Attachment 1
Individual Information

Complete this attachment if the applicant or co-applicant is an individual. Make additional copies of this attachment if both are individuals.

Prefix (Mr., Ms., Miss): Click here to enter text.

Full Legal Name, including middle name: Click here to enter text.

Driver's License or State Identification Number: Click here to enter text.

State that Issued the License or Identification Number: Click here to enter text.

Date of Birth: Click here to enter text.

Mailing Address: Click here to enter text.

City, State, and Zip Code: Click here to enter text.

Phone Number: Click here to enter text. Fax Number: Click here to enter text.

E-mail Address: Click here to enter text.

For TCEQ Use Only

Customer Number _____
Regulated Entity Number _____
Permit Number _____

TECHNICAL REPORT
FOR BENEFICIAL LAND USE OF CLASS B BIOSOLIDS

Note: The term "biosolids" also includes the combination of water treatment plant residuals with Class B Biosolids material.

SECTION 1. SITE HISTORY

Have biosolids or septage been previously land applied at this site?

☒ Yes ☐ No

If Yes, provide a short narrative on the agricultural practices previously used at the site. The narrative must discuss the following elements:

- crops grown;
- tillage practices;
- previous biosolids application amount (dry tons) and rates (dry tons per acre); and
- previous septage application amount (gallons) and rates (gallons per acre).

CRWA Wells Ranch pumps filter backwash water to two settling lagons.

SECTION 2. PROPOSED LAND APPLICATION ACTIVITIES

Provide a short narrative on the proposed land application activities at the site. The narrative must discuss the following elements:

- crops grown;
- planting dates;
- times per year applied;
- frequency of application; and
- tillage practices.

Settling Ponds

SECTION 3. SOIL INFORMATION

A. Soil Properties

Complete the table below using the Physical and Chemical Properties and the Engineering Tables found in the USDA Natural Resources Conservation Service (NRCS) soils descriptions.

Map Symbol	Soil Type	Slope	pH	Depth to Bedrock* (inches)	Depth to Groundwater (feet)	Permeability (inches/hour)	Soil Depth** (inches)

* If depth to bedrock is not specified in the soil survey, use the maximum depth shown.
** If soil depth is less than two feet, provide rationale for using these shallow soils. The rationale should include site specific investigation results.

B. Restrictive Soil Characteristics

In the table below, identify all soils that have the following restrictive characteristics and the management practices to be used.

- Soils with at least an "occasional flooding" classification may flood between 5 to 50 times in 100 years;
- Soil permeability of >6 inches per hour; and
- Seasonal groundwater or groundwater table below the treatment zone at least:
  - 3 feet for soil with permeability of <2 inches per hour
  - 4 feet for soil with permeability of 2-6 inches per hour.

Soil Type	Restrictive Characteristic	Best Management Practices

Soil Type	Restrictive Characteristic	Best Management Practices

SECTION 4. WELL INFORMATION

In the table below, provide information about each well located on-site and within 500 feet of the application area. Water well information is available from the Texas Water Development Board, 512-936-0837. Oil and gas well information is available from the Texas Railroad Commission, 512-463-6851.

Well Type (Water Well, Oil Well, Injection Well)	Producing or Non-Producing	Open, Cased, or Capped*	Protective Measures**

* Casing, capping, and plugging rules are located in 16 TAC Chapter 76.
** The following protective measures are required prior to initial biosolids/septage application:

- If the well is producing and cased, no action is needed.
- If the well is producing and not cased, the well must be cased or describe other protective measures.
- If the well is non-producing and cased, the well must be plugged or capped.
- If the well is non-producing and not cased, the well must be plugged.

SECTION 5. HYDROLOGIC CHARACTERISTICS

Submit information listed below, or equivalent documentation, regarding the hydrologic characteristics of the surface and groundwater at the application site and within one-quarter mile of the site.

- Aquifer identification per Texas Water Development Board Report 345
- Location of the area according to the Geologic Atlas of Texas, published by the University of Texas, Bureau of Economic Geology.
- Any feature that exhibits a direct hydrologic connection between surface and subsurface water.
- List periods of seasonal perched and/or high water table, if any.

Attachment Number: Click here to enter text.

Table 1
Pollutant and Nutrient Concentrations in Biosolids and Water Treatment Residuals (if applicable)

Complete this table **for each source** of biosolids and residuals.

Facility Name: Click here to enter text.

TCEQ Authorization Number: Click here to enter text.

POLLUTANT/METAL ANALYSIS

Pollutant	Maximum Concentration, mg/kg dry weight	Test Results, mg/kg dry weight	Sample Date	Detection Level for Analysis	Sample Method
Arsenic (As)	75				
Cadmium (Cd)	85				
Chromium (Cr)	3000				
Copper (Cu)	4300				
Lead (Pb)	840				
Mercury (Hg)	57				
Molybdenum (Mo)	75				
Nickel (Ni)	420				
Selenium (Se)	100				
Zinc (Zn)	7500				
PCB (ppm)	50.0 ppm				

NUTRIENT ANALYSIS

Nutrient	Concentration (%)	Sample Date	Detection Level for Analysis	Sample Method
Total Kjeldahl Nitrogen (TKN)				
Ammonium Nitrogen (NH_4-N)				
Nitrate Nitrogen (NO_3-N)				
Total Phosphorus (P)				
Total Potassium (K)				

TABLE 2
Volume Weighted Average (Mean) of Nutrient and Pollutant Concentration

Complete this table if more than one source is land applied at the site.

Directions:

1. For each pollutant, multiply the Pollutant Concentrations from Table 1 by the estimated number of dry tons you expect to apply from each facility.
2. Sum the individual columns. Enter results in last row of the table.
3. Divide the sum of each column by the dry tons sum (bottom of second column). Enter number in the appropriate Volume Weighted Average Box (row below table).
4. Use these final results to complete Appendix A, Step 1.

TCEQ Auth. Number	Est. Dry Tons*	As	Cd	Cr	Cu	Pb	Hg	Mo	Ni	Se	Zn	TKN	NH_4-N	NO_3-N	P	K
Sum																
Volume Weighted Average																

*Total estimated dry tons to be land applied from the source facility.

APPENDIX A
AGRONOMIC RATE CALCULATIONS

Note: The maximum allowable agronomic rate for land application of Class B Biosolids is 12 tons/acre/year.

APPENDIX A, PART 1. APPLICATION RATE

STEP 1. CALCULATE QUANTITY OF NUTRIENTS AND METALS IN BIOSOLIDS AND RESIDUALS IN LBS/TON

Nutrient	Concentration (%)**	Conversion Factor	Pounds per Ton
Total Kjeldahl Nitrogen (TKN)		x 20	
Ammonium Nitrogen (NH_4-N)		x 20	
Nitrate Nitrogen (NO_3-N)		x 20	
Total Phosphorus (P)		x 20	
Total Potassium (K)		x 20	

Pollutant	Test Results, mg/kg dry weight	Conversion Factor	Pounds per Ton
Total Arsenic (As)		x 0.002	
Total Cadmium (Cd)		x 0.002	
Total Chromium (Cr)		x 0.002	
Total Copper (Cu)		x 0.002	
Total Lead (Pb)		x 0.002	
Total Mercury (Hg)		x 0.002	
Total Molybdenum (Mo)		x 0.002	
Total Nickel (Ni)		x 0.002	
Total Selenium (Se)		x 0.002	
Total Zinc (Zn)		x 0.002	

**Values from laboratory analysis (dry weight only).

Conversions:

mg/kg ÷ 10,000 = %

ppm = mg/kg

STEP 2. CROPPING PLAN AND NUTRIENT NEEDS

Warm Season Intended Crop(s): Click here to enter text.

Yield Goal: Click here to enter text. Nitrogen Requirement, in lb/yr: Click here to enter text.

Cool Season Intended Crop(s): Click here to enter text.

Yield Goal: Click here to enter text. Nitrogen Requirement, in lb/yr: Click here to enter text.

Provide the data source for the nitrogen requirements above.

Click here to enter text.

Nitrogen needed by crop:

2A. Total Nitrogen Requirement* Click here to enter text.

2B. Nitrogen available in soil** Click here to enter text.

2C. Nitrogen amount still needed

Line 2A – Line 2B Click here to enter text.

*Line 2A = Sum of the nitrogen requirement for the specified yield goals for the warm season crop and cool season crop

**Line 2B = 2*NO_3-N (ppm)(in the 0-6" soil depth) + 6*NO_3- N(ppm)(in the 6-24" soil depth)

STEP 3. CALCULATE THE PLANT AVAILABLE NITROGEN (PAN) PROVIDED BY THE BIOSOLIDS AND RESIDUALS

Use the TKN, NH_4-N, and NO_3-N from Step 1.

Organic Nitrogen = TKN – (NH_4-N) – (NO_3-N) Click here to enter text.

Mineralization Rate (%) * Click here to enter text.

3A. Organic Nitrogen x Mineralization Rate Click here to enter text.

3B. Ammonium Nitrogen = (NH_4-N) x V Click here to enter text.

V = 0.5 if biosolids are left on soil surface

V = 1.0 if biosolids are worked into the soil

3C. Nitrate Nitrogen (NO_3-N) Click here to enter text.

3D. Total PAN = (Line 3A + Line3B + Line 3C)= Click here to enter text.

*Mineralization Rates:

Treatment Method	**Mineralization Rates**
Unstabilized Primary and Waste Activated Biosolids	40 %
Aerobically Digested Biosolids	30 %
Anaerobically Digested Biosolids	20 %
Composted Biosolids	10 %

STEP 4. CALCULATE MAXIMUM BIOSOLIDS APPLICATION RATES BASED ON CROP NITROGEN NEEDS (SAR_N)

4A. Nitrogen amount still needed (lbs/acre/year)

Enter amount from Step 2C. Click here to enter text.

4B. Total PAN (lbs/ton)

Enter amount from Step 3D. Click here to enter text.

4C. Biosolids Application Rate (BAR_N) (tons/acre/year)

Line 4A ÷ Line 4B Click here to enter text.

STEP 5. CALCULATE MAXIMUM APPLICATION RATE BASED ON METALS (SAR_M)

METAL	A Cumulative Metal Limits (lbs/ac)	B Max Loading Rate (lbs/ac/yr)	C Metals In Biosolids (lbs/ton) (Step 1)	D Metals Applied Yearly at $\underline{BAR_N}$ (lbs/acre/yr) (C x SAR_N)	E Biosolids Applied Yearly at $\underline{BAR_M}$ (tons/acre/yr) (B ÷ C)	F Max Loading Rate (tons/acre) (A ÷ C)
Arsenic	36	1.8				
Cadmium	35	1.7				
Chromium	2677	134				
Copper	1339	67				
Lead	268	13				
Mercury	15	0.76				
Molybdenum	Monitor	Monitor				
Nickel	375	18.7				
Selenium	89	4.5				
Zinc	2500	125				
Other						

Note: For each metal, if the value in column B is greater than the value in column D (B>D), the BAR_N dictates the maximum biosolids application rate. Enter N/A in column E. If the value in column B is less than the value in column D (B<D), then the BAR_M dictates the maximum biosolids application rate and the value of E = B ÷ C.

STEP 6. CALCULATE THE CUMULATIVE LOADING RATE

6A. Maximum allowable cumulative biosolids loading rate

Lowest value in Step 5, Column F (tons/acre) Click here to enter text.

6B. Previous applications of biosolids (tons/acre) Click here to enter text.

6C. Remaining biosolids application rate to reach metal limits

Line 6A – Line 6B (tons/acre) Click here to enter text.

6D. Maximum allowable biosolids application rate

Lowest value of Step 4C and Step 5, Column E (tons/acre/year)

Click here to enter text.

6E. Years remaining to reach the maximum cumulative loading

Line 6C ÷ Line 6D (years) Click here to enter text.

