WASTEWATER STREAM CHARACTERIZATION FOR TA 53-4, 5, 14, 27, 32, 433, 434, 453, 456, 459, 465, 489, 499, 500, 509, 516, 525, 528, 529, 531, 532, 539, 542, 544, 548, 549, 553, 555, 561, 564, 566, 569, 570, 576, 594, 612, 621, 633, 635, 636, 671, 673, 674, 675, 694, 700, 701, 702, 703, 704, 705, 706, 747, 761, 825, 834, 840, 844, 849, 850, 851, 853, 854, 855, 856, 857, 858, 859, 862, 866, 870, 872, 873, 883, 885, 886, 889, 1020, 1045, 1046 AND 09S SANITARY OUTFALL

at
Los Alamos National Laboratory

ENVIRONMENTAL STUDY

CHARACTERIZATION REPORT # 32

REVISION NO. 1

REVISION DATE: 10/93

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ISSUED TO:

Los Alam
Los Alamos National Laboratory

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MANAGEMENT DIVISION
National Laboratory
New Mexico 87545
r the United States Department of Energy

WASTEWATER STREAM CHARACTERIZATION FOR TA 53-4, 5, 14, 27, 32, 433, 434, 453, 456, 459, 465, 489, 499, 500, 509, 516, 525, 528, 529, 531, 532, 539, 542, 544, 548, 549, 553, 555, 561, 564, 566, 569, 570, 576, 594, 612, 621, 633, 635, 636, 671, 673, 674, 675, 694, 700, 701, 702, 703, 704, 705, 706, 747, 761, 825, 834, 840, 844, 849, 850, 851, 853, 854, 855, 856, 857, 858, 859, 862, 866, 870, 872, 873, 883, 885, 886, 889, 1020, 1045, 1046 AND 09S SANITARY OUTFALL

ENVIRONMENTAL STUDY

Prepared for:
THE LOS ALAMOS NATIONAL LABORATORY
Los Alamos, New Mexico

under subcontract 9-XG8-2874P-1

by:
Santa Fe Engineering, Ltd.
1429 Second Street
Santa Fe, New Mexico 87504
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November, 1992

UPDATED PER EM-8 COMMENTS OCTOBER, 1993

EXECUTIVE SUMMARY

Buildings 4, 5, 14, 27, 32, 433, 434, 453, 456, 459, 465, 489, 499, 500, 509, 516, 525, 528, 529, 531, 532, 539, 542, 544, 548, 549, 553, 555, 561, 564, 566, 569, 570, 576, 594, 612, 621, 633, 635, 636, 671, 673, 674, 675, 694, 700, 701, 702, 703, 704, 705, 706, 747, 761, 825, 834, 840, 844, 849, 850, 851, 853, 854, 855, 856, 857, 858, 859, 862, 866, 870, 872, 873, 883, 885, 886, 889, 1020, 1045, 1046 and the sanitary treatment lagoons in TA-53 were visited to document all drain piping and building outflows and to make permitting recommendations. The pipes exiting the buildings are as follows:

1. from 53-4: one sanitary sewer connection, one roof drain and two fire protection drains,

2. from 53-14: one sanitary sewer connection, one connection to outfall 03A146, five condensed water drains, four fire protection drains, one compressed air PRV discharge, one air compressor bleed-off and one secondary containment drain,

3. from 53-27: one sanitary sewer connection, one backflow preventer discharge, one water heater relief valve drain and one condensed water drain from evaporative cooler,

4. from buildings 53-32, 433, 434, 453, 459, 465, 489, 500, 509, 516, 525, 539, 553, 569, 594, 612, 621, 635, 636, 671, 673, 674, 700, 701, 702, 703, 704, 705, 706, 834, 840, 844, 849, 850, 851, 853, 854, 855, 856, 857, 858, 859, 862, 866, 870, 872, 873, 883, 885, 886, 1020, 1045 and 1046: no drains,

5. from 53-465: one condensed water drain,

6. from buildings 53-499, 528, 529, 531, 532, 542, 548, 555, 561, 633, 747, 761, and 825: no longer in use,

7. from 53-544: one sanitary sewer connection and one condensed water drain,

8. from 53-549: one condensed water drain,

9. from 53-555: one condensed water drain from evaporative cooler,

9. from 53-564: one condensed water drain,

10. from 53-566: one condensed water drain,

11. from 53-570: one sanitary sewer connection and one water heater pressure relief valve drain,

12. from 53-576: two condensed water drains,

13. from 53-675: one sanitary sewer connection and one condensed water drain,

14. from 53-694: one sanitary sewer connection, one water heater pressure relief valve drain and one condensed water drain from evaporative cooler,

15. from 53-889: one sanitary sewer connection and one water heater pressure relief valve drain,

16. from TA-53 sanitary treatment lagoons, one connection to outfall 09S.

Revised application forms are included for each of the two permitted outfalls (03A146 and 09S). The flows shown on the forms are estimated from site observations, from discussions with Users and from data on the Discharge Monitoring Reports (DMR). Analytical data is defined from information from the previously sampled outfalls.

Recommendations for repiping are provided to allow outfall consolidation to minimize permit maintenance requirements and to bring the facility into compliance with the Laboratory's NPDES Permit. Floor drain plugging is recommended where the potential for discharge of pollutants exists.

A Waste Stream Database has been prepared listing the waste water type and flow rate for each outfall.

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1.0 INTRODUCTION

During March and April, 1992, Mark E. Wendt of Santa Fe Engineering (SFE) toured buildings 4, 5, 14, 27, 32, 433, 434, 453, 456, 459, 465, 489, 499, 500, 509, 516, 525, 528, 529, 531, 532, 539, 542, 544, 548, 549, 553, 555, 561, 564, 566, 569, 570, 576, 594, 612, 621, 633, 635, 636, 671, 673, 674, 675, 694, 700, 701, 702, 703, 704, 705, 706, 747, 761, 825, 834, 840, 844, 849, 850, 851, 853, 854, 855, 856, 857, 858, 859, 862, 866, 870, 872, 873, 883, 885, 886, 889, 1020, 1045, 1046 and the sanitary treatment lagoons in TA-53.

The purpose of this study is to identify building drain piping, locate outfalls which discharge into the environment and to characterize the wastewater flows and sources existing at the time of the visit. This report will not reflect any subsequent changes in piping or operations. The Waste Steam Characterization Policy of April 14, 1992 was followed for this study. The following tasks were performed for this purpose:

1. Building drains and all piping exiting the building were identified and laid out in schematic form;

2. Wastewater sources were identified at each drain and the wastewater was characterized according to the flow rate and quality. The location of outfalls and their potential sources of discharges were determined. Potential pollutants were also noted;

3. Permit applications for discharges of clean water were not prepared since these discharges do not require permitting at this time and

4. Potential problems were identified and recommendations were made for repiping, floor drain plugging and spill containment where deemed appropriate.

The field investigation proceeded by verifying drain schematic drawings prepared by SFE for the appropriate buildings (Figures 1 through 14) from drawings provided by Los Alamos National Laboratory (LANL) Facilities Engineering Division. The other buildings were visited to insure that no drains exist for the buildings. The following process was used to define drain piping and characterize the wastewater streams:

1. Laboratory engineering drawings were used to prepare the SFE drain piping schematics. The Solid Waste Stream Characterization conducted by IT Corporation was reviewed. The National Pollutant Discharge Elimination System (NPDES) Permit, the 1990 NPDES Permit Application submitted by LANL in September, 1990, the latest Federal Facilities Compliance Agreement (FFCA) between the Department of Energy (DOE) and the Environmental Protection Agency (EPA) and the Administrative Order (AO) Docket Number V1-91-1329 issued by EPA to the University of California were used for reference;

2. A site visit was performed to verify the SFE drain schematics and to identify potential outfall pipes exiting the building. The visit entailed a room by room inspection of wastewater sources and drains. Interviews with site personnel were conducted to assist in wastestream characterization and

3. SFE verified drain piping by dye checking.

2.0 FIELD INVESTIGATION

The pipes exiting the buildings have been assigned an Outlet Piping Number. The four part number, sequentially, identifies the Technical Area where the pipe is located, the building from which the pipe discharges, the letters OPN to indicate that it is an outlet piping number and the unique number for the pipe. The piping exiting the building will be labeled for easy identification in the future.

Each drain has a unique identification number. Each number consists of three parts. The first part is the floor the drain is on. The second part has letters that indicate the drain type (abbreviations used are summarized in Table 14). The final part is a unique number for each drain. For example, the floor drain numbering on the first floor would start is 1FD1. The roof drains do not have the number identifying the floor such as RD1 for Roof Drain 1.

The function of each pipe exiting from buildings are listed in Appendix 1, Tables 1 through 13, with an abbreviations list in Table 14. Appendix 2 contains the wastestream characterization database output, listing wastewater source, flow rates and periodicity information for each outfall drain. Completed EPA forms are in Appendix 3 for appropriate outfalls. Appendix 4 provides information about the dye study of building drains. Flow schematics of the drains from each building and the sanitary treatment lagoons are attached in Appendix 5 as Figures 1 through 14. A site plan is included in Appendix 5 as Figure 15 illustrating the locations of buildings included in this report.

3.0 RECOMMENDATIONS FOR BUILDING 53-4

Table 1 is a list of the drains to the building outfalls and Figure 1 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendation.

3.1 Outfall 53-4-OPN-1

This outfall is from sanitary facilities, a photo lab and a mechanical room and flows into a sewer manhole which drains into TA-53 sewage treatment plant. No chemicals are drained into any of the drains or fixtures. The air compressor located in mechanical room 102 has a bleed-off line which currently drains on to floor. It is recommended that this liquid be contained. Sink BSD3 receives photo rinse water. The photo processing occurs four hours per day for 20 days per year. No permitting is recommended. No EPA forms have been prepared.