APPENDIX A, PART 2: SEPTAGE APPLICATION RATE

Complete Part 2 and 3 if sewage and septage are both applied at the site.

STEP 1. CROPPING PLAN AND NUTRIENT NEEDS

Warm Season Intended Crop(s): Click here to enter text.

Yield Goal: Click here to enter text. Nitrogen Requirement, in lb/yr: Click here to enter text.

Cool Season Intended Crop(s): Click here to enter text.

Yield Goal: Click here to enter text. Nitrogen Requirement, in lb/yr: Click here to enter text.

Provide the data source for the nitrogen requirements.

Click here to enter text.

Nitrogen needed by crop:

1A. Total Nitrogen Requirement* Click here to enter text.

1B. Nitrogen available in soil** Click here to enter text.

1C. Nitrogen amount still needed

Line A - Line B Click here to enter text.

*Line 1A = Sum of the nitrogen requirement for the specified yield goals for the warm season crop and cool season crop

**Line 1B = 2*NO_3-N (ppm)(in the 0-6" soil depth) + 6*NO_3- N(ppm)(in the 6-24" soil depth)

STEP 2. CALCULATE ANNUAL APPLICATION RATE

The annual application rate is based on the nitrogen needs of the crop. It is calculated using the following equation:

AAR = N ÷ 0.0026

AAR = Annual application rate, in gallons per acre per 365 day period.

N = Nitrogen amount still needed for the crop, in pounds per acre per 365 day period.

2A. Enter amount from Step 1C Click here to enter text.

2B. Conversion Factor 0.0026

2C. Annual Application Rate (gal/acre/yr)

Line 2A ÷ Line 2B Click here to enter text.

APPENDIX A, PART 3: PROPORTIONATE AGRONOMIC RATE

Complete if both sewage and septage are applied in the same year.

Biosolids:

A. Biosolids Application Rate (tons/acre/year) Click here to enter text.

B. Percentage of plant nutrient supplied by the biosolids

= Click here to enter text. ÷ 100 Click here to enter text.

C. Multiple Line A by Line B (tons/acre/year) Click here to enter text.

Domestic Septage:

A. Biosolids Application Rate (tons/acre/year) Click here to enter text.

B. Percentage of plant nutrient supplied by the biosolids

= Click here to enter text. ÷ 100 Click here to enter text.

C. Multiple Line A by Line B (tons/acre/year) Click here to enter text.

APPENDIX B
PATHOGEN REDUCTION REQUIREMENTS

For each source, select the pathogen reduction alternative that will be used prior to land application of biosolids septage. Requirements for each alternative can be found in 30 TAC §312.82.

TCEQ Permit Number	Pathogen Reduction Alternative Used	Fecal Coliform Geometric Mean (cfu/gram total solids)*	Fecal Test Date*	Is PSRP Certification Attached?** (Yes/No/NA)
Example WQ11280-001	Option 1: Density of Fecal Coliform	300,000 cfu/g	12/2/98	NA
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			
	Choose an item.			

*Applicable to Option 1 only.
**Applicable to Option 2a – f.

If Other is selected as the Alternative Used, please explain: Click here to enter text.

APPENDIX C
VECTOR ATTRACTION REDUCTION REQUIREMENTS

For each source, provide the vector attraction reduction option that will be used prior to or after land application of biosolids/septage. Requirements for each alternative can be found in 30 TAC §312.83.

TCEQ Permit Number	Vector Attraction Reduction Alternative Used*	Monitoring Criteria and results needed for alternative
Example WQ11280-001	Option 10: Incorporate within 6 hrs	Visual inspection of area after tilling
Example WQ13450-003	Option 4: SOUR <=1.5 mg 02/hr/g total solids at 20C (<2% solids)	Aerobically digested, 2.0% solids, SOUR=1.3 mg/g
	Choose an item.	
	Choose an item.	
	Choose an item.	
	Choose an item.	
	Choose an item.	
	Choose an item.	
	Choose an item.	
	Choose an item.	
	Choose an item.	

*Options 1-8 are Class B biosolids treatment alternatives. Options 9-10 are onsite alternatives. Option 12 is for domestic septage only.

APPENDIX D
ON-SITE STORAGE

If on-site storage will occur at the site, this Appendix must be completed in its entirety. On-site storage does not include staging of biosolids or septage for up to seven (7) days prior to applying it. On-site storage cannot exceed the 90-day maximum per 30 TAC §312.50 unless properly authorized for each instance. Construction of the storage area cannot begin until written authorization for this action is received from the TCEQ. Materials cannot be treated without proper authorization from the TCEQ.

A. Provide a complete description of operational plans for the temporary storage, including all steps to be taken to control odors, vectors and other nuisance conditions.
Click here to enter text.

B. The location of the temporary storage area(s) must be accurately shown on the USGS topographic map submitted with the application, including all main features of the storage area(s) (e.g. berms, tanks, pads, liners, storm water retention, etc.).

C. Provide a copy of the liner and storage tank certification as per 30 TAC §312.50(a)(4) or 312.50(a)(8).

Attachment Number: Click here to enter text.

D. Describe the proposed spill prevention and cleanup methods.
Click here to enter text.

E. Provide a certification that the berm(s) will hold the required volume(s) without discharging as per 30 TAC §312.50 (a)(7).

Attachment Number: Click here to enter text.

F. Describe the method for stormwater runoff collection and disposal.
Click here to enter text.

G. Describe methods to be used to ensure no loads of biosolids remain at the temporary storage site for longer than 90 days, including how exceptions to this restriction will be requested (as provided by 30 TAC §312.50), when needed.
Click here to enter text.

Canyon Regional Water Authority
Wells Ranch Water Treatment Plan

ATTACHMENTS

ATTACHMENT: 1
CORE DATA FORM

TCEQ Use Only

TCEQ Core Data Form

For detailed instructions on completing this form, please read the Core Data Form Instructions or call 512-239-5175.

SECTION I: General Information

1. Reason for Submission *(If other is checked please describe in space provided.)*

☐ New Permit, Registration or Authorization *(Core Data Form should be submitted with the program application.)*

☒ Renewal *(Core Data Form should be submitted with the renewal form)* ☐ Other

2. Customer Reference Number *(if issued)*	Follow this link to search for CN or RN numbers in Central Registry**	3. Regulated Entity Reference Number *(if issued)*
CN 605179324		RN 105446850

SECTION II: Customer Information

4. General Customer Information	5. Effective Date for Customer Information Updates (mm/dd/yyyy)	105446850

☐ New Customer ☐ Update to Customer Information ☐ Change in Regulated Entity Ownership
☐ Change in Legal Name (Verifiable with the Texas Secretary of State or Texas Comptroller of Public Accounts)

The Customer Name submitted here may be updated automatically based on what is current and active with the Texas Secretary of State (SOS) or Texas Comptroller of Public Accounts (CPA).

6. Customer Legal Name *(If an individual, print last name first: eg: Doe, John)*	*If new Customer, enter previous Customer below:*
Canyon Regional Water Authority	

7. TX SOS/CPA Filing Number	8. TX State Tax ID (11 digits)	9. Federal Tax ID (9 digits)	10. DUNS Number *(if applicable)*
	17425860636	74-2586063	807722707

11. Type of Customer: ☐ Corporation ☐ Individual Partnership: ☐ General ☐ Limited
Government: ☐ City ☐ County ☐ Federal ☐ Local ☐ State ☒ Other ☐ Sole Proprietorship ☐ Other:

12. Number of Employees
☐ 0-20 ☒ 21-100 ☐ 101-250 ☐ 251-500 ☐ 501 and higher

13. Independently Owned and Operated?
☒ Yes ☐ No

14. Customer Role (Proposed or Actual) – *as it relates to the Regulated Entity listed on this form. Please check one of the following*

☐ Owner ☐ Operator ☒ Owner & Operator
☐ Occupational Licensee ☐ Responsible Party ☐ VCP/BSA Applicant ☐ Other:

15. Mailing Address:								
	Canyon Regional Water Authority							
	850 Lakeside Pass							
	City	New Braunfels	**State**	TX	**ZIP**	78130	**ZIP + 4**	

16. Country Mailing Information *(if outside USA)*	17. E-Mail Address *(if applicable)*
	crwa@crwa.com

18. Telephone Number	19. Extension or Code	20. Fax Number *(if applicable)*
(830) 609-0543		(830) 609-0740

SECTION III: Regulated Entity Information

21. General Regulated Entity Information *(If 'New Regulated Entity" is selected, a new permit application is also required.)*

☐ New Regulated Entity ☐ Update to Regulated Entity Name ☐ Update to Regulated Entity Information

The Regulated Entity Name submitted may be updated, in order to meet TCEQ Core Data Standards (removal of organizational endings such as Inc, LP, or LLC).

22. Regulated Entity Name *(Enter name of the site where the regulated action is taking place.)*

Wells Ranch Water Treatment Plant

23. Street Address of the Regulated Entity: *(No PO Boxes)*								
	383 High Point Ridge							
	City	Seguin	**State**	TX	**ZIP**	78155	**ZIP + 4**	
24. County	Guadalupe							

If no Street Address is provided, fields 25-28 are required.

25. Description to Physical Location:					
26. Nearest City			**State**		**Nearest ZIP Code**

Latitude/Longitude are required and may be added/updated to meet TCEQ Core Data Standards. (Geocoding of the Physical Address may be used to supply coordinates where none have been provided or to gain accuracy).

27. Latitude (N) In Decimal:	29.452569		**28. Longitude (W) In Decimal:**	-97.822792	
Degrees	Minutes	Seconds	Degrees	Minutes	Seconds
29	27	9.25	-97	49	22.05

29. Primary SIC Code (4 digits)	**30. Secondary SIC Code** (4 digits)	**31. Primary NAICS Code** (5 or 6 digits)	**32. Secondary NAICS Code** (5 or 6 digits)
4941		221310	

33. What is the Primary Business of this entity? *(Do not repeat the SIC or NAICS description.)*

Drinking Water Treatment Plant

34. Mailing Address:	**Canyon Regional Water Authority**							
	850 Lakeside Pass							
	City	**Seguin**	**State**	**TX**	**ZIP**	**78155**	**ZIP + 4**	
35. E-Mail Address:	**crwa@crwa.com**							

36. Telephone Number	**37. Extension or Code**	**38. Fax Number** *(if applicable)*
(830) 609-543		**(830) 609-740**

39. TCEQ Programs and ID Numbers Check all Programs and write in the permits/registration numbers that will be affected by the updates submitted on this form. See the Core Data Form instructions for additional guidance.

☐ Dam Safety	☐ Districts	☐ Edwards Aquifer	☐ Emissions Inventory Air	☐ Industrial Hazardous Waste
☐ Municipal Solid Waste	☐ New Source Review Air	☐ OSSF	☐ Petroleum Storage Tank	☐ PWS
☒ Sludge	☐ Storm Water	☐ Title V Air	☐ Tires	☐ Used Oil
WQ0014872001				
☐ Voluntary Cleanup	☒ Wastewater	☐ Wastewater Agriculture	☐ Water Rights	☐ Other:
	WQ0014872001			

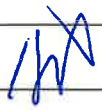
SECTION IV: Preparer Information

40. Name:	Adam Telfer	**41. Title:**	Compliance Manager

42. Telephone Number	**43. Ext./Code**	**44. Fax Number**	**45. E-Mail Address**
(830) 609-0543		(830) 609-0740	adam@crwa.com

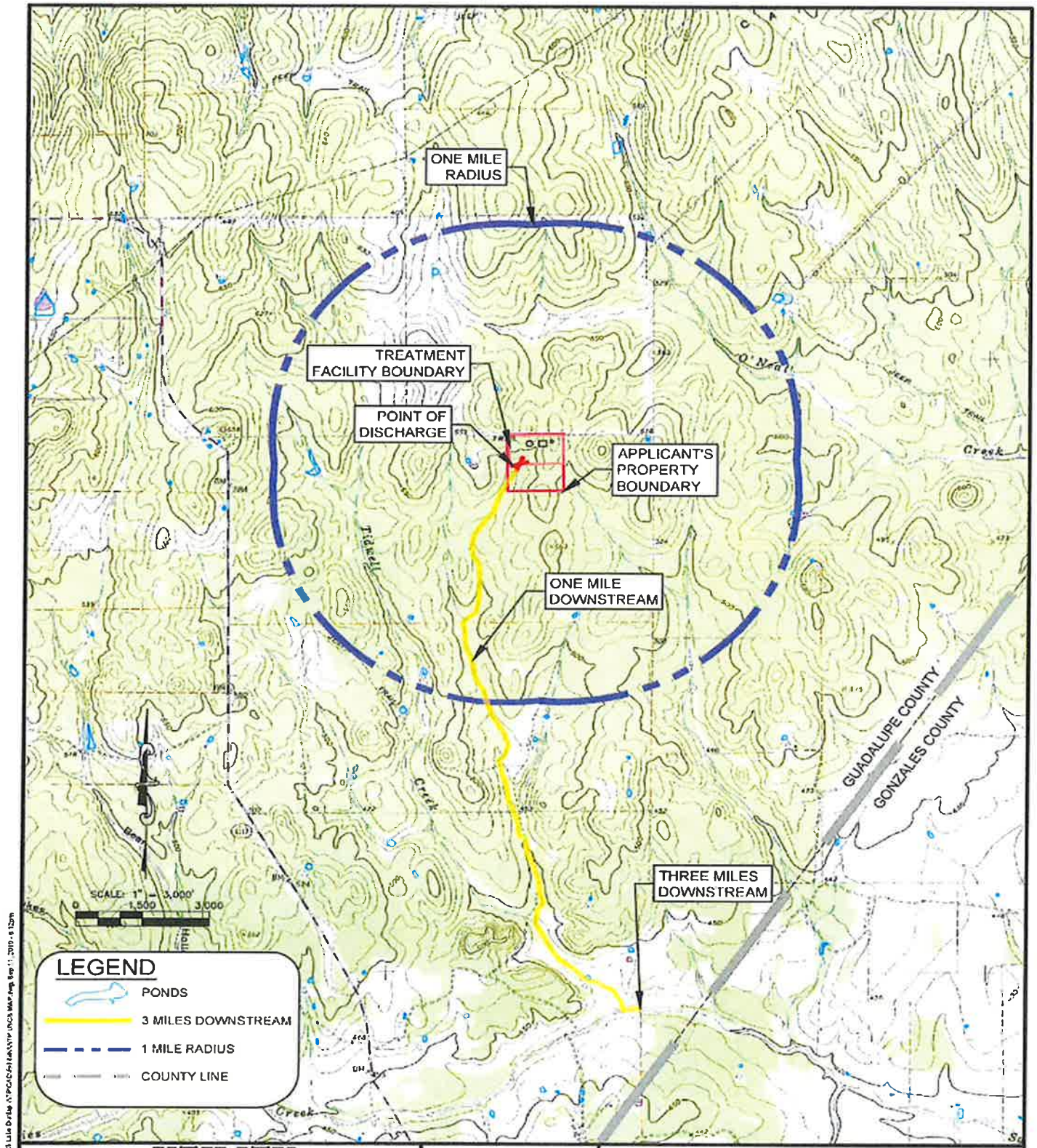
SECTION V: Authorized Signature

46. By my signature below, I certify, to the best of my knowledge, that the information provided in this form is true and complete, and that I have signature authority to submit this form on behalf of the entity specified in Section II, Field 6 and/or as required for the updates to the ID numbers identified in field 39.

Company:	Canyon Regional Water Authority	**Job Title:**	General Manager
Name *(In Print):*	Kerry Averyt, P.E.	**Phone:**	(830) 609- **543**
Signature:		**Date:**	5-21-25

ATTACHMENT: 2
USGS MAP

Attachment: 2 – USGS Map



UTILITY ENGINEERING GROUP PLLC
Texas Engineering Firm F-18712

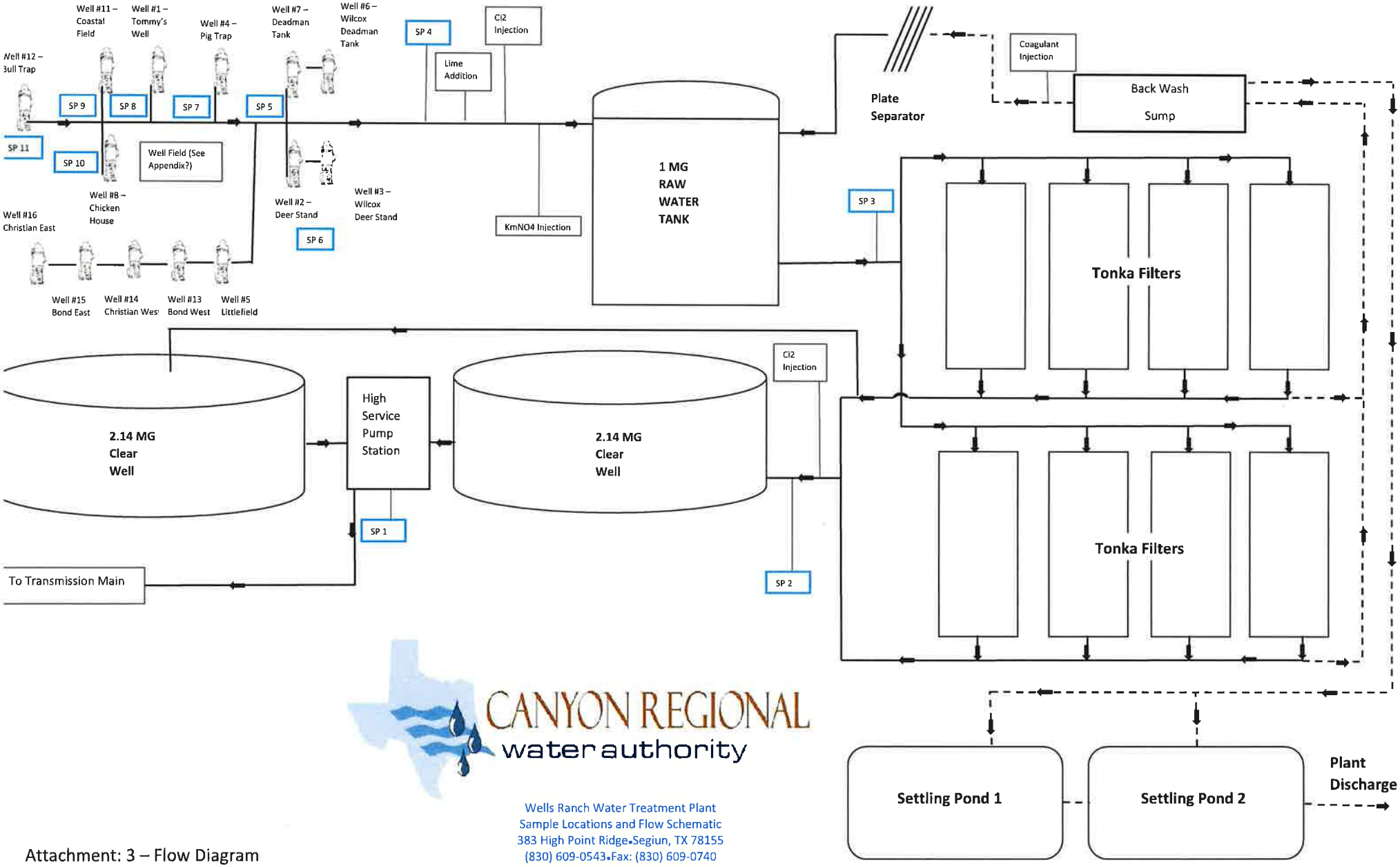
SCALE:	
DATE:	11 September, 2019
PROJECT NO:	
DESIGNED BY:	
DRAWN BY:	
CHECKED BY:	

CANYON REGIONAL WATER AUTHORITY

WELLS RANCH WATER TREATMENT PLANT
USGS MAP

SHEET: 01

ATTACHMENT: 3
FLOW DIAGRAM



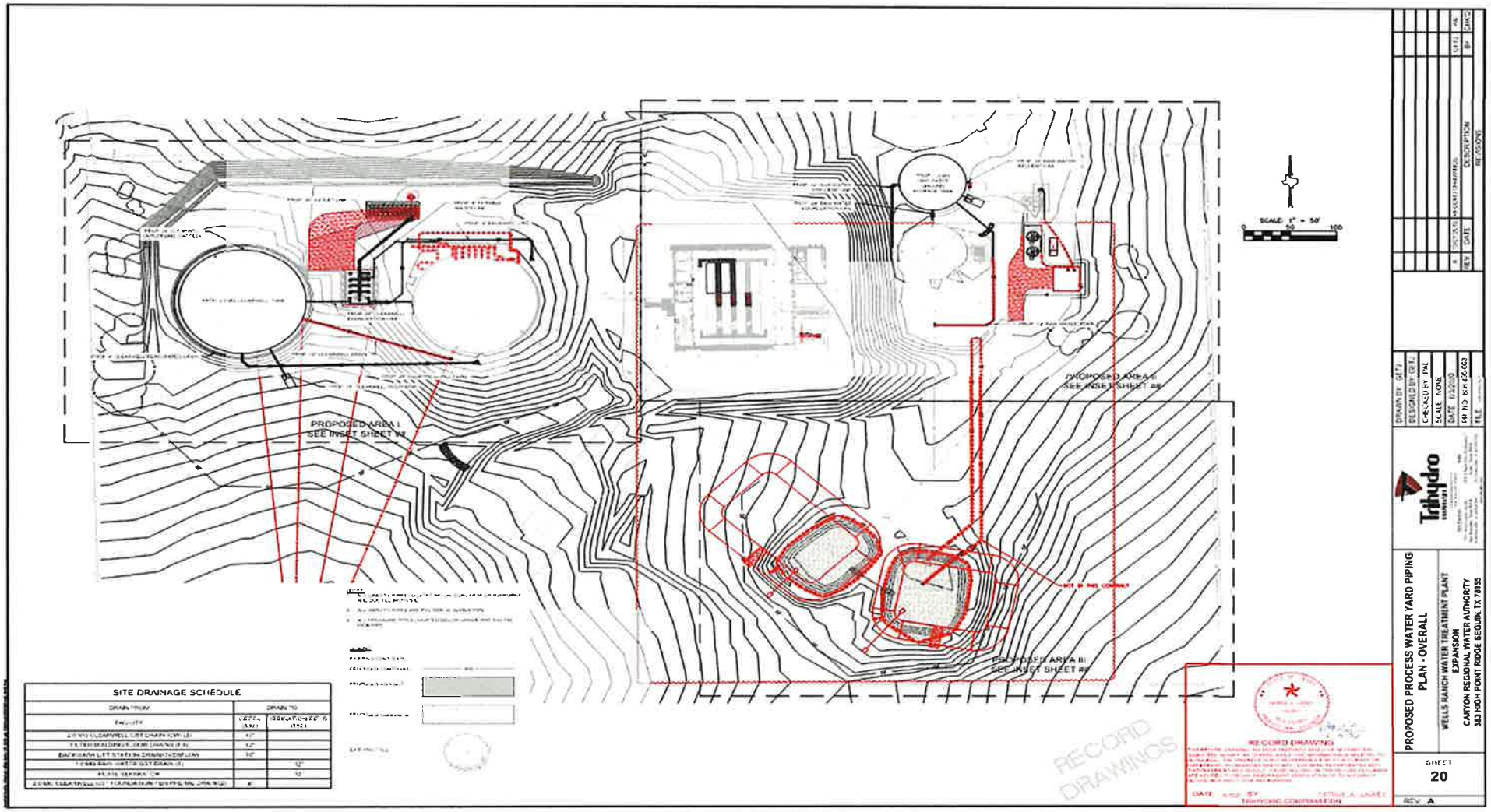
CANYON REGIONAL water authority

Wells Ranch Water Treatment Plant
Sample Locations and Flow Schematic
383 High Point Ridge•Segiun, TX 78155
(830) 609-0543•Fax: (830) 609-0740
email: crwa@crwa.com