3.2 Outfall 53-4-OPN-2

This outfall to daylight is from roof drains. The downspout drains next to the building. No permitting is recommended. No EPA forms have been prepared.

3.3 Outfalls 53-4-OPN-3 and 53-4-OPN-4

These outfalls are fire water system drains which discharge to daylight next to the building. These outfalls should be included in a Notice of Intent to Discharge (NOI). No piping changes are recommended. No EPA forms were prepared.

4.0 RECOMMENDATIONS FOR BUILDING 53-14

Table 2 is a list of the drains to the building outfalls and Figure 2 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendation.

4.1 Outfall 53-14-OPN-1

This outfall is from sanitary facilities, shops and mechanical rooms. It flows into a sewage lift station which pumps into a sanitary sewer manhole. This manhole drains into the TA-53 sewage treatment plant. No chemicals are drained into any of the drains or fixtures. No permitting is recommended. No EPA forms have been prepared.

4.2 Outfall 53-14-OPN-2

This outfall is permitted as 03A146 and receives treated blowdown from a cooling tower. This outfall currently drains to daylight into Sandia Canyon. This outfall discharges less than 800 gallons a month during six months of the year. It is recommended that the outfall be repiped to the sanitary sewer and that the permit be deleted for this outfall. A revised EPA Form 2C is attached for the permitted outfall.

4.3 Outfalls 53-14-OPN-3, 53-14-OPN-4 and 53-14-OPN-5

These outfalls drain condensed water from heating/cooling units to daylight next to the building. These outfalls should be included in an NOI. No piping changes are recommended. No EPA forms were prepared.

4.4 Outfalls 53-14-OPN-6, 53-14-OPN-9, 53-14-OPN-10 and 53-14-OPN-11

These outfalls are fire water system drains which discharge to daylight next to the building. These outfalls should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

4.5 Outfall 53-14-OPN-7

This outfall is a compressed air pressure reducing valve discharging to atmosphere. No permitting is recommended. No EPA forms were completed.

4.6 Outfall 53-14-OPN-8

This outfall is an air compressor bleed-off pipe which drains to daylight next to the building. It is recommended that this liquid be contained. No permitting is recommended. No EPA forms have been prepared.

4.7 Outfalls 53-14-OPN-12 and 53-14-OPN-13

These outfalls are disconnected on the interior of the building and are no longer in use. Removal of these pipes and sealing the holes in the exterior wall is recommended. No EPA forms were completed.

4.8 Outfall 53-14-OPN-14

This outfall is from two area drains located in the secondary containment area for the transformer oil storage tank. No PCB's are present in this oil. These drains are separately valved and the valves are closed and locked. This outfall drains to daylight into Sandia Canyon. This outfall requires an NOI. No piping changes are recommended. No EPA forms were completed.

5.0 RECOMMENDATIONS FOR BUILDING 53-27

Table 3 is a list of the drains to the building outfalls and Figure 3 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendation.

5.1 Outfall 53-27-OPN-1

This outfall receives flow from two lavatories, one janitor's service sink, one urinal, one toilet and one drinking fountain and flows to the TA-53 sewage treatment plant. No permitting or piping changes are recommended. No EPA forms were prepared.

5.2 Outfall 53-27-OPN-2

This outfall discharges domestic water from a back flow preventer valve to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

5.3 Outfall 53-27-OPN-3

This outfall discharges from a water heater pressure relief valve to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms have been prepared.

5.4 Outfall 53-27-OPN-4

This outfall drains condensate from an evaporative cooler to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

6.0 RECOMMENDATIONS FOR BUILDINGS 53-32, 433, 434, 453, 459, 465, 489, 500, 509, 516, 525, 539, 553, 569, 594, 612, 621, 635, 636, 671, 673, 674, 700, 701, 702, 703, 704, 705, 706, 834, 840, 844, 849, 850, 851, 853, 854, 855, 856, 857, 858, 859, 862, 866, 870, 872, 873, 883, 885, 886, 1020, 1045 AND 1046

These buildings have no drains and no sources of water. No changes or permitting are recommended. No EPA forms were prepared.

7.0 RECOMMENDATIONS FOR BUILDING 53-465

Table 4 is a list of the drains to the building outfall and Figure 4 is a schematic of the piping. The one building outfall discharges condensed water from heating/cooling units to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

8.0 RECOMMENDATIONS FOR BUILDINGS 53-499, 528, 529, 531, 532, 542, 548, 555, 561, 633, 747, 761 AND 825

These buildings have been removed and are no longer in use. No changes or permitting are recommended. No EPA forms were prepared.

9.0 RECOMMENDATIONS FOR BUILDING 53-544

Table 5 is a list of the drains to the building outfalls and Figure 5 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendation.

9.1 Outfall 53-544-OPN-1

This outfall receives flow from one lavatory, one toilet and one drinking fountain and flows to the TA-53 sewage treatment plant. No permitting or piping changes are recommended. No EPA forms were prepared.

9.2 Outfall 53-544-OPN-2

This outfall drains condensate from an evaporative cooler to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were prepared.

10.0 RECOMMENDATIONS FOR BUILDING 53-549

Table 6 is a list of the drains to the building outfall and Figure 6 is a schematic of the piping. The one building outfall drains condensate from an evaporative cooler to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

11.0 RECOMMENDATIONS FOR BUILDING 53-564

Table 7 is a list of the drains to the building outfall and Figure 7 is a schematic of the piping. The one building outfall drains condensate from an evaporative cooler to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

12.0 RECOMMENDATIONS FOR BUILDING 53-566

Table 8 is a list of the drains to the building outfall and Figure 8 is a schematic of the piping. The one building outfall drains condensed water from a cooling unit to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

13.0 RECOMMENDATIONS FOR BUILDING 53-570

Table 9 is a list of the drains to the building outfall and Figure 9 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendations.

13.1 Outfall 53-570-OPN-1

This outfall receives flow from two lavatories, one urinal, two toilets and one drinking fountain and flows to the TA-53 sewage treatment plant. No permitting or piping changes are recommended. No EPA forms were prepared.

13.2 Outfall 53-570-OPN-2

This outfall discharges from a water heater pressure relief valve to daylight into Sandia Canyon at rear of the building. This outfall should be included in an NOI. No permitting is recommended. No EPA forms have been prepared.

14.0 RECOMMENDATIONS FOR BUILDING 53-576

Table 10 is a list of the drains to the building outfalls and Figure 10 is a schematic of the piping. The two outfalls drain condensate from mechanical cooling units to daylight next to the building. These outfalls should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

15.0 RECOMMENDATIONS FOR BUILDING 53-675

Table 11 is a list of the drains to the building outfalls and Figure 11 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendations.

15.1 Outfall 53-675-OPN-1

This outfall receives flow from two lavatories, two toilets and one drinking fountain and flows to the TA-53 sewage treatment plant. No permitting or piping changes are recommended. No EPA forms were prepared.

15.2 Outfall 53-675-OPN-2

This outfall drains condensate from a heating/cooling unit to daylight next to the building. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

16.0 RECOMMENDATIONS FOR BUILDING 53-694

Table 12 is a list of the drains to the building outfalls and Figure 12 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendations.

16.1 Outfall 53-694-OPN-1

This outfall includes a shower drain which flows to sanitary sewer and is no longer in use. It is recommended that the shower drain be plugged at the floor. No permitting is recommended. No EPA forms have been prepared.

16.2 Outfall 53-694-OPN-2

This outfall discharges from a water heater pressure relief valve to daylight. This water heater is no longer in use. It is recommended that the water heater and piping be removed. No permitting is recommended. No EPA forms have been prepared.

16.3 Outfall 53-694-OPN-3

This outfall drains condensed water to daylight next to the building from an evaporative cooler. This outfall should be included in an NOI. No piping changes are recommended. No EPA forms were completed.

17.0 RECOMMENDATIONS FOR BUILDING 53-889

Table 13 is a list of the drains to the building outfalls and Figure 13 is a schematic of the piping. The table lists the drains that connect to the outfall pipes and includes recommendations for changes to the drain piping. The discussion below gives the reasoning for the recommendations.

17.1 Outfall 53-889-OPN-1

This outfall receives flow from four lavatories, two showers, three toilets and one urinal and flows into a sewage lift station which pumps into a sanitary sewer manhole. This manhole drains into the TA-53 sewage treatment plant. No permitting or piping changes are recommended. No EPA forms were prepared.

17.2 Outfall 53-889-OPN-2

This outfall discharges from a water heater pressure relief valve drain to daylight next to the building. This outfall should be included in an NOI. No changes are recommended. No EPA forms have been prepared.

18.0 RECOMMENDATIONS FOR THE SANITARY TREATMENT LAGOONS

Figure 14 is a schematic of the piping and equipment layout for the sanitary treatment lagoons. The three lagoons are the east sanitary lagoon, the west sanitary lagoon and the south radioactive lagoon. The east and west lagoons receive sanitary wastewater and are operated in series and the south lagoon receives the low-level radioactive wastewater stream. The lagoon that receives radioactive wastewater operates as an evaporative lagoon and does not discharge. The two sanitary lagoons once discharged through NPDES outfall 09S. Sanitary waste is now piped to the Sanitary Waste System Consolidation (SWSC) plant and the 09S outfall is not used. It is recommended that the permit for the 09S outfall be deleted. A revised EPA Form 2C is attached for the permitted outfall.