Attachment: 3 – Flow Diagram

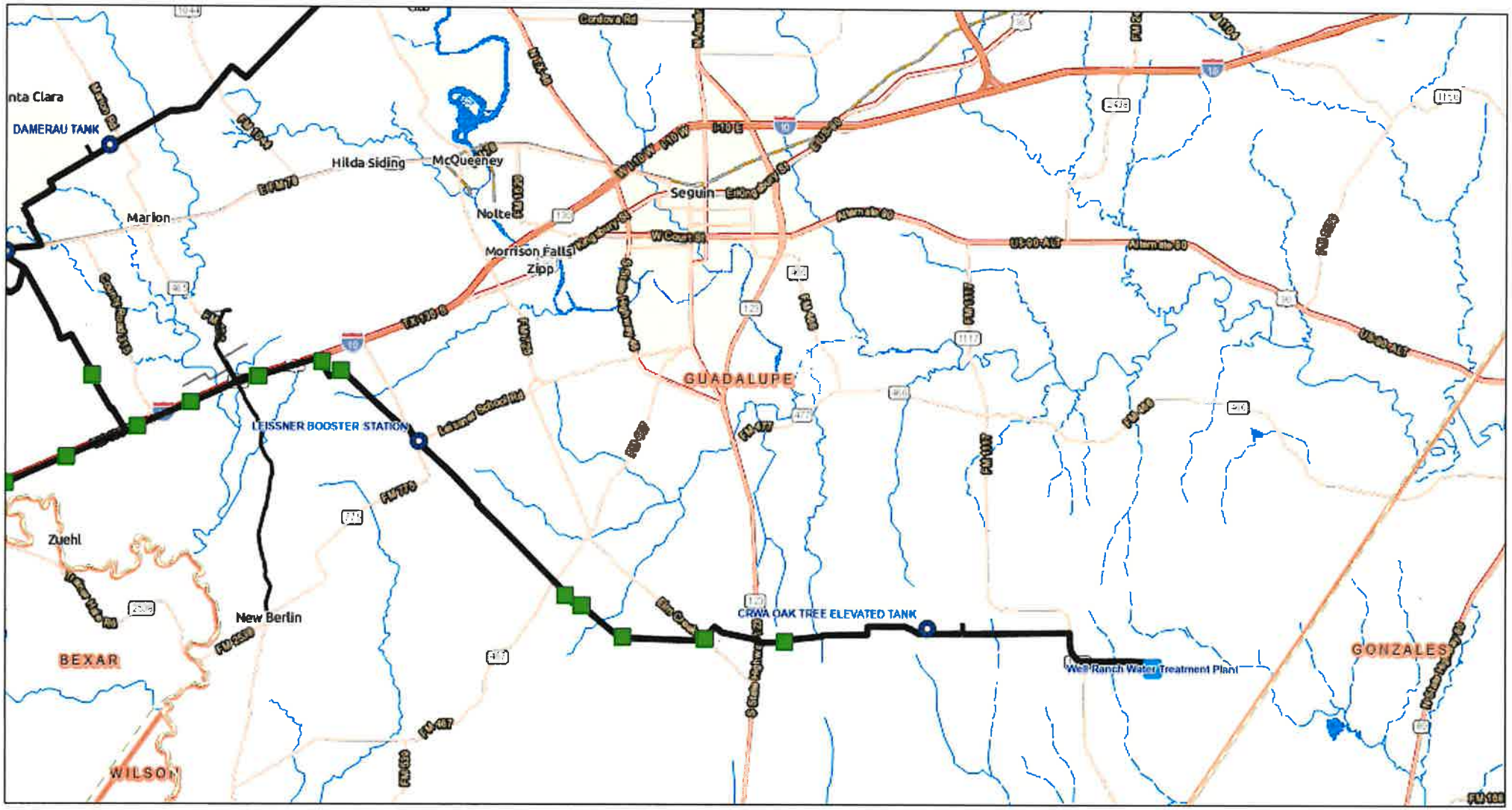
ATTACHMENT: 4
SITE MAP

Attachment: 4 – Wells Ranch WTP Site Map



ATTACHMENT: 5
HIGHWAY MAP

Attachment: 5 - Highway Map



5/19/2025, 9:19:52 AM

1:131,533

- CRWA Vaults
- Facilities
- Water Treatment Plants
- 6" Water
- 8" Water
- 12" Water
- 16" Water
- 24" Water
- 30" Water
- All Water Lines
- Boundary
- Boundary
- Boundary
- Boundary
- Counties
- World_Transportation

0 1.25 2.5 5 mi

0 2.25 4.5 9 km

Jackson, Esri, HERE, Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, (c) OpenStreetMap contributors, and the GIS User Community, Sources: Esri, TomTom, Garmin, FAO, NOAA, USGS, © OpenStreetMap contributors, and the GIS User Community

ATTACHMENT: 6
SOIL SURVEY

Map Unit Description

The map units delineated on the detailed soil maps in a soil survey represent the soils or miscellaneous areas in the survey area. The map unit descriptions in this report, along with the maps, can be used to determine the composition and properties of a unit.

A map unit delineation on a soil map represents an area dominated by one or more major kinds of soil or miscellaneous areas. A map unit is identified and named according to the taxonomic classification of the dominant soils. Within a taxonomic class there are precisely defined limits for the properties of the soils. On the landscape, however, the soils are natural phenomena, and they have the characteristic variability of all natural phenomena. Thus, the range of some observed properties may extend beyond the limits defined for a taxonomic class. Areas of soils of a single taxonomic class rarely, if ever, can be mapped without including areas of other taxonomic classes. Consequently, every map unit is made up of the soils or miscellaneous areas for which it is named, soils that are similar to the named components, and some minor components that differ in use and management from the major soils.

Most of the soils similar to the major components have properties similar to those of the dominant soil or soils in the map unit, and thus they do not affect use and management. These are called noncontrasting, or similar, components. They may or may not be mentioned in a particular map unit description. Some minor components, however, have properties and behavior characteristics divergent enough to affect use or to require different management. These are called contrasting, or dissimilar, components. They generally are in small areas and could not be mapped separately because of the scale used. Some small areas of strongly contrasting soils or miscellaneous areas are identified by a special symbol on the maps. If included in the database for a given area, the contrasting minor components are identified in the map unit descriptions along with some characteristics of each. A few areas of minor components may not have been observed, and consequently they are not mentioned in the descriptions, especially where the pattern was so complex that it was impractical to make enough observations to identify all the soils and miscellaneous areas on the landscape.

The presence of minor components in a map unit in no way diminishes the usefulness or accuracy of the data. The objective of mapping is not to delineate pure taxonomic classes but rather to separate the landscape into landforms or landform segments that have similar use and management requirements. The delineation of such segments on the map provides sufficient information for the development of resource plans. If intensive use of small areas is planned, however, onsite investigation is needed to define and locate the soils and miscellaneous areas.

An identifying symbol precedes the map unit name in the map unit descriptions. Each description includes general facts about the unit and gives important soil properties and qualities.

Soils that have profiles that are almost alike make up a *soil series*. All the soils of a series have major horizons that are similar in composition, thickness, and arrangement. Soils of a given series can differ in texture of the surface layer, slope, stoniness, salinity, degree of erosion, and other characteristics that affect their use. On the basis of such differences, a soil series is divided into *soil phases*. Most of the areas shown on the detailed soil maps are phases of soil series. The name of a soil phase commonly indicates a feature that affects use or management. For example, Alpha silt loam, 0 to 2 percent slopes, is a phase of the Alpha series.

Some map units are made up of two or more major soils or miscellaneous areas. These map units are complexes, associations, or undifferentiated groups.

A *complex* consists of two or more soils or miscellaneous areas in such an intricate pattern or in such small areas that they cannot be shown separately on the maps. The pattern and proportion of the soils or miscellaneous areas are somewhat similar in all areas. Alpha-Beta complex, 0 to 6 percent slopes, is an example.

An *association* is made up of two or more geographically associated soils or miscellaneous areas that are shown as one unit on the maps. Because of present or anticipated uses of the map units in the survey area, it was not considered practical or necessary to map the soils or miscellaneous areas separately. The pattern and relative proportion of the soils or miscellaneous areas are somewhat similar. Alpha-Beta association, 0 to 2 percent slopes, is an example.

An *undifferentiated group* is made up of two or more soils or miscellaneous areas that could be mapped individually but are mapped as one unit because similar interpretations can be made for use and management. The pattern and proportion of the soils or miscellaneous areas in a mapped area are not uniform. An area can be made up of only one of the major soils or miscellaneous areas, or it can be made up of all of them. Alpha and Beta soils, 0 to 2 percent slopes, is an example.

Some surveys include *miscellaneous areas*. Such areas have little or no soil material and support little or no vegetation. Rock outcrop is an example.

Additional information about the map units described in this report is available in other soil reports, which give properties of the soils and the limitations, capabilities, and potentials for many uses. Also, the narratives that accompany the soil reports define some of the properties included in the map unit descriptions.

Guadalupe County, Texas

PaD—Patilo and Arenosa soils, 1 to 8 percent slopes

Map Unit Setting

National map unit symbol: d9rh
Elevation: 400 to 1,500 feet
Mean annual precipitation: 24 to 40 inches
Mean annual air temperature: 64 to 70 degrees F
Frost-free period: 220 to 275 days

Farmland classification: Not prime farmland

Map Unit Composition

Patilo and similar soils: 49 percent
Arenosa and similar soils: 29 percent
Minor components: 22 percent
Estimates are based on observations, descriptions, and transects of the mapunit.

Description of Patilo

Setting

Landform: Ridges
Landform position (two-dimensional): Summit, backslope
Landform position (three-dimensional): Interfluve, side slope
Down-slope shape: Linear
Across-slope shape: Convex
Parent material: Residuum weathered from eocene sandstones of carrizo, queen city, simsboro and sparta formations

Typical profile

H1 - 0 to 8 inches: fine sand
H2 - 8 to 52 inches: fine sand
H3 - 52 to 84 inches: sandy clay loam

Properties and qualities

Slope: 1 to 8 percent
Depth to restrictive feature: More than 80 inches
Drainage class: Moderately well drained
Runoff class: Very low
Capacity of the most limiting layer to transmit water (Ksat): Moderately high (0.20 to 0.57 in/hr)
Depth to water table: About 48 to 72 inches
Frequency of flooding: None
Frequency of ponding: None
Maximum salinity: Nonsaline to very slightly saline (0.0 to 2.0 mmhos/cm)
Available water supply, 0 to 60 inches: Low (about 5.3 inches)

Interpretive groups

Land capability classification (irrigated): 3s
Land capability classification (nonirrigated): 3s
Hydrologic Soil Group: A
Ecological site: R087AY007TX - Deep Sand
Hydric soil rating: No

Description of Arenosa

Setting

Landform: Ridges
Landform position (two-dimensional): Summit, shoulder
Landform position (three-dimensional): Interfluve
Down-slope shape: Linear
Across-slope shape: Convex

Parent material: Residuum weathered from eocene age sandstones in the carrizo, queen city and sparta formations

Typical profile

H1 - 0 to 5 inches: fine sand
H2 - 5 to 96 inches: fine sand

Properties and qualities

Slope: 1 to 8 percent
Depth to restrictive feature: More than 80 inches
Drainage class: Somewhat excessively drained
Runoff class: Very low
Capacity of the most limiting layer to transmit water (Ksat): High to very high (5.95 to 19.98 in/hr)
Depth to water table: More than 80 inches
Frequency of flooding: None
Frequency of ponding: None
Maximum salinity: Nonsaline to very slightly saline (0.0 to 2.0 mmhos/cm)
Available water supply, 0 to 60 inches: Low (about 3.1 inches)

Interpretive groups

Land capability classification (irrigated): None specified
Land capability classification (nonirrigated): 4s
Hydrologic Soil Group: A
Ecological site: R087AY007TX - Deep Sand
Hydric soil rating: No

Minor Components

Unnamed

Percent of map unit: 15 percent
Hydric soil rating: No

Unnamed

Percent of map unit: 7 percent
Hydric soil rating: No

Data Source Information

Soil Survey Area: Guadalupe County, Texas
Survey Area Data: Version 20, Aug 30, 2024

ATTACHMENT: 7
FEMA MAP

Attachment: 7 - FEMA Map

5/19/2025, 10:00:41 AM

1:78,920

- CRWA Vaults
- Facilities
- Water Treatment Plants
- 6" Water
- 12" Water
- 16" Water
- 30" Water
- All Water Lines
- Boundary
- As-Builts
- All Water Lines
- Well 1 Acre Boundaries

Flood Hazard Zones

- 1% Annual Chance Flood Hazard
- Regulatory Floodway
- 0.2% Annual Chance Flood Hazard
- Water Areas
- World_Transportation
- World Imagery
- Low Resolution 15m Imagery
- High Resolution 60cm Imagery
- High Resolution 30cm Imagery
- Citations
- 19m Resolution Metadata

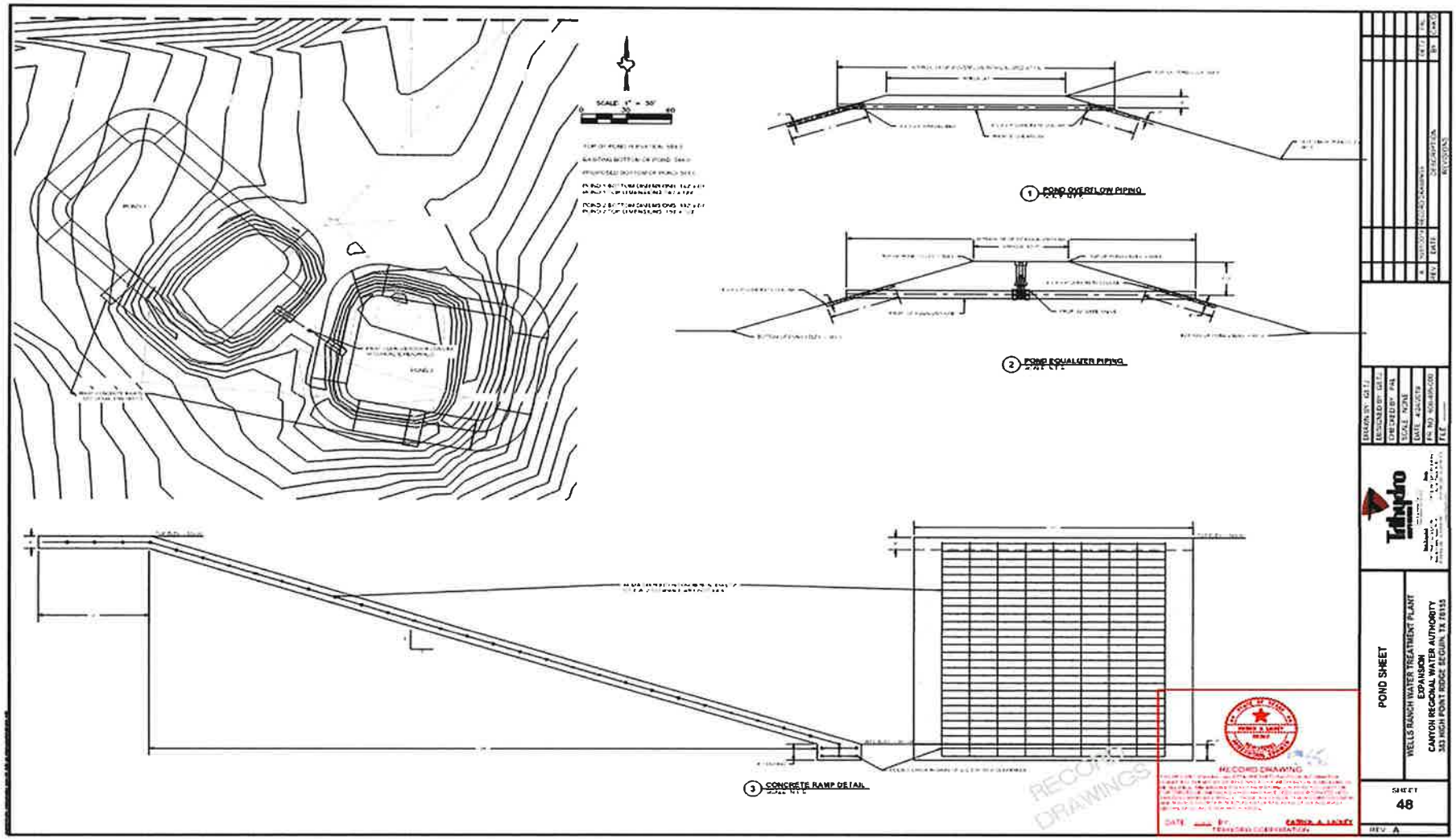
0 0.75 1.5 3 mi

0 1.25 2.5 5 km

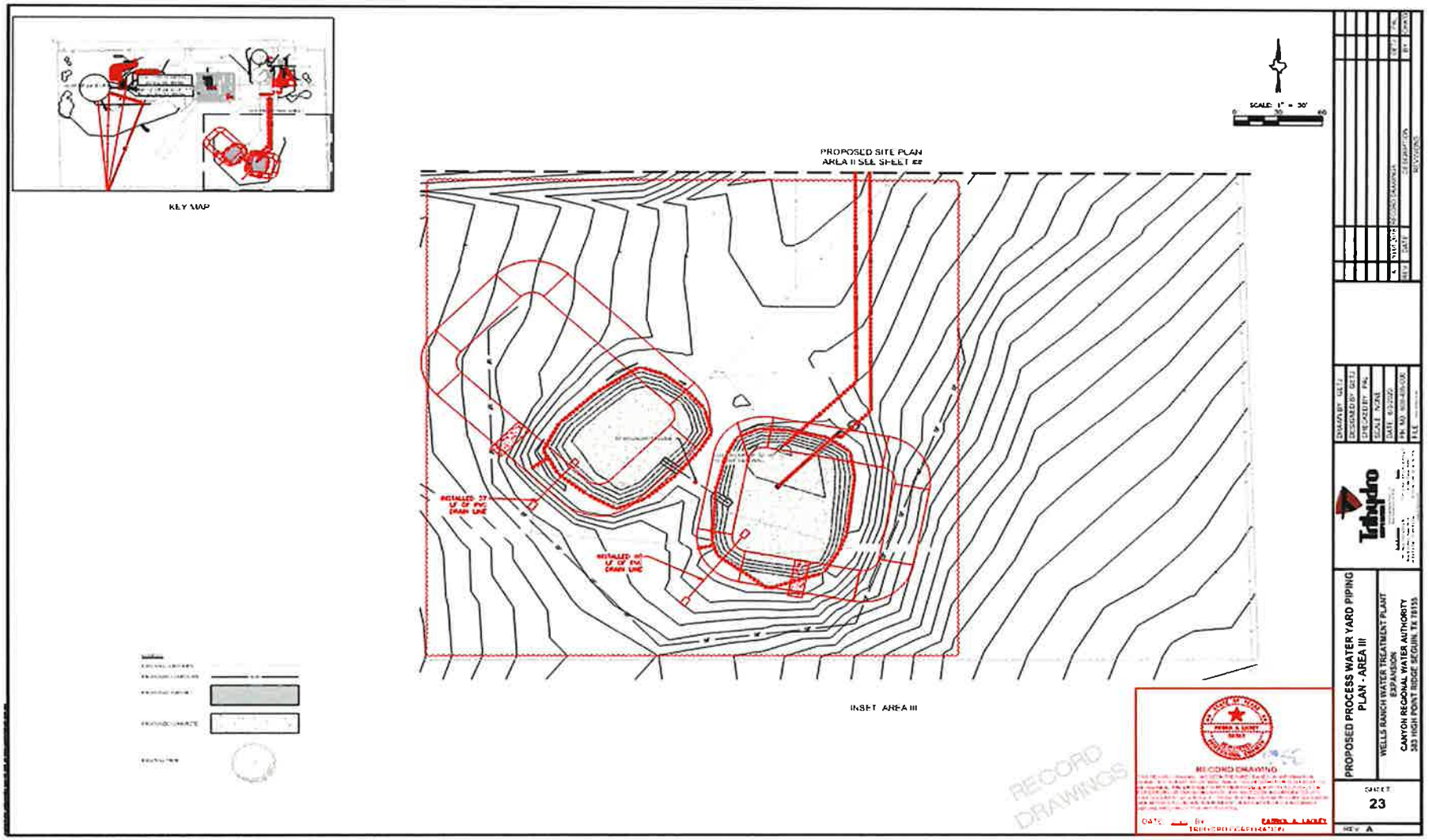
Esri, HERE, Earthstar Geographics, KFWGIS, SGarza

ATTACHMENT: 8
POND DIAGRAM

Attachment: 8 – Pond Diagram (1)



Attachment: 8 – Pond Diagram (2)



ATTACHMENT: 9
INSURANCE
DECLARATION
OF COVERAGE

LIABILITY DECLARATIONS OF COVERAGE

Member Name:	Canyon Regional Water Authority
Member ID:	7814
Contract Type:	Liability
Coverage Period:	10/01/2024 to 10/01/2025

GENERAL LIABILITY

Limits of Liability	: $	5,000,000	Each Occurrence	
Sudden Events Involving Pollution	: $	2,000,000	Each Occurrence	
	$	10,000,000	Annual Aggregate	
Deductible	: $	5,000	Each Occurrence	
			Effective:	10/01/2024
Billable Contribution	: $	3,172	Anniversary:	10/01/2025

LAW ENFORCEMENT LIABILITY

**** Coverage Not Selected ****

ERRORS & OMISSIONS LIABILITY

Limits of Liability	: $	5,000,000	Each Wrongful Act	
	: $	10,000,000	Annual Aggregate	
Deductible	: $	5,000	Each Wrongful Act	
			Effective:	10/01/2024
Billable Contribution	: $	2,410	Anniversary:	10/01/2025

TOTAL CONTRIBUTION

Total Billable Contribution	: $	5,582	Contract Effective:	10/01/2024
			Contract Anniversary:	10/01/2025

Coverage is continuous until cancelled. Contributions are subject to adjustment each year on the anniversary date based on updated exposure information and changes in rating.

AUTOMOBILE DECLARATIONS OF COVERAGE

Member Name:	Canyon Regional Water Authority
Member ID:	7814
Contract Type:	Liability
Coverage Period:	10/01/2024 to 10/01/2025

AUTOMOBILE LIABILITY

Limits of Liability	: $	5,000,000	Each Occurrence	
Medical Payments Limit	: $	25,000	Each person	
Deductible	: $	5,000	Each Occurrence	
Billable Contribution	: $	2,161	Effective : Anniversary :	10/01/2024 10/01/2025

AUTOMOBILE PHYSICAL DAMAGE

Limits of Coverage	:	Per Schedule and Endorsements	Each Occurrence	
Deductible	: $	500	Each Vehicle	
	$	10,000	*Each Occurrence	
Billable Contribution	: $	2,602	Effective: Anniversary:	10/01/2024 10/01/2025

AUTOMOBILE CATASTROPHE

**** Coverage Not Selected ****

TOTAL CONTRIBUTION

Total Billable Contribution	: $	4,763	Contract Effective: Contract Anniversary:	10/01/2024 10/01/2025

Coverage is continuous until cancelled. Contributions are subject to adjustment each year on the anniversary date based on updated exposure information and changes in rating.