19.0 CONCLUSION

This document provides the information to characterize buildings 4, 5, 14, 27, 32, 433, 434, 453, 456, 459, 465, 489, 499, 500, 509, 516, 525, 528, 529, 531, 532, 539, 542, 544, 548, 549, 553, 555, 561, 564, 566, 569, 570, 576, 594, 612, 621, 633, 635, 636, 671, 673, 674, 675, 694, 700, 701, 702, 703, 704, 705, 706, 747, 761, 825, 834, 840, 844, 849, 850, 851, 853, 854, 855, 856, 857, 858, 859, 862, 866, 870, 872, 873, 883, 885, 886, 889, 1020, 1045, 1046 and the sanitary treatment lagoons of TA-53. Permit application forms have been completed for the following outfalls (Appendix 3).

Form 2C:

1. 53-14-OPN-2 (03A146)
2. Sanitary treatment lagoons (09S)

Permitting is not recommended for the following outfalls, as itemized below.

Areas that do not have any drains:

1.	53-32	2.	53-433	3.	53-434	4.	53-453
5.	53-459	6.	53-465	7.	53-489	8.	53-500
9.	53-509	10.	53-516	11.	53-525	12.	53-539
13.	53-553	14.	53-569	15.	53-594	16.	53-612
17.	53-621	18.	53-635	19.	53-636	20.	53-671
21.	53-673	22.	53-674	23.	53-700	24.	53-701
25.	53-702	26.	53-703	27.	53-704	28.	53-705
29.	53-706	30.	53-834	31.	53-840	32.	53-844
33.	53-849	34.	53-850	35.	53-851	36.	53-853
37.	53-854	38.	53-855	39.	53-856	40.	53-857
41.	53-858	42.	53-859	43.	53-862	44.	53-866
45.	53-870	46.	53-872	47.	53-873	48.	53-883
49.	53-885	50.	53-886	51.	53-1020	52.	53-1045
53.	53-1046						

Areas that have been removed:

1.	53-499	2.	53-528	3.	53-529	4.	53-531
5.	53-532	6.	53-542	7.	53-548	8.	53-555
9.	53-561	10.	53-633	11.	53-747	12.	53-761
13.	53-825						

Discharges from the fire water system:

1. 53-4-OPN-3	2. 53-4-OPN-4	3. 53-14-OPN-6
4. 53-14-OPN-9	5. 53-14-OPN-10	6. 53-14-OPN-11

Discharges to TA-53 sanitary treatment lagoons:

1. 53-4-OPN-1	2. 53-14-OPN-1	3. 53-27-OPN-1
4. 53-544-OPN-1	5. 53-570-OPN-1	6. 53-675-OPN-1
7. 53-694-OPN-1	8. 53-889-OPN-1	

Discharges of condensed water:

1. 53-14-OPN-3	2. 53-14-OPN-4	3. 53-14-OPN-5
4. 53-14-OPN-12	5. 53-14-OPN-13	6. 53-27-OPN-4
7. 53-465-OPN-1	8. 53-544-OPN-2	9. 53-549-OPN-1
10. 53-564-OPN-1	11. 53-566-OPN-1	12. 53-576-OPN-1
13. 53-576-OPN-2	14. 53-675-OPN-2	15. 53-694-OPN-3

Storm water discharges:

1. 53-4-OPN-2	2. 53-14-OPN-14

Discharges from hot water heaters:

1. 53-27-OPN-3	2. 53-570-OPN-2	3. 53-694-OPN-2
4. 53-889-OPN-2		

Discharges from back flow preventers:

1. 53-27-OPN-2

Discharges from air compressors:

1. 53-14-OPN-8

Miscellaneous discharges:

1. 53-14-OPN-7

Recommended corrective actions are outlined in Tables 1 through 13 as well as in the above text. Corrective action should be performed as soon as practicable to minimize the chance of unpermitted discharge of pollutants.

TABLE 1: TA53-4 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-4-OPN-1 SAN SEWER	BFD1	MECH. ROOM	102	CONTAIN COMPR	NO
	BFD2	MECH. ROOM	102	NO CHANGE	
	BFD3	MECH. ROOM	102	NO CHANGE	
	BFD4	MECH. ROOM	102	NO CHANGE	
	BFD5	MACHINE SHOP	110A	NO CHANGE	
	BLV1	RESTROOM	105	NO CHANGE	
	BLV2	RESTROOM	105	NO CHANGE	
	BSD1	BREAK AREA	100B	NO CHANGE	
	BSD2	JANITOR'S CLOSET	103	NO CHANGE	
	BSD3	PHOTO LAB	101	NO CHANGE	
	BSD4	BREAK ROOM	106	NO CHANGE	
	BSD5	MACHINE SHOP	110B	NO CHANGE	
	BTL1	RESTROOM	105	NO CHANGE	
	BTL2	RESTROOM	105	NO CHANGE	
	BUR1	RESTROOM	105	NO CHANGE	
	BWF1	HALLWAY	100B	NO CHANGE	
	1ES1	HALLWAY	200A	NO CHANGE	
	1FD1	CORRIDOR	206	NO CHANGE	
	1FD2	HALLWAY	200A	NO CHANGE	
	1LV1	RESTROOM	209	NO CHANGE	
	1LV2	RESTROOM	213	NO CHANGE	
	1LV3	RESTROOM	213	NO CHANGE	
	1SD1	JANITOR'S CLOSET	211	NO CHANGE	
	1SD2	COPIER ROOM	219	REMOVED	
	1TL1	RESTROOM	209	NO CHANGE	
	1TL2	RESTROOM	209	NO CHANGE	
	1TL3	RESTROOM	213	NO CHANGE	
	1TL4	RESTROOM	213	NO CHANGE	
	1UR1	RESTROOM	213	NO CHANGE	
	1WF1	HALLWAY	200A	NO CHANGE	
53-4-OPN-2	RD1	ROOF		NO CHANGE	NO
	RD2	ROOF		NO CHANGE	
	RD3	ROOF		NO CHANGE	
	RD4	ROOF		NO CHANGE	
53-4-OPN-3		FIRE LINE DRAIN	102	NOI	NO
53-4-OPN-4		FIRE LINE DRAIN	102	NOI	NO

TABLE 2: TA 53-14 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-14-OPN-1 SAN SEWER	1FD1	MECH. ROOM	108	NO CHANGE	NO
	1FD2	BATHROOM	106	NO CHANGE	
	1FD3	BATHROOM	102	NO CHANGE	
	1FD4	MECH. ROOM	N/A	NO CHANGE	
	1LV1	BATHROOM	106	NO CHANGE	
	1LV2	BATHROOM	102	NO CHANGE	
	1LV3	BATHROOM	102	NO CHANGE	
	1SD1	JANITOR'S CLOSET	104	NO CHANGE	
	1SD2	SHOP	101	REMOVED	
	1SD3	SHOP	101A	NO CHANGE	
	1SH1	BATHROOM	106	NO CHANGE	
	1SH2	BATHROOM	102	NO CHANGE	
	1TL1	BATHROOM	106	NO CHANGE	
	1TL2	BATHROOM	102	NO CHANGE	
	1UR1	BATHROOM	102	NO CHANGE	
	1WF1	HALLWAY	101	NO CHANGE	
53-14-OPN-2 03A146		MECH. ROOM		REPIPE	YES
53-14-OPN-3		CONDENS. WATER	EXTER.	NOI	NO
53-14-OPN-4		CONDENS. WATER	EXTER.	NOI	NO
53-14-OPN-5		CONDENS. WATER	EXTER.	NOI	NO
53-14-OPN-6		FIRE LINE DRAIN	101A	NOI	NO
53-14-OPN-7		COMPR. AIR PRV	101A	NO CHANGE	NO
53-14-OPN-8		AIR COMPRESSOR		CONTAINERIZE	NO
53-14-OPN-9		FIRE LINE DRAIN	108	NOI	NO
53-14-OPN-10		FIRE LINE DRAIN	108	NOI	NO
53-14-OPN-11		FIRE LINE DRAIN	108	NOI	NO
53-14-OPN-12		CONDENS. WATER		REMOVE	NO
53-14-OPN-13		CONDENS. WATER		REMOVE	NO
53-14-OPN-14	AD1	CONTAIN. DRAIN	EXTER.	NOI	NO
	AD2	CONTAIN. DRAIN	EXTER.	NOI	

TABLE 3: TA 53-27 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-27-OPN-1 SAN SEWER	1LV1	RESTROOM	N/A	NO CHANGE	NO
	1LV2	RESTROOM	N/A	NO CHANGE	
	1SD1	RESTROOM	N/A	NO CHANGE	
	1TL1	RESTROOM	N/A	NO CHANGE	
	1UR1	RESTROOM	N/A	NO CHANGE	
	1WF1	SHOP	N/A	NO CHANGE	
53-27-OPN-2	N/A	BFP DRAIN	N/A	NOI	NO
53-27-OPN-3	N/A	WATER HTR. DRAI	N/A	NOI	NO
53-27-OPN-4	N/A	CONDENS. WATER	EXTER.	NOI	NO

TABLE 4: TA 53-465 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-465-OPN-1	N/A	CONDENS. WATER	N/A	NOI	NO

TABLE 5: TA53-544 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-544-OPN-1 SAN SEWER	1LV1	RESTROOM	N/A	NO CHANGE	NO
	1TL1	RESTROOM	N/A	NO CHANGE	
	1WF1	RECEPTION AREA	N/A	NO CHANGE	
53-544-OPN-2	N/A	CONDENS. WATER	N/A	NOI	NO

TABLE 6: TA53-549 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-549-OPN-1	N/A	CONDENS. WATER	N/A	NOI	NO

TABLE 7: TA53-564 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-564-OPN-1	N/A	CONDENS. WATER	EXTER.	NOI	NO

TABLE 8: TA53-566 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-566-OPN-1		CONDENS. WATER	EXTER.	NOI	NO