* Automobile Physical Damage Each Occurrence Deductible does not apply to hail.

ATTACHMENT: 10
PAY VOUCHER

ATTACHMENT: 11
SOIL ANALYSIS

POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 0-6"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1030**	**PCS Sample #: 774190 Page 1 of 3** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024** Approved by: Chuck Wallgren, President

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
pH		8.1	S.U.	N/A	09/11/2024 08:56	SW846 9045	LCC
Conductivity, Specific		48	µmhos/cm at 25° C	N/A	09/11/2024 11:19	SM 2510B	LCC
Nitrate-N	R	0.3	mg/kg	0.1	09/17/2024 12:50	EPA 352.1	LCC
Kjeldahl-N, Total	!	150	mg/kg	3	09/17/2024 10:20	SM 4500-N B/C	BMR
Ammonia-N		<3	mg/kg	3	09/20/2024 11:20	SM 4500-NH3 B/C	BMR
Arsenic/ICP (Total)		0.520	mg/kg	0.277	09/25/2024 10:05	SW846 3050/6010	DJL
Cadmium/ICP (Total)		<0.138	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Chromium/ICP (Total)		2.40	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
pH	N/A	N/A	N/A			N/A			
Conductivity, Specific	N/A	N/A	N/A			N/A			
Nitrate-N	3	10	70	*57	*55	130	93	85 - 115	
Kjeldahl-N, Total	1	13	83	98	99	114	101	85 - 115	<3
Ammonia-N	7	10	88	97	90	113	101	85 - 115	
Arsenic/ICP (Total)	3	20	75	93	93	125	100	85 - 115	
Cadmium/ICP (Total)	3	20	75	97	97	125	100	85 - 115	
Chromium/ICP (Total)	5	20	75	109	107	125	105	85 - 115	

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
! Parameter not NELAP certifiable
R Spike recovery outside control limits due to matrix effect - LCS within limits
§ Reported on a Dry Weight Basis

These analytical results relate only to the sample tested.
All data is reported on an 'As Is' basis unless designated as 'Dry Wt'.
RL = Reporting Limits

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chuck@pcslab.net
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Universal City, TX 78148-3318
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POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 0-6"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1030**	**PCS Sample #: 774190 Page 2 of 3** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024**

Test Description	Result	Units	RL	Analysis Date/Time	Method	Analyst
Copper/ICP (Total)	0.720	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Lead/ICP (Total)	2.80	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Molybdenum/ICP (Total)	<0.130	mg/kg	0.277	09/25/2024 10:05	SW846 3050/6010	DJL
Nickel/ICP (Total)	0.780	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Selenium/ICP (Total)	<0.277	mg/kg	0.277	09/25/2024 10:05	SW846 3050/6010	DJL
Sodium/ICP (Mehlich III)	<22.6	mg/kg	22.6	09/25/2024 07:18	Mehlich 3/EPA 200.7	DJL
Zinc/ICP (Total)	2.00	mg/kg	0.138	09/25/2024 10:05	SW846 3050/6010	DJL
Calcium/ICP (Mehlich III)	200	mg/kg	22.6	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
Copper/ICP (Total)	3	20	75	103	103	125	105	85 - 115	
Lead/ICP (Total)	5	20	75	101	98	125	105	85 - 115	
Molybdenum/ICP (Total)	<1	20	75	97	100	125	105	85 - 115	
Nickel/ICP (Total)	3	20	75	98	98	125	105	85 - 115	
Selenium/ICP (Total)	<1	20	75	84	86	125	95	85 - 115	
Sodium/ICP (Mehlich III)	2	20	70	87	89	130	102	85 - 115	
Zinc/ICP (Total)	<1	20	75	97	100	125	100	85 - 115	
Calcium/ICP (Mehlich III)	6	20	70	*N/C	*N/C	130	100	85 - 115	

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4

§ Reported on a Dry Weight Basis

These analytical results relate only to the sample tested.
All data is reported on an 'As Is' basis unless designated as 'Dry Wt'.
RL = Reporting Limits
**N/C = Not Calculated, Sample Concentration Greater than 5 times the Spike Level*

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chuck@pcslab.net
1532 Universal City Blvd
Universal City, TX 78148-3318
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POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 0-6"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1030**	**PCS Sample #: 774190 Page 3 of 3** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024**

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
Magnesium/ICP (Mehlich III)		24.0	mg/kg	11.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Phosphorous/ICP (Mehlich III)	M	<11.3	mg/kg	11.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Potassium/ICP (Mehlich III)		<22.6	mg/kg	22.6	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Mercury/CVAA (Total)		0.010	mg/kg	0.009	09/19/2024 13:52	SW846 7471	EMV
Total Solids		87.9	%	0.10	09/10/2024 18:00	SM 2540 G	EMV

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
Magnesium/ICP (Mehlich III)	4	20	70	*N/C	*N/C	130	100	85 - 115	
Phosphorous/ICP (Mehlich III)	2	20	75	*135	*132	125	105	85 - 115	
Potassium/ICP (Mehlich III)	5	20	70	102	108	130	95	85 - 115	
Mercury/CVAA (Total)	1	20	70	101	103	130	99	85 - 115	
Total Solids	<1	12	N/A			N/A			

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4

M Post digestion spike passed, values >= RL are estimated

§ Reported on a Dry Weight Basis

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**N/C = Not Calculated. Sample Concentration Greater than 5 times the Spike Level*

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POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 6-24"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1040**	**PCS Sample #: 774191 Page 1 of 2** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024** Approved by: Chuck Wallgren, President

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
pH		7.8	S.U.	N/A	09/11/2024 08:59	SW846 9045	LCC
Conductivity, Specific		72	µmhos/cm at 25° C	N/A	09/11/2024 11:20	SM 2510B	LCC
Nitrate-N		0.1	mg/kg	0.1	09/20/2024 13:40	EPA 352.1	LCC
Kjeldahl-N, Total	!	152	mg/kg	3	09/17/2024 10:20	SM 4500-N B/C	BMR
Ammonia-N		<3	mg/kg	3	09/20/2024 11:20	SM 4500-NH3 B/C	BMR
Sodium/ICP (Mehlich III)		26.6	mg/kg	24.3	09/25/2024 07:18	Mehlich 3/EPA 200.7	DJL
Calcium/ICP (Mehlich III)		150	mg/kg	24.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Magnesium/ICP (Mehlich III)		17.0	mg/kg	12.2	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
pH	N/A	N/A	N/A			N/A			
Conductivity, Specific	N/A	N/A	N/A			N/A			
Nitrate-N	6	10	70	102	108	130	100	85 - 115	
Kjeldahl-N, Total	1	13	83	98	99	114	101	85 - 115	<3
Ammonia-N	7	10	88	97	90	113	101	85 - 115	
Sodium/ICP (Mehlich III)	2	20	70	87	89	130	102	85 - 115	
Calcium/ICP (Mehlich III)	6	20	70	*N/C	*N/C	130	100	85 - 115	
Magnesium/ICP (Mehlich III)	4	20	70	*N/C	*N/C	130	100	85 - 115	

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
! Parameter not NELAP certifiable
§ Reported on a Dry Weight Basis

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**N/C = Not Calculated, Sample Concentration Greater than 5 times the Spike Level*

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POLLUTION CONTROL SERVICES

Report of Sample Analysis

Client Information	Sample Information	Laboratory Information
Joe Moreno **Canyon Regional Water Authority** **850 Lakeside Pass** **New Braunfels, TX 78130**	**Project Name: Wells Ranch WTP Discharge** **§Sample ID: 6-24"** **Matrix: Soil** **Date/Time Taken: 9/10/2024 1040**	**PCS Sample #: 774191 Page 2 of 2** **Date/Time Received: 9/10/2024 11:50** **Report Date: 9/26/2024**

Test Description	Flag	Result	Units	RL	Analysis Date/Time	Method	Analyst
Phosphorous/ICP (Mehlich III)	M	<12.2	mg/kg	12.2	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Potassium/ICP (Mehlich III)		<24.3	mg/kg	24.3	09/24/2024 09:42	Mehlich 3/EPA 200.7	DJL
Total Solids		80.5	%	0.10	09/10/2024 18:00	SM 2540 G	EMV

Quality Assurance Summary

Test Description	Precision	Limit	LCL	MS	MSD	UCL	LCS	LCS Limit	Blank
Phosphorous/ICP (Mehlich III)	2	20	75	*135	*132	125	105	85 - 115	
Potassium/ICP (Mehlich III)	5	20	70	102	108	130	95	85 - 115	
Total Solids	<1	12	N/A			N/A			

***Quality Statement:** All supporting quality data adhered to data quality objectives and test results meet the requirements of NELAC unless otherwise noted as flagged exceptions or in a case narrative attachment. Reports with full quality data deliverables are available on request.*

*Approved for release per QA Plan, Exception to Limits - QAM Section 13-4
M Post digestion spike passed, values >= RL are estimated
§ Reported on a Dry Weight Basis

These analytical results relate only to the sample tested.
All data is reported on an 'As Is' basis unless designated as 'Dry Wt'.
RL = Reporting Limits

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POLLUTION CONTROL SERVICES

Chain of Custody Number

774190

Stamp 1st sample and COC as same number

MULTIPLE SAMPLE ANALYSIS REQUEST AND CHAIN OF CUSTODY FORM

CUSTOMER INFORMATION

Name: Canyon Regional Water Authority

REPORT INFORMATION

Attention: Austin Shirk

Phone: (830) 386-0619

Fax:

SAMPLE INFORMATION

Project Information: Wells Ranch WTP Discharge

Report "Soils" ☐ As Is ☐ Dry Wt.

Collected By: Austin Shirk

Requested Analysis

Instructions/Comments:

Client / Field Sample ID	Collected Date	Collected Time	Field Chlorine Residual mg/L	Composite or Grab	Matrix: DW-Drinking Water; NPW-Non-potable water; WW-Wastewater; LW-Liquid Waste	Container Type	Container Number	Container Preservative	See Attached								PCS Sample Number
0-6 in	Start: 9/10/24 End:	Start: 10:30 End:		☐C ☒G	☐ DW ☐ NPW ☐ WW ☒ Soil ☐ Sludge ☐ LW ☐ Other	☑P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______	★								774190 ☐S ☐B ☐N ☐HEM Other:
6-24 in	Start: 9/10/24 End:	Start: 10:40 End:		☐C ☒G	☐ DW ☐ NPW ☐ WW ☒ Soil ☐ Sludge ☐ LW ☐ Other	☑P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______	★								774191 ☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐C ☐G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐C ☐G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐C ☐G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐C ☐G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐C ☐G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______									☐S ☐B ☐N ☐HEM Other:
	Start: End:	Start: End:		☐C ☐G	☐ DW ☐ NPW ☐ WW ☐ Soil ☐ Sludge ☐ LW ☐ Other	☐P ☐G ☐O		☐ H_2SO_4 ☐ HNO_3 ☐ H_3PO_4 ☐ NaOH ☐ ICE ☐ ______									☐S ☐B ☐N ☐HEM Other:

Required Turnaround: ☐ Routine (6-10 days) ***EXPEDITE:*** (See Surcharge Schedule) ☐ < 8 Hrs. ☐ < 16 Hrs. ☐ < 24 Hrs. ☐ 5 days ☐ Other: ________ ***Rush Charges Authorized by:***

Sample Archive/Disposal: ☐ Laboratory Standard ☐ Hold for client pick up **Container Type:** P = Plastic, G = Glass, O = Other ________ Carrier ID: ________

Relinquished By:		Date:	9/10/24	Time:	1150	Received By:		Date:		Time:
Relinquished By:		Date:		Time:		Received By:		Date:	9-10-24	Time: 1150