TABLE 9: TA53-570 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-570-OPN-1 SAN SEWER	1LV1	RESTROOM	103	NO CHANGE	NO
	1LV2	RESTROOM	104	NO CHANGE	
	1TL1	RESTROOM	103	NO CHANGE	
	1TL2	RESTROOM	104	NO CHANGE	
	1UR1	RESTROOM	104	NO CHANGE	
	1WF1	OFFICE	101	NO CHANGE	
53-570-OPN-2	N/A	WATER HTR. DRAI	N/A	NOI	NO

TABLE 10: TA53-576 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-576-OPN-1	N/A	CONDENS. WATER	N/A	NOI	NO
53-576-OPN-2	N/A	CONDENS. WATER	N/A	NOI	NO

TABLE 11: TA53-675 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-675-OPN-1 SAN SEWER	1LV1	RESTROOM	N/A	NO CHANGE	NO
	1LV2	RESTROOM	N/A	NO CHANGE	
	1TL1	RESTROOM	N/A	NO CHANGE	
	1TL2	RESTROOM	N/A	NO CHANGE	
	1WF1	RECEPTION AREA	N/A	NO CHANGE	
53-675-OPN-2	N/A	CONDENS. WATER	EXTER.	NOI	NO

TABLE 12: TA 53-694 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-694-OPN-1 SAN SEWER	1SH1	BATHROOM	N/A	PLUG DRAIN	NO
53-694-OPN-2	N/A	WATER HTR. DRAI	N/A	REMOVE	NO
53-694-OPN-3	N/A	CONDENS. WATER	ROOF	NOI	NO

TABLE 13: TA 53-889 DRAIN SUMMARY

OUTFALL NUMBER	ID NUMBER	ROOM ACTIVITY	ROOM NUMBER	STATUS OR RECOMMENDATIONS	EPA FORM PREPARED
53-889-OPN-1 SAN SEWER	1LV1	BATHROOM	101	NO CHANGE	NO
	1LV2	BATHROOM	101	NO CHANGE	
	1LV3	BATHROOM	102	NO CHANGE	
	1LV4	BATHROOM	102	NO CHANGE	
	1SH1	BATHROOM	101	NO CHANGE	
	1SH2	BATHROOM	102	NO CHANGE	
	1TL1	BATHROOM	101	NO CHANGE	
	1TL2	BATHROOM	102	NO CHANGE	
	1TL3	BATHROOM	101	NO CHANGE	
	1UR1	BATHROOM	102	NO CHANGE	
53-889-OPN-2	N/A	WATER HTR. DRAI	102	NOI	NO

TABLE 14
SUMMARY OF
ABBREVIATIONS

ABBREVIATION	MEANING
AC	Air Conditioning Unit
AD	Area Drain
ES	Emergency Shower
FD	Floor Drain
LV	Lavatory
RD	Roof Drain
SD	Sink
SH	Shower
SS	Sanitary Sewer
TL	Toilet
UR	Urinal
WF	Water Fountain

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TA	BLDG	OUTLET PIPING NO	EPA OUTFALL #	DRAIN #	ROOM #	ROOM DESCRIPTION	FLOW RATE		PERIODICITY	SEASONAL	SOURCE TYPES
53		09S	01S VIA 13S	N/A		SEWAGE TREATMENT PLANT	15062	GPD	7 MONTHS/YEAR	yes	TA-53 SANITARY WASTEWATER
53	4	53-4-OPN-1	01S VIA 13S	1ES1	200A	HALLWAY			NO FLOW	no	EMERGENCY SHOWER(REMOVED)
53	4	53-4-OPN-1	01S VIA 13S	1FD1	206	CORRIDOR			FLOW IS NIL	no	FLOOR WASHINGS
53	4	53-4-OPN-1	01S VIA 13S	1FD2	200A	HALLWAY			FLOW IS NIL	no	FLOOR WASHINGS
53	4	53-4-OPN-1	01S VIA 13S	1LV1	209	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	4	53-4-OPN-1	01S VIA 13S	1LV2	213	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	4	53-4-OPN-1	01S VIA 13S	1LV3	213	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	4	53-4-OPN-1	01S VIA 13S	1SD1	211	JANITOR'S CLOSET			5 DAYS A WEEK	no	SERVICE SINK
53	4	53-4-OPN-1	01S VIA 13S	1SD2	219	H.P. LAB			5 DAYS A WEEK	no	HAND WASHING
53	4	53-4-OPN-1	01S VIA 13S	1TL1	209	RESTROOM			5 DAYS A WEEK	no	TOILET
53	4	53-4-OPN-1	01S VIA 13S	1TL2	209	RESTROOM			5 DAYS A WEEK	no	TOILET
53	4	53-4-OPN-1	01S VIA 13S	1TL3	213	RESTROOM			5 DAYS A WEEK	no	TOILET
53	4	53-4-OPN-1	01S VIA 13S	1TL4	213	RESTROOM			5 DAYS A WEEK	no	TOILET
53	4	53-4-OPN-1	01S VIA 13S	1UR1	213	RESTROOM			5 DAYS A WEEK	no	URINAL
53	4	53-4-OPN-1	01S VIA 13S	1WF1	200A	HALLWAY			5 DAYS A WEEK	no	DRINKING WATER
53	4	53-4-OPN-1	01S VIA 13S	BFD1	102	MECHANICAL ROOM			FLOW IS NIL	no	FIRE LINE DRAINS(2)
53	4	53-4-OPN-1	01S VIA 13S	BFD2	102	MECHANICAL ROOM			FLOW IS NIL	no	CONDENSED WATER DRAIN
53	4	53-4-OPN-1	01S VIA 13S	BFD3	102	MECHANICAL ROOM			FLOW IS NIL	no	BACKFLOW PREVENTER DRAIN
53	4	53-4-OPN-1	01S VIA 13S	BFD4	102	MECHANICAL ROOM			FLOW IS NIL	no	PRESSURE RELIEF DRAIN
53	4	53-4-OPN-1	01S VIA 13S	BFD5	100A	SHOP			FLOW IS NIL	no	FLOOR WASHINGS
53	4	53-4-OPN-1	01S VIA 13S	BLV1	105	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	4	53-4-OPN-1	01S VIA 13S	BLV2	105	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	4	53-4-OPN-1	01S VIA 13S	BSD1	100B	BREAK AREA			5 DAYS A WEEK	no	RINSE WATER
53	4	53-4-OPN-1	01S VIA 13S	BSD2	103	JANITOR'S CLOSET			5 DAYS A WEEK	no	SERVICE SINK
53	4	53-4-OPN-1	01S VIA 13S	BSD3	101	PHOTO LAB	2	GPM	4 HR/DAY 20 DAYS/YEAR	yes	PHOTO RINSE WATER
53	4	53-4-OPN-1	01S VIA 13S	BSD4	106	SHOP			5 DAYS A WEEK	no	HAND WASHING
53	4	53-4-OPN-1	01S VIA 13S	BSD5	100B	SHOP			5 DAYS A WEEK	no	HAND WASHING
53	4	53-4-OPN-1	01S VIA 13S	BTL1	105	RESTROOM			5 DAYS A WEEK	no	TOILET
53	4	53-4-OPN-1	01S VIA 13S	BTL2	105	RESTROOM			5 DAYS A WEEK	no	TOILET
53	4	53-4-OPN-1	01S VIA 13S	BUR1	105	RESTROOM			5 DAYS A WEEK	no	URINAL
53	4	53-4-OPN-1	01S VIA 13S	BWF1	100B	HALLWAY			5 DAYS A WEEK	no	DRINKING WATER
53	4	53-4-OPN-2	DAYLIGHT	RD1	N/A	ROOF			MOSTLY DURING SUMMER	yes	STORM WATER
53	4	53-4-OPN-2	DAYLIGHT	RD2	N/A	ROOF			MOSTLY DURING SUMMER	yes	STORM WATER