Rev. Multiple Sample COC_20180628

1532 Universal City Blvd., Ste. 100, Universal City, Texas 78148
P (210) 340-0343 or (800) 880-4616 - F (210) 658-7903

Login at www.pcslab.net

No.	PARAMETER	NOTE	FREQUENCY	SAMPLE DEPTH	
				0" - 6"	6" - 24"
1.	Nitrate Nitrogen (NO_3-N, mg/kg)	1	1 per year	X	X
2.	Ammonium Nitrogen (NH_4-N, mg/kg)	1	1 per year	X	X
3.	Total Nitrogen (TKN, mg/kg)	2	1 per year	X	X
4.	Phosphorus (plant available, mg/kg)	3	1 per year	X	X
5.	Potassium (plant available, mg/kg)	3	1 per year	X	X
6.	Sodium (plant available, mg/kg)	3	1 per year	X	X
7.	Magnesium (plant available, mg/kg)	3	1 per year	X	X
8.	Calcium (plant available, mg/kg)	3	1 per year	X	X
9.	Electrical Conductivity	4	1 per year	X	X
10.	Soil Water pH (S.U.)	5	1 per year	X	X
11.	Total Arsenic (mg/kg)	6	1 per 5 years	X	N/A
12.	Total Cadmium (mg/kg)	6	1 per 5 years	X	N/A
13.	Total Chromium (mg/kg)	6	1 per 5 years	X	N/A
14.	Total Copper (mg/kg)	6	1 per 5 years	X	N/A
15.	Total Lead (mg/kg)	6	1 per 5 years	X	N/A
16.	Total Mercury (mg/kg)	6	1 per 5 years	X	N/A
17.	Total Molybdenum (mg/kg)	6	1 per 5 years	X	N/A
18.	Total Nickel (mg/kg)	6	1 per 5 years	X	N/A
19.	Total Selenium (mg/kg)	6	1 per 5 years	X	N/A
20.	Total Zinc (mg/kg)	6	1 per 5 years	X	N/A

Pollution Control Services
Sample Log-In Checklist

PCS Sample No(s) 774190 774191 **COC No.** 774190

Client/Company Name: CRWA **Checklist Completed by:** JA

Sample Delivery to Lab Via:
Client Drop Off ✓ Commercial Carrier: Bus ____ UPS ____ Lone Star ____ FedEx ____ USPS ____
PCS Field Services: Collection/Pick Up____ Other:____

Sample Kit/Coolers
Sample Kit/Cooler? Yes ✓ No____ Sample Kit/Cooler: Intact? Yes ✓ No___
Custody Seals on Sample Kit/Cooler: Not Present ✓ If Present, Intact ___ Broken ___
Sample Containers Intact; Unbroken and Not Leaking? Yes ✓ No ___
Custody Seals on Sample Bottles: Not Present ✓ If Present, Intact ___ Broken ___
COC Present with Shipment or Delivery or Completed at Drop Off? Yes ✓ No ___
Has COC sample date/time and other pertinent information been provided by client/sampler? Yes: ✓ No: ___
Has COC been properly Signed when Received/Relinquished? Yes ✓ No ___
Does COC agree with Sample Bottle Information, Bottle Types, Preservation, etc.? Yes ✓ No ___
All Samples Received before Hold Time Expiration? Yes ✓ No ___
Sufficient Sample Volumes for Analysis Requested? Yes ✓ No ___
Zero Headspace in VOA Vial? Yes ___ No ___

Sample Preservation:
Cooling: **Not Required** ✓ **or Required** ____
If cooling required, record temperature of submitted samples Observed/Corrected 24.2 / 24.1 °C
Is Ice Present in Sample Kit/Cooler? ____ Yes ✓ No Samples received same day as collected? ✓ Yes ____ No
Lab Thermometer Make and Serial Number: Vaughan 1807009583 Other: ____

Acid Preserved Sample - If present, is pH <2? Yes ____ No ____** ____H_2SO_4 ____HNO_3 ____H_3PO_4
Base Preserved Sample - If present, is pH >12? Yes ____ No ____ ____NaOH
Other Preservation:____ If Present, Meets Requirements? Yes____ No____
Sample Preservations Checked by:____ Date ____ Time ____
pH paper used to check sample preservation (PCS log #): ____ (HEM pH checked at analysis).

Samples Preserved/Adjusted by Lab:	Lab #	Parameters Preserved	Preservative Used	Log #

Adjusted by Tech/Analyst:____ Date :____Time:____

Client Notification/ Documentation for "No" Responses Above/ Discrepancies/ RevisionComments
Person Notified: ____ Contacted by:____
Notified Date: ____Time: ____
Method of Contact: At Drop Off:____ Phone ___ Left Voice Mail ____ E-Mail ____ Fax ____
Unable to Contact____ Authorized Laboratory to Proceed :____(Lab Director)
Regarding / Comments:____

Actions taken to correct problems/discrepancies:____

Receiving qualifier needed (*requires client notification above*) Temp. ___ Holding Time ___ Initails: ____
Receiving qualifier entered into LIMS at login Initial/Date: ____
Revision Comments: ____

ATTACHMENT: 12
SOIL DATA

Map Unit Description

The map units delineated on the detailed soil maps in a soil survey represent the soils or miscellaneous areas in the survey area. The map unit descriptions in this report, along with the maps, can be used to determine the composition and properties of a unit.

A map unit delineation on a soil map represents an area dominated by one or more major kinds of soil or miscellaneous areas. A map unit is identified and named according to the taxonomic classification of the dominant soils. Within a taxonomic class there are precisely defined limits for the properties of the soils. On the landscape, however, the soils are natural phenomena, and they have the characteristic variability of all natural phenomena. Thus, the range of some observed properties may extend beyond the limits defined for a taxonomic class. Areas of soils of a single taxonomic class rarely, if ever, can be mapped without including areas of other taxonomic classes. Consequently, every map unit is made up of the soils or miscellaneous areas for which it is named, soils that are similar to the named components, and some minor components that differ in use and management from the major soils.

Most of the soils similar to the major components have properties similar to those of the dominant soil or soils in the map unit, and thus they do not affect use and management. These are called noncontrasting, or similar, components. They may or may not be mentioned in a particular map unit description. Some minor components, however, have properties and behavior characteristics divergent enough to affect use or to require different management. These are called contrasting, or dissimilar, components. They generally are in small areas and could not be mapped separately because of the scale used. Some small areas of strongly contrasting soils or miscellaneous areas are identified by a special symbol on the maps. If included in the database for a given area, the contrasting minor components are identified in the map unit descriptions along with some characteristics of each. A few areas of minor components may not have been observed, and consequently they are not mentioned in the descriptions, especially where the pattern was so complex that it was impractical to make enough observations to identify all the soils and miscellaneous areas on the landscape.

The presence of minor components in a map unit in no way diminishes the usefulness or accuracy of the data. The objective of mapping is not to delineate pure taxonomic classes but rather to separate the landscape into landforms or landform segments that have similar use and management requirements. The delineation of such segments on the map provides sufficient information for the development of resource plans. If intensive use of small areas is planned, however, onsite investigation is needed to define and locate the soils and miscellaneous areas.

An identifying symbol precedes the map unit name in the map unit descriptions. Each description includes general facts about the unit and gives important soil properties and qualities.

Soils that have profiles that are almost alike make up a *soil series.* All the soils of a series have major horizons that are similar in composition, thickness, and arrangement. Soils of a given series can differ in texture of the surface layer, slope, stoniness, salinity, degree of erosion, and other characteristics that affect their use. On the basis of such differences, a soil series is divided into *soil phases.* Most of the areas shown on the detailed soil maps are phases of soil series. The name of a soil phase commonly indicates a feature that affects use or management. For example, Alpha silt loam, 0 to 2 percent slopes, is a phase of the Alpha series.

Some map units are made up of two or more major soils or miscellaneous areas. These map units are complexes, associations, or undifferentiated groups.

A *complex* consists of two or more soils or miscellaneous areas in such an intricate pattern or in such small areas that they cannot be shown separately on the maps. The pattern and proportion of the soils or miscellaneous areas are somewhat similar in all areas. Alpha-Beta complex, 0 to 6 percent slopes, is an example.

An *association* is made up of two or more geographically associated soils or miscellaneous areas that are shown as one unit on the maps. Because of present or anticipated uses of the map units in the survey area, it was not considered practical or necessary to map the soils or miscellaneous areas separately. The pattern and relative proportion of the soils or miscellaneous areas are somewhat similar. Alpha-Beta association, 0 to 2 percent slopes, is an example.

An *undifferentiated group* is made up of two or more soils or miscellaneous areas that could be mapped individually but are mapped as one unit because similar interpretations can be made for use and management. The pattern and proportion of the soils or miscellaneous areas in a mapped area are not uniform. An area can be made up of only one of the major soils or miscellaneous areas, or it can be made up of all of them. Alpha and Beta soils, 0 to 2 percent slopes, is an example.

Some surveys include *miscellaneous areas.* Such areas have little or no soil material and support little or no vegetation. Rock outcrop is an example.

Additional information about the map units described in this report is available in other soil reports, which give properties of the soils and the limitations, capabilities, and potentials for many uses. Also, the narratives that accompany the soil reports define some of the properties included in the map unit descriptions.

Guadalupe County, Texas

PaD—Patilo and Arenosa soils, 1 to 8 percent slopes

Map Unit Setting

National map unit symbol: d9rh
Elevation: 400 to 1,500 feet
Mean annual precipitation: 24 to 40 inches
Mean annual air temperature: 64 to 70 degrees F
Frost-free period: 220 to 275 days

Farmland classification: Not prime farmland

Map Unit Composition

Patilo and similar soils: 49 percent
Arenosa and similar soils: 29 percent
Minor components: 22 percent
Estimates are based on observations, descriptions, and transects of the mapunit.

Description of Patilo

Setting

Landform: Ridges
Landform position (two-dimensional): Summit, backslope
Landform position (three-dimensional): Interfluve, side slope
Down-slope shape: Linear
Across-slope shape: Convex
Parent material: Residuum weathered from eocene sandstones of carrizo, queen city, simsboro and sparta formations

Typical profile

H1 - 0 to 8 inches: fine sand
H2 - 8 to 52 inches: fine sand
H3 - 52 to 84 inches: sandy clay loam

Properties and qualities

Slope: 1 to 8 percent
Depth to restrictive feature: More than 80 inches
Drainage class: Moderately well drained
Runoff class: Very low
Capacity of the most limiting layer to transmit water (Ksat): Moderately high (0.20 to 0.57 in/hr)
Depth to water table: About 48 to 72 inches
Frequency of flooding: None
Frequency of ponding: None
Maximum salinity: Nonsaline to very slightly saline (0.0 to 2.0 mmhos/cm)
Available water supply, 0 to 60 inches: Low (about 5.3 inches)

Interpretive groups

Land capability classification (irrigated): 3s
Land capability classification (nonirrigated): 3s
Hydrologic Soil Group: A
Ecological site: R087AY007TX - Deep Sand
Hydric soil rating: No

Description of Arenosa

Setting

Landform: Ridges
Landform position (two-dimensional): Summit, shoulder
Landform position (three-dimensional): Interfluve
Down-slope shape: Linear
Across-slope shape: Convex

Parent material: Residuum weathered from eocene age sandstones in the carrizo, queen city and sparta formations

Typical profile

H1 - 0 to 5 inches: fine sand
H2 - 5 to 96 inches: fine sand

Properties and qualities

Slope: 1 to 8 percent
Depth to restrictive feature: More than 80 inches
Drainage class: Somewhat excessively drained
Runoff class: Very low
Capacity of the most limiting layer to transmit water (Ksat): High to very high (5.95 to 19.98 in/hr)
Depth to water table: More than 80 inches
Frequency of flooding: None
Frequency of ponding: None
Maximum salinity: Nonsaline to very slightly saline (0.0 to 2.0 mmhos/cm)
Available water supply, 0 to 60 inches: Low (about 3.1 inches)

Interpretive groups

Land capability classification (irrigated): None specified
Land capability classification (nonirrigated): 4s
Hydrologic Soil Group: A
Ecological site: R087AY007TX - Deep Sand
Hydric soil rating: No

Minor Components

Unnamed

Percent of map unit: 15 percent
Hydric soil rating: No

Unnamed

Percent of map unit: 7 percent
Hydric soil rating: No

Data Source Information

Soil Survey Area: Guadalupe County, Texas
Survey Area Data: Version 20, Aug 30, 2024

ATTACHMENT: 13
TOTAL SUSPENDED SOLIDS
AND
ALKALINITY
DATA

Publish Date/Time: 5/5/2025 12:54 PM

GBRA
Guadalupe-Blanco River Authority

Report of Analysis

For: 424356 - Wells Ranch WTP (CRWA)
850 Lakeside Pass
New Braunfels, TX 78130

Released By: Kylie Gudgell
Title: Lead Technical Manager

I am the laboratory manager, or his/her designee, and I am responsible for the release of this data package. This laboratory data package has been reviewed and is complete and technically compliant with the requirements of the methods used, except where noted. I affirm, to the best of my knowledge that all problems/anomalies observed by this laboratory (and if applicable, any and all laboratories subcontracted through this laboratory) that might affect the quality of the data, have been identified in the report, and that no information or data have been knowingly withheld that would affect the quality of the data.

This Laboratory is NELAP accredited. Scope: Non-potable water, potable water.

Lab Sample ID: 250424.15-01 **Collection Date/Time:** 4/24/2025 10:05 AM **Sample Matrix:** Waste Water
Site: OutFall 001 **Receive Date/Time:** 4/24/2025 12:37 PM **Sample Type:** Grab

Analyte	Method	Sample Result	DF	RPL	Qualifier	Test Date/Time	Analyst	Read Date/Time	Analyst
Total Suspended Solids	SM 2540 D	4.80 mg/L	1	0.5		4/25/2025 04:48 PM	MD		

Lab Sample ID: 250424.15-02 **Collection Date/Time:** 4/24/2025 08:05 AM **Sample Matrix:** Waste Water
Site: OutFall 001 **Receive Date/Time:** 4/24/2025 12:37 PM **Sample Type:** Composite

Analyte	Method	Sample Result	DF	RPL	Qualifier	Test Date/Time	Analyst	Read Date/Time	Analyst
Total Suspended Solids	SM 2540 D	8.10 mg/L	1	0.5		4/25/2025 04:48 PM	MD		

NA = not analyzed

[1] Parameter not available for NELAP accreditation at the GBRA
[2] Parameter is approved under TCEQ Drinking Water Program

933 East Court Street
Seguin, TX 78155
(830)379-5822 ext 256

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Work Order: 250424.15

LABORATORY TERM AND QUALIFIER DEFINITION REPORT

General Term Definition

%REC	Percent Recovery	LOQ	Limit of Quantitation
%RPD	Relative Percent Difference	LR	Low Range
CCB	Continuing Calibration Verification	MBLK	Method Blank
CCV	Continuing Calibration Verification	MDL	Method Detection Limit
D.F.	Dilution Factor	MS	Matrix Spike
HR	High Range	MSD	Matrix Spike Duplicate
ICB	Initial Calibration Blank	ND	Not Detected
ICV	Initial Calibration Verification	QC	Quality Control
LCS	Laboratory Control Spike	RPL	Reporting Limit
LCSD	Laboratory Control Spike Duplicate		

Qualifier Definition

Order Comments

250424.15 N/A

QC Results

QCBatch ID	QC ID	Parameter	% Recovery / RPD	Control Limits
QC250424.001	250422.02-03: Duplicate 1	Total Suspended Solids	1.5	0 - 15
	250422.11-01: Duplicate 2	Total Suspended Solids	13.22	0 - 15
	250423.05-05: Duplicate 3	Total Suspended Solids	3.04	0 - 15
	250423.06-04: Duplicate 4	Total Suspended Solids	1.0	0 - 15
	250424.07-02: Duplicate 7	Total Suspended Solids	5.77	0 - 15

NA = not analyzed

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250424.07-03: Duplicate 5	Total Suspended Solids	1.09	0 - 15
250424.07-04: Duplicate 6	Total Suspended Solids	1.72	0 - 15
250424.09-02: Duplicate 8	Total Suspended Solids	7.49	0 - 15
LCS 1	Total Suspended Solids	115.0	75 - 125
LCS 2	Total Suspended Solids	105.0	75 - 125
LCS 3	Total Suspended Solids	98.4	75 - 125
LCS 4	Total Suspended Solids	103.0	75 - 125
LCS 5	Total Suspended Solids	101.0	75 - 125
LCS 6	Total Suspended Solids	109.0	75 - 125
LCS 7	Total Suspended Solids	99.2	75 - 125
LCS 8	Total Suspended Solids	108.0	75 - 125
MBLK 1	Total Suspended Solids	0.0	0 - 0.5
MBLK 2	Total Suspended Solids	0.0	0 - 0.5
MBLK 3	Total Suspended Solids	0.0	0 - 0.5
MBLK 4	Total Suspended Solids	0.0	0 - 0.5
MBLK 5	Total Suspended Solids	0.0	0 - 0.5
MBLK 6	Total Suspended Solids	0.0	0 - 0.5
MBLK 7	Total Suspended Solids	0.0	0 - 0.5
MBLK 8	Total Suspended Solids	0.0	0 - 0.5

NA = not analyzed

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Work Order: 250424.15

Chain-Of-Custody Record

Report To		Customer Acct.#: 424356	Invoice To (if applicable)	
Name: CRWA Wells Ranch			Name:	
Address: 850 Lakeside Pass New Braunfels TX			Address:	
Phone #: 830-386-0619			Phone #:	
Email: Austin@crwa.com, Dkirkland@crwa.com, Adam@crwa.com			Email:	
Thermometer #: 30	Observed / Corrected Temp(°C): 19.3 / 19.2		Chlorine Check Reagent ID:	Chlorine : Absent/ Present
Sample Iced (Circle One): Yes / No	CoC Page: 1 of 1		pH Paper Reagent ID:	
No. of Containers: 2	Containers Intact (Circle One): Yes / No		Residual Chlorine (Total/Free) Results:	

Date Collected	Time Collected	Matrix	Sx Vol. P=Plastic G=Glass A=Amber	Sample Name/Description	Preservation ID (PID#)/ TCEQ ID Number	Grab / Comp.	Analysis Requested	2504211.15 GBRA Sample ID	pH	Preservative	Sub Out
4-24-2025	1005	WW	1G - P	OutFall 001		G	TSS	-01			
4-24-2025	0805 CMK	WW	1G - P	OutFall 001		COMP	TSS	-02			

Matrices: WW=Wastewater, DW=Drinking Water, SW=Surface Water, S=Sludge/Soil

Samples marked above as "Sub Out" will be subcontracted to a laboratory that meets the regulatory or end-user requirements of these samples

Expedite Samples 24hr/Holiday (4x Fee) 48hr/Weekend (3x Fee) 3-5 days (2x Fee) Due Date:

Sampler Name (Print): Dekra M. Kirkland		Sampler Signature: Dekra M. Kirkland	
Relinquished By: Dekra M. Kirkland	Date/Time: 4-24-2025 1337	Transferred To:	Date/Time: 4/24/25 1237
Relinquished By:	Date/Time:	Received By:	Date/Time:
Relinquished By:	Date/Time:	Received By:	Date/Time:
Relinquished By:	Date/Time:	Received By:	Date/Time:

NOTES / COMMENTS / SHIP TO:
+pH tested at subcontracted lab

WELLS RANCH WATER QUALITY TESTING

DATE: 4 / 19 / 2025 TIME _____ OPERATOR DMK

	FINISHED	RAW	PRE-FILTER	POST FILTER
TURB				
PH				
TEMP °C				
ALK				
MANG(Mn)				
IRON (Fe)				

POST FILTER SIEMENS 2.37 mg/L

POST FILTER CL2 2.41 mg/L
POST FILTER CL2 2.45 mg/L
POST FILTER CL2 2.46 mg/L

TU5200 VERIFICATION (10NTU) PASS FAIL

PH CAL SLOPE _____ _____ %

SIEMENS CL2 2.43 mg/L

DR900 CL2 2.36 mg/L
DR900 CL2 2.39 mg/L
DR900 CL2 2.38 mg/L

HSP RUNNING	Yes
FILTERS RUNNING	Yes
WELLS RUNNING	

DATE: 4 / 20 / 2025 TIME _____ OPERATOR DMK

	FINISHED	RAW	PRE-FILTER	POST FILTER
TURB				
PH				
TEMP °C				
ALK				
MANG(Mn)				
IRON (Fe)				

POST FILTER SIEMENS 2.53 mg/L

POST FILTER CL2 2.63 mg/L
POST FILTER CL2 2.59 mg/L
POST FILTER CL2 2.57 mg/L

TU5200 VERIFICATION (10NTU) PASS FAIL

PH CAL SLOPE _____ _____ %

SIEMENS CL2 2.44 mg/L

DR900 CL2 2.41 mg/L
DR900 CL2 2.42 mg/L
DR900 CL2 2.40 mg/L

HSP RUNNING	Yes
FILTERS RUNNING	Yes
WELLS RUNNING	

DATE: 4 / 21 / 2025 TIME 1:45 PM OPERATOR DSK / DMK

	FINISHED	RAW	PRE-FILTER	POST FILTER
TURB	.061	.707	16.5	.101
PH	8.01	6.85	8.34	7.94
TEMP °C	24.4	24.9	24.3	24.3
ALK	123	86		
MANG(Mn)	.008	.055		
IRON (Fe)	.02	.98		

POST FILTER SIEMENS 2.62 mg/L

POST FILTER CL2 2.69 mg/L
POST FILTER CL2 2.27 mg/L
POST FILTER CL2 2.56 mg/L

TU5200 VERIFICATION (10NTU) 10.4 PASS FAIL

PH CAL SLOPE 58.57 99 %

SIEMENS CL2 2.42 mg/L

DR900 CL2 2.38 mg/L
DR900 CL2 2.38 mg/L
DR900 CL2 2.41 mg/L

HSP RUNNING	YES
FILTERS RUNNING	YES
WELLS RUNNING	Yes

ATTACHMENT: 14
ePay Voucher

Your transaction is complete. Thank you for using TCEQ ePay.

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt and the vouchers for your records. An email receipt has also been sent.

Transaction Information

Trace Number:	582EA000669406
Date:	05/23/2025 08:10 AM
Payment Method:	CC - Authorization 0000059676
ePay Actor:	ADAM C TELFER
Actor Email:	adam@crwa.com
IP:	198.46.13.4
TCEQ Amount:	$1,000.00
Texas.gov Fee:	$22.76
Texas.gov Price:	$1,022.76*

* This service is provided by Texas.gov, the official website of Texas. The price of this service includes funds that support the ongoing operations and enhancements of Texas.gov, which is provided by a third party in partnership with the State.

Payment Contact Information

Name:	ADAM TELFER
Company:	CANYON REGIONAL WATER AUTHORITY
Address:	850 LAKESIDE PASS, NEW BRAUNFELS, TX 78130
Phone:	830-609-0543

Cart Items

Click on the voucher number to see the voucher details.

Voucher	Fee Description	AR Number	Amount
767971	PERMIT - CLASS B SEWAGE SLUDGE BLU <= 2,000 TONS		$1,000.00
		TCEQ Amount:	$1,000.00

ePay Again | Exit ePay

Note: It may take up to 3 working days for this electronic payment to be processed and be reflected in the TCEQ ePay system. Print this receipt for your records.

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