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TA	BLDG	OUTLET PIPING NO	EPA OUTFALL #	DRAIN #	ROOM #	ROOM DESCRIPTION	FLOW RATE		PERIODICITY	SEASONAL	SOURCE TYPES
53	4	53-4-OPN-2	DAYLIGHT	RD3	N/A	ROOF			MOSTLY DURING SUMMER	yes	STORM WATER
53	4	53-4-OPN-2	DAYLIGHT	RD4	N/A	ROOF			MOSTLY DURING SUMMER	yes	STORM WATER
53	4	53-4-OPN-3	DAYLIGHT	N/A	102	MECHANICAL ROOM			FLOW IS NIL	no	FIRE LINE DRAIN
53	4	53-4-OPN-4	DAYLIGHT	N/A	102	MECHANICAL ROOM			FLOW IS NIL	no	FIRE LINE DRAIN
53	5	53-5	DAYLIGHT	N/A	N/A	CORRIDOR			NO FLOW	no	NONE
53	14	53-14-OPN-01	01S VIA 13S	1FD1	108	MECHANICAL ROOM			FLOW IS NIL	no	BACKFLOW PREVENTERS DRAIN
53	14	53-14-OPN-01	01S VIA 13S	1FD2	106	BATHROOM			5 DAYS A WEEK	no	FLOOR WASHINGS
53	14	53-14-OPN-01	01S VIA 13S	1FD3	102	BATHROOM			5 DAYS A WEEK	no	FLOOR WASHINGS
53	14	53-14-OPN-01	01S VIA 13S	1FD4	N/A	MECHANICAL ROOM			FLOW IS NIL	no	DEIONIZED WATER DRAIN
53	14	53-14-OPN-01	01S VIA 13S	1LV1	106	BATHROOM			5 DAYS A WEEK	no	LAVATORY
53	14	53-14-OPN-01	01S VIA 13S	1LV2	102	BATHROOM			5 DAYS A WEEK	no	LAVATORY
53	14	53-14-OPN-01	01S VIA 13S	1LV3	102	BATHROOM			5 DAYS A WEEK	no	LAVATORY
53	14	53-14-OPN-01	01S VIA 13S	1SD1	104	JANITOR'S CLOSET			5 DAYS A WEEK	no	SERVICE SINK
53	14	53-14-OPN-01	01S VIA 13S	1SD2	101	SHOP			NO FLOW	no	SINK WAS REMOVED
53	14	53-14-OPN-01	01S VIA 13S	1SD3	101A	SHOP			5 DAYS A WEEK	no	HAND WASHING
53	14	53-14-OPN-01	01S VIA 13S	1SH1	106	BATHROOM			5 DAYS A WEEK	no	SHOWER
53	14	53-14-OPN-01	01S VIA 13S	1SH2	102	BATHROOM			5 DAYS A WEEK	no	SHOWER
53	14	53-14-OPN-01	01S VIA 13S	1TL1	106	BATHROOM			5 DAYS A WEEK	no	TOILET
53	14	53-14-OPN-01	01S VIA 13S	1TL2	102	BATHROOM			5 DAYS A WEEK	no	TOILET
53	14	53-14-OPN-01	01S VIA 13S	1UR1	102	BATHROOM			5 DAYS A WEEK	no	URINAL
53	14	53-14-OPN-01	01S VIA 13S	1WF1	101	HALLWAY			5 DAYS A WEEK	no	DRINKING WATER
53	14	53-14-OPN-02	03A146	N/A	N/A	MECHANICAL ROOM	5760	GPY	6 MONTHS/YEAR	yes	TREATED COOLING WATER
53	14	53-14-OPN-03	DAYLIGHT	N/A	N/A	EXTERIOR AREA			5 DAYS A WEEK	no	EQUIP. CONDENSED WATER DR
53	14	53-14-OPN-04	DAYLIGHT	N/A	N/A	EXTERIOR AREA			5 DAYS A WEEK	no	EQUIP. CONDENSED WATER DR
53	14	53-14-OPN-05	DAYLIGHT	N/A	N/A	EXTERIOR AREA			5 DAYS A WEEK	no	EQUIP. CONDENSED WATER DR
53	14	53-14-OPN-06	DAYLIGHT	N/A	101A	SHOP			FLOW IS NIL	no	FIRE LINE DRAIN
53	14	53-14-OPN-07	DAYLIGHT	N/A	101A	SHOP			FLOW IS NIL	no	COMPR. AIR PRESS. RELIEF
53	14	53-14-OPN-08	DAYLIGHT	N/A	N/A	EXTERIOR AREA			FLOW IS NIL	no	AIR COMPRESSOR BLOWOFF
53	14	53-14-OPN-09	DAYLIGHT	N/A	108	MECHANICAL ROOM			FLOW IS NIL	no	FIRE LINE DRAIN
53	14	53-14-OPN-10	DAYLIGHT	N/A	108	MECHANICAL ROOM			FLOW IS NIL	no	FIRE LINE DRAIN
53	14	53-14-OPN-11	DAYLIGHT	N/A	108	MECHANICAL ROOM			FLOW IS NIL	no	FIRE LINE DRAIN
53	14	53-14-OPN-12	DAYLIGHT	N/A	N/A	MECHANICAL ROOM			NO FLOW	no	DISCONNECTED DRAIN
53	14	53-14-OPN-13	DAYLIGHT	N/A	N/A	MECHANICAL ROOM			NO FLOW	no	DISCONNECTED DRAIN

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TA	BLDG	OUTLET PIPING NO	EPA OUTFALL #	DRAIN #	ROOM #	ROOM DESCRIPTION	FLOW RATE		PERIODICITY	SEASONAL	SOURCE TYPES
53	14	53-14-OPN-14	DAYLIGHT	AD1	N/A	EXTERIOR AREA			FLOW IS NIL	no	SECONDARY CONTAINMENT DRAIN
53	14	53-14-OPN-14	DAYLIGHT	AD2	N/A	EXTERIOR AREA			FLOW IS NIL	no	SECONDARY CONTAINMENT DRAIN
53	27	53-27-OPN-1	01S VIA 13S	1LV1	N/A	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	27	53-27-OPN-1	01S VIA 13S	1LV2	N/A	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	27	53-27-OPN-1	01S VIA 13S	1SD1	N/A	RESTROOM			5 DAYS A WEEK	no	SERVICE SINK
53	27	53-27-OPN-1	01S VIA 13S	1TL1	N/A	RESTROOM			5 DAYS A WEEK	no	TOILET
53	27	53-27-OPN-1	01S VIA 13S	1UR1	N/A	RESTROOM			5 DAYS A WEEK	no	URINAL
53	27	53-27-OPN-1	01S VIA 13S	1WF1	N/A	SHOP			5 DAYS A WEEK	no	DRINKING WATER
53	27	53-27-OPN-2	DAYLIGHT	N/A	N/A	BATHROOM			FLOW IS NIL	no	BACKFLOW PREVENTER DRAIN
53	27	53-27-OPN-3	DAYLIGHT	N/A	N/A	BATHROOM			FLOW IS NIL	no	PRESSURE RELIEF DRAIN
53	27	53-27-OPN-4	DAYLIGHT	N/A	N/A	EXTERIOR AREA			FLOW IS NIL	yes	EQUIP. CONDENSED WATER DRAIN
53	32	53-32	N/A	N/A	N/A	STORAGE SHED			NO FLOW	no	NONE
53	433	53-433	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	434	53-434	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	453	53-453	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	456	53-456	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	459	53-459	N/A	N/A	N/A	SEMI-TRAILER			NO FLOW	no	NONE
53	465	53-465-OPN-1	DAYLIGHT	N/A	N/A	OFFICE			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR
53	489	53-489	N/A	N/A	N/A	STORAGE			NO FLOW	no	NONE
53	500	53-500	N/A	N/A	N/A	SEMI-TRAILER			NO FLOW	no	NONE
53	509	53-509	N/A	N/A	N/A	SEMI-TRAILER			NO FLOW	no	NONE
53	516	53-516	N/A	N/A	N/A	SEMI-TRAILER			NO FLOW	no	NONE
53	525	53-525	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	528	53-528	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE (SALVAGED)
53	529	53-529	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE (SALVAGED)
53	531	53-531	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	532	53-532	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE (SALVAGED)
53	539	53-539	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	542	53-542	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE (SALVAGED)
53	544	53-544-OPN-1	01S VIA 13S	1LV1	N/A	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	544	53-544-OPN-1	01S VIA 13S	1TL1	N/A	RESTROOM			5 DAYS A WEEK	no	TOILET
53	544	53-544-OPN-1	01S VIA 13S	1WF1	N/A	RECEPTION AREA			5 DAYS A WEEK	no	DRINKING WATER
53	544	53-544-OPN-2	DAYLIGHT	N/A	N/A	OFFICE			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR

REPORT # 32

TA	BLDG	OUTLET PIPING NO	EPA OUTFALL #	DRAIN #	ROOM #	DESCRIPTION	ROOM RATE	FLOW	PERIODICITY	SEASONAL	SOURCE TYPES
53	548	53-548	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE (SALVAGED)
53	549	[illegible]-OPN-1	DAYLIGHT	N/A	N/A	OFFICE			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR
53	553	53-553	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE
53	555	53-555	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE (SALVAGED)
53	561	53-561	N/A	N/A	N/A	TRAILER			NO FLOW	no	NONE (SALVAGED)
53	564	53-564-OPN-1	DAYLIGHT	N/A	N/A	OFFICE			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR
53	566	53-566-OPN-1	DAYLIGHT	N/A	N/A	OFFICE			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR
53	569	53-569	N/A	N/A	N/A	BREAK ROOM			NO FLOW	no	NONE
53	570	53-570-OPN-1	01S VIA 13S	1LV1	103	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	570	53-570-OPN-1	01S VIA 13S	1LV2	104	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	570	53-570-OPN-1	01S VIA 13S	1TL1	103	RESTROOM			5 DAYS A WEEK	no	TOILET
53	570	53-570-OPN-1	01S VIA 13S	1TL2	104	RESTROOM			5 DAYS A WEEK	no	TOILET
53	570	53-570-OPN-1	01S VIA 13S	1UR1	104	RESTROOM			5 DAYS A WEEK	no	URINAL
53	570	53-570-OPN-1	01S VIA 13S	1WF1	101	RESTROOM			5 DAYS A WEEK	no	DRINKING WATER
53	570	53-570-OPN-2	DAYLIGHT	N/A	N/A	MECHANICAL ROOM			FLOW IS NIL	no	WATER PRESSURE RELIEF DRA
53	576	53-576-OPN-1	DAYLIGHT	N/A	N/A	OFFICE			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR
53	576	53-576-OPN-2	DAYLIGHT	N/A	N/A	OFFICE			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR
53	594	53-594	N/A	N/A	N/A	WELDING SHOP			NO FLOW	no	NONE
53	594	53-594	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	612	53-612	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	621	53-621	N/A	N/A	N/A	STORAGE SHED			NO FLOW	no	NONE
53	635	53-635	N/A	N/A	N/A	STORAGE			NO FLOW	no	NONE
53	636	53-636	N/A	N/A	N/A	STORAGE			NO FLOW	no	NONE
53	671	53-671	N/A	N/A	N/A	STORAGE SHED			NO FLOW	no	NONE
53	673	53-673	N/A	N/A	N/A	STORAGE SHED			NO FLOW	no	NONE
53	674	53-674	N/A	N/A	N/A	WELDING SHOP			NO FLOW	no	NONE
53	675	53-675-OPN-1	01S VIA 13S	1LV1	N/A	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	675	53-675-OPN-1	01S VIA 13S	1LV2	N/A	RESTROOM			5 DAYS A WEEK	no	LAVATORY
53	675	53-675-OPN-1	01S VIA 13S	1TL1	N/A	RESTROOM			5 DAYS A WEEK	no	TOILET
53	675	53-675-OPN-1	01S VIA 13S	1TL2	N/A	RESTROOM			5 DAYS A WEEK	no	TOILET
53	675	53-675-OPN-1	01S VIA 13S	1WF1	N/A	RECEPTION AREA			5 DAYS A WEEK	no	DRINKING WATER
53	675	53-675-OPN-2	DAYLIGHT	N/A	N/A	EXTERIOR AREA			FLOW IS NIL	no	EQUIP. CONDENSED WATER DR
53	694	53-694-OPN-1	01S VIA 13S	1SH1	N/A	BATHROOM			5 DAYS A WEEK	no	SHOWER

REPORT # 32

TA	BLDG	OUTLET PIPING NO	EPA OUTFALL #	DRAIN #	ROOM #	ROOM DESCRIPTION	FLOW RATE		PERIODICITY	SEASONAL	SOURCE TYPES
53	694	53-694-OPN-2	DAYLIGHT	N/A	N/A	WATER HEATER CLOSET			FLOW IS NIL	no	WATER PRESSURE RELIEF DRA
53	694	53-694-OPN-3	DAYLIGHT	N/A	N/A	ROOF			FLOW IS NIL	yes	EQUIP. CONDENSED WATER DR
53	700	53-700	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	701	53-701	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	702	53-702	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	703	53-703	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	704	53-704	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	705	53-705	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	706	53-706	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	834	53-834	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	840	53-840	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	844	53-844	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	850	53-850	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	851	53-851	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	853	53-853	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	854	53-854	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	855	53-855	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	856	53-856	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	857	53-857	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	858	53-858	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	859	53-859	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	862	53-862	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	866	53-866	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	870	53-870	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	872	53-872	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	873	53-873	N/A	N/A	N/A	TRANSPORTAINER			NO FLOW	no	NONE
53	883	53-883	N/A	N/A	N/A	STORAGE SHED			NO FLOW	no	NONE
53	885	53-885	N/A	N/A	N/A	OFFICE BUILDING			NO FLOW	no	NONE
53	886	53-886	N/A	N/A	N/A	OFFICE BUILDING			NO FLOW	no	NONE
53	889	53-889-OPN-1	01S VIA 13S	1LV1	101	BATHROOM			5 DAYS A WEEK	no	LAVATORY
53	889	53-889-OPN-1	01S VIA 13S	1LV2	101	BATHROOM			5 DAYS A WEEK	no	LAVATORY
53	889	53-889-OPN-1	01S VIA 13S	1LV3	102	BATHROOM			5 DAYS A WEEK	no	LAVATORY
53	889	53-889-OPN-1	01S VIA 13S	1LV4	102	BATHROOM			5 DAYS A WEEK	no	LAVATORY

REPORT # 32

TA	BLDG	OUTLET PIPING NO	EPA OUTFALL #	DRAIN #	ROOM #	ROOM DESCRIPTION	FLOW RATE		PERIODICITY	SEASONAL	SOURCE TYPES
53	889	53-889-OPN-1	01S VIA 13S	1SH1	101	BATHROOM			5 DAYS A WEEK	no	SHOWER
53	889	53-889-OPN-1	01S VIA 13S	1SH2	102	BATHROOM			5 DAYS A WEEK	no	SHOWER
53	889	53-889-OPN-1	01S VIA 13S	1TL1	101	BATHROOM			5 DAYS A WEEK	no	TOILET
53	889	53-889-OPN-1	01S VIA 13S	1TL2	102	BATHROOM			5 DAYS A WEEK	no	TOILET
53	889	53-889-OPN-1	01S VIA 13S	1TL3	101	BATHROOM			5 DAYS A WEEK	no	TOILET
53	889	53-889-OPN-1	01S VIA 13S	1UR1	102	BATHROOM			5 DAYS A WEEK	no	URINAL
53	889	53-889-OPN-2	DAYLIGHT	N/A	102	BATHROOM			FLOW IS NIL	no	WATER PRESSURE RELIEF DRA
53	1020	53-1020	N/A	N/A	N/A	METEOROLOGICAL TOWER			NO FLOW	no	NONE
53	1045	53-1045	N/A	N/A	N/A	STORAGE SHED			NO FLOW	no	NONE
53	1046	53-1046	N/A	N/A	N/A	MORGAN SHED			NO FLOW	no	NONE

Please print or type in the unshaded areas only.

EPA I.D. NUMBER *(copy from Item 1 of Form 1)* NM0890010515

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

FORM 2C NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER *(list)*	B. LATITUDE			C. LONGITUDE			D. RECEIVING WATER *(name)*
	1. DEG.	2. MIN.	3. SEC.	1. DEG.	2. MIN.	3. SEC.	
03A146	35	52	02	106	16	23	Tributary to Sandia Canyon, an ephemeral tributary to the Rio Grande

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined *(e.g., for certain mining activities)*, provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUT-FALL NO *(list)*	2. OPERATION(S) CONTRIBUTING FLOW		3. TREATMENT		
	a. OPERATION *(list)*	b. AVERAGE FLOW *(include units)*	a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
146	TA-53-15 Cooling tower blowdown	5760 GPY	None		

OFFICIAL USE ONLY *(effluent guidelines sub-categories)*

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☒ YES *(complete the following table)* ☐ NO *(go to Section III)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(s) CONTRIBUTING FLOW *(list)*	3. FREQUENCY		4. FLOW				
		a. DAYS PER WEEK *(specify average)*	b. MONTHS PER YEAR *(specify average)*	a. FLOW RATE *(in mgd)*		b. TOTAL VOLUME *(specify with units)*		c. DURATION *(in days)*
				1. LONG TERM AVERAGE	2. MAXIMUM DAILY	1. LONG TERM AVERAGE	2. MAXIMUM DAILY	
146	Cooling Tower Blowdown	7	6	3.2 X 10-5	3.2X 10-5	5760 GPY	32	180 d/y

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐ YES *(complete Item III-B)* ☒ NO *(to to Section IV)*

B. Are the limitations in the applicable effluent guideline expressed in terms of production *(or other measure of operation)*?

☐ YES *(complete Item III-C)* ☒ NO *(go to Section IV)*

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION			2. AFFECTED OUTFALLS *(list outfall numbers)*
a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	
N/A			

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☒ YES *(complete the following table)* ☐ NO *(go to Item IV-B)*

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS		3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE	
	a. NO.	b. SOURCE OF DISCHARGE		a. REQUIRED	b. PROJECTED
EPA Docket No. VI-92-1306		All	Complete Waste Stream Characterization surveys and implement corrective actions.	7/31/93	FY96

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs *(or other environmental projects which may affect your discharges)* you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

 CONTINUE ON PAGE 3

CONTINUED FROM PAGE 2

EPA I.D. NUMBER (copy from Item 1 of Form 1)
NM0890010515

Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding — Complete one set of tables for each outfall — Annotate the outfall number in the space provided. NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
N/A			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES (list all such pollutants below) ☒ NO (go to Item VI-B)

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ YES *(identify the test(s) and describe their purposes below)* ☒ NO *(go to Section VIII)*

N/A

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

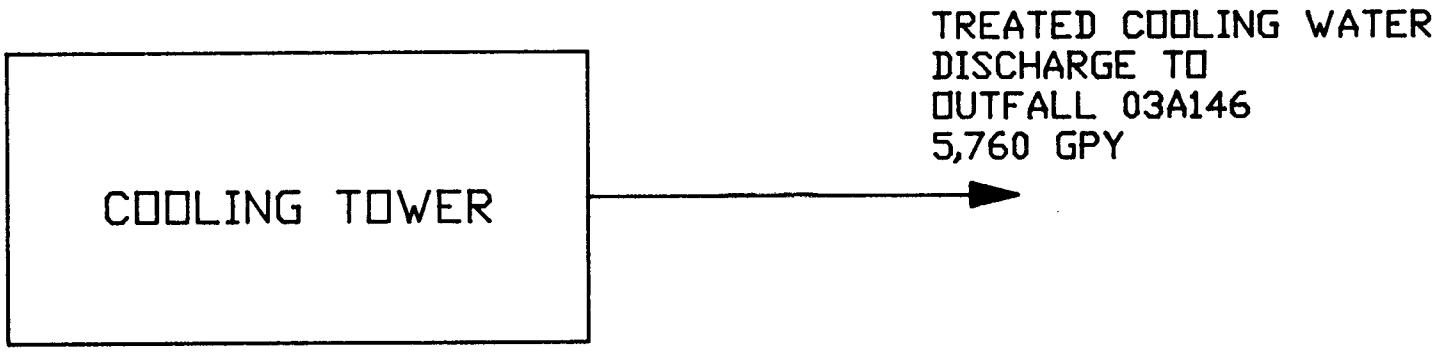
☐ YES *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☒ NO *(go to Section IX)*

A. NAME	B. ADDRESS	C. TELEPHONE *(area code & no.)*	D. POLLUTANTS ANALYZED *(list)*
N/A			

IX. CERTIFICATION

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

A. NAME & OFFICIAL TITLE *(type or print)*	B. PHONE NO. *(area code & no.)*
JERRY L. BELLOWS, AREA MANAGER, DOE	505-667-5105
ALLEN J. TIEDMAN, ASSOC. DIRECTOR FOR OPERATIONS	505-667-9390
C. SIGNATURE	D. DATE SIGNED



TA-53-14
COOLING TOWER

Data from worst case composite.

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets *(use the same format)* instead of completing these pages. SEE INSTRUCTIONS.

EPA I.D. NUMBER *(copy from Item 1 of Form 1)*: NM0890010515

Form Approved. OMB No. 2040-0086 Approval expires 7-31-88

V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 03A146

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	3. UNITS (specify if blank) a. CONCENTRATION	b. MASS	4. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Biochemical Oxygen Demand *(BOD)*	2.0	0.2						mg/l	g/d			
b. Chemical Oxygen Demand *(COD)*	42.0	5.1						mg/l	g/d			
c. Total Organic Carbon *(TOC)*	7.4	0.9						mg/l	g/d			
d. Total Suspended Solids *(TSS)*	7.0	0.8						mg/l	g/d			
e. Ammonia *(as N)*	< .01	< 1.211						mg/l	mg/d			
f. Flow	VALUE 32		VALUE		VALUE			gal/day		VALUE		
g. Temperature *(winter)*	VALUE 36.9 C		VALUE		VALUE			°C		VALUE		
h. Temperature *(summer)*	VALUE		VALUE		VALUE			°C		VALUE		
i. pH	MINIMUM 6.8	MAXIMUM 8.8	MINIMUM 6.0	MAXIMUM 9.0				STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. *(if available)*	2. MARK 'X' a. BELIEVED PRESENT	b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
a. Bromide (24959-67-9)	X		3.24	0.4						mg/l	g/d			
b. Chlorine, Total Residual		X	0.0	0.0						mg/l	mg/d			
c. Color	X		10							units				
d. Fecal Coliform		X												
e. Fluoride (16984-48-8)	X		0.52	63.0						mg/l	mg/d			
f. Nitrate-Nitrite *(as N)*	X		1.13	0.1						mg/l	g/d			

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	3. EFFLUENT a. MAXIMUM DAILY VALUE (2) MASS	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	3. EFFLUENT b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	3. EFFLUENT c. LONG TERM AVRG. VALUE (if available) (2) MASS	3. EFFLUENT d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE (optional) b. NO. OF ANALYSES
g. Nitrogen, Total Organic (as N)	X		2.3	0.3						mg/l	g/d			
h. Oil and Grease		X	< 1.2	< 0.1						mg/l	g/d			
i. Phosphorus (as P), Total (7723-14-0)	X		.306	37.1						mg/l	mg/d			
j. Radioactivity														
(1) Alpha, Total	X		14	1.7						pCi/l	nCi/d			
(2) Beta, Total	X		6.6	0.8						pCi/l	nCi/d			
(3) Radium, Total	X													
(4) Radium 226, Total	X		0.07	8.5						pCi/l	nCi/d			
k. Sulfate (as SO_4) (14808-79-8)	X		143	17.3						mg/l	g/d			
l. Sulfide (as S)	X		70.2	8.5						mg/l	g/d			
m. Sulfite (as SO_3) (14265-45-3)	X		18.8	2.3						mg/l	g/d			
n. Surfactants	X		0.11	13.3						mg/l	mg/d			
o. Aluminum, Total (7429-90-5)	X		0.06	7.3						mg/l	mg/d			
p. Barium, Total (7440-39-3)	X		0.11	13.3						mg/l	mg/d			
q. Boron, Total (7440-42-8)	X		0.33	40.0						mg/l	mg/d			
r. Cobalt, Total (7440-48-4)		X	0.07	8.5						mg/l	mg/d			
s. Iron, Total (7439-89-6)	X		1.1	0.1						mg/l	g/d			
t. Magnesium, Total (7439-95-4)	X		5.8	0.7						mg/l	g/d			
u. Molybdenum, Total (7439-98-7)	X		1.7	0.2						mg/l	g/d			
v. Manganese, Total (7439-96-5)	X		0.05	6.1						mg/l	mg/d			
w. Tin, Total (7440-31-5)		X	< 0.050	< 6.1						mg/l	mg/d			
x. Titanium, Total (7440-32-6)		X	< 0.004	< 0.5						mg/l	mg/d			

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Form Approved.
OMB No. 2040-0086
Approval expires 7-31-88

CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X	< 0.050	< 6.1						mg/l	mg/d			
2M. Arsenic, Total (7440-38-2)		X		0.04	4.8						mg/l	mg/d			
3M. Beryllium, Total, 7440-41-7)			X	< 0.1	< 12.1						mg/l	mg/d			
4M. Cadmium, Total (7440-43-9)		X		.004	0.5						mg/l	mg/d			
5M. Chromium, Total (7440-47-3)		X		.260	31.5						mg/l	mg/d			
6M. Copper, Total (7440-50-8)		X		0.1	12.1						mg/l	mg/d			
7M. Lead, Total (7439-92-1)		X		.050	6.1						mg/l	mg/d			
8M. Mercury, Total (7439-97-6)			X	< .0002	< 0.0						mg/l	mg/d			
9M. Nickel, Total (7440-02-0)		X		.28	33.9						mg/l	mg/d			
10M. Selenium, Total (7782-49-2)			X	< .001	< 0.1						mg/l	mg/d			
11M. Silver, Total (7440-22-4)			X	< 0.01	< 1.2						mg/l	mg/d			
12M. Thallium, Total (7440-28-0)		X		0.51	61.8						mg/l	mg/d			
13M. Zinc, Total (7440-66-6)		X		.071	8.6						mg/l	mg/d			
14M. Cyanide, Total (57-12-5)		X		.033	4.0						mg/l	mg/d			
15M. Phenols, Total			X	< .01	< 1.2						mg/l	mg/d			
DIOXIN															
2,3,7,8-Tetrachlorodibenzo-P-Dioxin (1764-01-6)			X	DESCRIBE RESULTS											

CONTINUE ON REVERSE

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE		b. MAXIMUM 30 DAY VALUE (if available)		c. LONG TERM AVRG. VALUE (if available)		d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE		b. NO. OF ANALYSES
				(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS	(1) CONCENTRATION	(2) MASS				(1) CONCENTRATION	(2) MASS	
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X	< 0.005	< 0.6						mg/l	mg/d			
4V. Bis (Chloromethyl) Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X	< 0.005	< 0.6						mg/l	mg/d			
6V. Carbon Tetrachloride (56-23-5)			X	< 0.005	< 0.6						mg/l	mg/d			
7V. Chlorobenzene (108-90-7)			X	< 0.005	< 0.6						mg/l	mg/d			
8V. Chlorodibromomethane (124-48-1)			X	< 0.005	< 0.6						mg/l	mg/d			
9V. Chloroethane (75-00-3)			X	< 0.010	< 0.00						mg/l	mg/d			
10V. 2-Chloroethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X	< 0.005	< 0.6						mg/l	mg/d			
12V. Dichlorobromomethane (75-27-4)			X	< 0.005	< 0.6						mg/l	mg/d			
13V. Dichlorodifluoromethane (75-71-8)			X												
14V. 1,1-Dichloroethane (75-34-3)			X	< 0.005	< 0.6						mg/l	mg/d			
15V. 1,2-Dichloroethane (107-06-2)			X	< 0.005	< 0.6						mg/l	mg/d			
16V. 1,1-Dichloroethylene (75-35-4)			X	< 0.005	< 0.6						mg/l	mg/d			
17V. 1,2-Dichloropropane (78-87-5)			X	< 0.005	< 0.6						mg/l	kg/d			
18V. 1,3-Dichloropropylene (542-75-6)			X	< 0.005	< 0.6						mg/l	mg/d			
19V. Ethylbenzene (100-41-4)			X	< 0.005	< 0.6	X					mg/l	mg/d			
20V. Methyl Bromide (74-83-9)			X	< 0.010	< 1.2						mg/l	mg/d			
21V. Methyl Chloride (74-87-3)			X	< 0.010	< 1.2						mg/l	mg/d			

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
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OMB No. 2040-0086
Approval expires 7-31-88

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)			X	< 0.005	< 0.6						mg/l	mg/d			
23V. 1,1,2,2-Tetrachloroethane (79-34-5)			X	< 0.005	< 0.6						mg/l	mg/d			
24V. Tetrachloroethylene (127-18-4)			X	< 0.005	< 0.6						mg/l	mg/d			
25V. Toluene (108-88-3)			X	< 0.005	< 0.6						mg/l	mg/d			
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X	< 0.005	< 0.6						mg/l	mg/d			
27V. 1,1,1-Trichloroethane (71-55-6)			X	< 0.005	< 0.6						mg/l	mg/d			
28V. 1,1,2-Trichloroethane (79-00-5)			X	< 0.005	< 0.6						mg/l	mg/d			
29V. Trichloroethylene (79-01-6)			X	< 0.005	< 0.6						mg/l	mg/d			
30V. Trichlorofluoromethane (75-69-4)			X	< 0.005	< 0.6						mg/l	mg/d			
31V. Vinyl Chloride (75-01-4)			X	< 0.010	< 1.2						mg/l	mg/d			
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X	< 0.010	< 1.2						mg/l	mg/d			
2A. 2,4-Dichlorophenol (120-83-2)			X	< 0.010	< 1.2						mg/l	mg/d			
3A. 2,4-Dimethylphenol (105-67-9)			X	< 0.010	< 1.2						mg/l	mg/d			
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X	< 0.010	< 1.2						mg/l	mg/d			
5A. 2,4-Dinitrophenol (51-28-5)			X	< 0.010	< 1.2						mg/l	mg/d			
6A. 2-Nitrophenol (88-75-5)			X	< 0.010	< 1.2						mg/l	mg/d			
7A. 4-Nitrophenol (100-02-7)			X	< 0.010	< 1.2						mg/l	mg/d			
8A. P-Chloro-M-Cresol (59-50-7)			X	< 0.010	< 1.2						mg/l	mg/d			
9A. Pentachlorophenol (87-86-5)			X	< 0.010	< 1.2						mg/l	mg/d			
10A. Phenol (108-95-2)			X	< 0.010	< 1.2						mg/l	mg/d			
11A. 2,4,6-Trichlorophenol (88-06-2)			X	< 0.010	< 1.2						mg/l	mg/d			

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X	< 0.010	< 1.2						mg/l	mg/d			
2B. Acenaphtylene (208-96-8)			X	< 0.010	< 1.2						mg/l	mg/d			
3B. Anthracene (120-12-7)			X	< 0.010	< 1.2						mg/l	mg/d			
4B. Benzidine (92-87-5)			X	< 0.010	< 1.2						mg/l	mg/d			
5B. Benzo *(a)* Anthracene (56-55-3)			X	< 0.010	< 1.2						mg/l	mg/d			
6B. Benzo *(a)* Pyrene (50-32-8)			X	< 0.010	< 1.2						mg/l	mg/d			
7B. 3,4-Benzo-fluoranthene (205-99-2)			X	< 0.010	< 1.2						mg/l	mg/d			
8B. Benzo *(ghi)* Perylene (191-24-2)			X	< 0.010	< 1.2						mg/l	mg/d			
9B. Benzo *(k)* Fluoranthene (207-08-9)			X	< 0.010	< 1.2						mg/l	mg/d			
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)			X	< 0.010	< 1.2						mg/l	mg/d			
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)			X	< 0.010	< 1.2						mg/l	mg/d			
12B. Bis *(2-Chloroisa-propyl)* Ether (102-60-1)			X	< 0.010	< 1.2						mg/l	mg/d			
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)			X	< 0.010	< 1.2						mg/l	mg/d			
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)			X	< 0.010	< 1.2						mg/l	mg/d			
15B. Butyl Benzyl Phthalate (85-68-7)			X	< 0.010	< 1.2						mg/l	mg/d			
16B. 2-Chloro-naphthalene (91-58-7)			X	< 0.010	< 1.2						mg/l	mg/d			
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X	< 0.010	< 1.2						mg/l	mg/d			
18B. Chrysene (218-01-9)			X	< 0.010	< 1.2						mg/l	mg/d			
19B. Dibenzo *(a,h)* Anthracene (53-70-3)			X	< 0.010	< 1.2						mg/l	mg/d			
20B. 1,2-Dichloro-benzene (95-50-1)			X	< 0.010	< 1.2						mg/l	mg/d			
21B. 1,3-Dichloro-benzene (541-73-1)			X	< 0.010	< 1.2						mg/l	mg/d			

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
NM0890010515	03A146

Form 2. 2nd.
OMB No. 2040-0086
Approval expires 7-31-88

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (continued)															
22B. 1,4-Dichlorobenzene (106-46-7)			X	< 0.010	< 1.2						mg/l	mg/d			
23B. 3,3'-Dichlorobenzidine (91-94-1)			X	< 0.010	< 1.2						mg/l	mg/d			
24B. Diethyl Phthalate (84-66-2)			X	< 0.010	< 1.2						mg/l	mg/d			
25B. Dimethyl Phthalate (131-11-3)			X	< 0.010	< 1.2						mg/l	mg/d			
26B. Di-N-Butyl Phthalate (84-74-2)			X	< 0.010	< 1.2						mg/l	mg/d			
27B. 2,4-Dinitrotoluene (121-14-2)			X	< 0.010	< 1.2						mg/l	mg/d			
28B. 2,6-Dinitrotoluene (606-20-2)			X	< 0.010	< 1.2						mg/l	mg/d			
29B. Di-N-Octyl Phthalate (117-84-0)			X	< 0.010	< 1.2						mg/l	mg/d			
30B. 1,2-Diphenylhydrazine (as Azobenzene) (122-66-7)			X	< 0.010	< 1.2						mg/l	mg/d			
31B. Fluoranthene (206-44-0)			X	< 0.010	< 1.2						mg/l	mg/d			
32B. Fluorene (86-73-7)			X	< 0.010	< 1.2						mg/l	mg/d			
33B. Hexachlorobenzene (118-74-1)			X	< 0.010	< 1.2						mg/l	mg/d			
34B. Hexachlorobutadiene (87-68-3)			X	< 0.010	< 1.2						mg/l	mg/d			
35B. Hexachlorocyclopentadiene (77-47-4)			X	< 0.010	< 1.2						mg/l	mg/d			
36B. Hexachloroethane (67-72-1)			X	< 0.010	< 1.2						mg/l	mg/d			
37B. Indeno (1,2,3-cd) Pyrene (193-39-5)			X	< 0.010	< 1.2						mg/l	mg/d			
38B. Isophorone (78-59-1)			X	< 0.010	< 1.2						mg/l	mg/d			
39B. Naphthalene (91-20-3)			X	< 0.010	< 1.2						mg/l	mg/d			
40B. Nitrobenzene (98-95-3)			X	< 0.010	< 1.2						mg/l	mg/d			
41B. N-Nitrosodimethylamine (62-75-9)			X	< 0.010	< 1.2						mg/l	mg/d			
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X	< 0.010	< 1.2						mg/l	mg/d			

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION — BASE/NEUTRAL COMPOUNDS *(continued)*															
43B. N-Nitrosodiphenylamine (86-30-6)			X	< 0.010	< 0.2						mg/l	g/d			
44B. Phenanthrene (85-01-8)			X	< 0.010	< 0.2						mg/l	g/d			
45B. Pyrene (129-00-0)			X	< 0.010	< 0.2						mg/l	g/d			
46B. 1,2,4-Trichlorobenzene (120-82-1)			X	< 0.010	< 0.2						mg/l	g/d			
GC/MS FRACTION — PESTICIDES															
1P. Aldrin (309-00-2)			X	< 0.06	< 1.4						ug/l	mg/d			
2P. α-BHC (319-84-6)			X	< 0.04	< 0.9						ug/l	mg/d			
3P. β-BHC (319-85-7)			X	< 0.1	< 2.3						ug/l	mg/d			
4P. γ-BHC (58-89-9)			X	< 0.03	< 0.7						ug/l	mg/d			
5P. δ-BHC (319-86-8)			X	< 0.12	< 2.7						ug/l	mg/d			
6P. Chlordane (57-74-9)			X	< 0.25	< 5.7						ug/l	mg/d			
7P. 4,4'-DDT (50-29-3)			X	< 0.06	< 1.4						ug/l	mg/d			
8P. 4,4'-DDE (72-55-9)			X	< 0.08	< 1.8						ug/l	mg/d			
9P. 4,4'-DDD (72-54-8)			X	< 0.08	< 1.8						ug/l	mg/d			
10P. Dieldrin (60-57-1)			X	< 0.08	< 1.8						ug/l	mg/d			
11P. α-Endosulfan (115-29-7)			X	< 0.05	< 1.1						ug/l	mg/d			
12P. β-Endosulfan (115-29-7)			X	< 0.08	< 1.8						ug/l	mg/d			
13P. Endosulfan Sulfate (1031-07-8)			X	< 0.09	< 2.0						ug/l	mg/d			
14P. Endrin (72-20-8)			X	< 0.06	< 1.4						ug/l	mg/d			
15P. Endrin Aldehyde (7421-93-4)			X	< 0.62	< 14.1						ug/l	mg/d			
16P. Heptachlor (76-44-8)			X	< 0.03	< 0.7						ug/l	mg/d			

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EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
NM0890010515	03A146

Form Approved
OMB No. 2040-0086
Approval expires 7-31-88

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – PESTICIDES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			X	< 0.08	< 1.8						ug/l	mg/d			
18P. PCB-1242 (53469-21-9)			X	< 0.71	< 16.1						ug/l	mg/d			
19P. PCB-1254 (11097-69-1)			X	< 0.71	< 16.1						ug/l	mg/d			
20P. PCB-1221 (11104-28-2)			X	N.D.											
21P. PCB-1232 (11141-16-5)			X	N.D.											
22P. PCB-1248 (12672-29-6)			X	N.D.											
23P. PCB-1260 (11096-82-5)			X	< 0.71	< 16.1						ug/l	mg/d			
24P. PCB-1016 (12674-11-2)			X	N.D.											
25P. Toxaphene (8001-35-2)			X	< 2.5	< 56.8						ug/l	mg/d			

Please print or type in the unshaded areas only.

EPA I.D. NUMBER (copy from Item 1 of Form 1)
NM 0890010515

Form Approved
OMB No. 2040-0086
Approval expires 7-31-88

FORM 2C NPDES

EPA

U.S. ENVIRONMENTAL PROTECTION AGENCY
APPLICATION FOR PERMIT TO DISCHARGE WASTEWATER
EXISTING MANUFACTURING, COMMERCIAL, MINING AND SILVICULTURAL OPERATIONS
Consolidated Permits Program

I. OUTFALL LOCATION

For each outfall, list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

A. OUTFALL NUMBER (list)	B. LATITUDE 1. DEG.	2. MIN.	3. SEC.	C. LONGITUDE 1. DEG.	2. MIN.	3. SEC.	D. RECEIVING WATER (name)
09S	35	52	1	106	14	57	Los Alamos Canyon

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfalls. If a water balance cannot be determined *(e.g., for certain mining activities)*, provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.

B. For each outfall, provide a description of: (1) All operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) The average flow contributed by each operation; and (3) The treatment received by the wastewater. Continue on additional sheets if necessary.

1. OUTFALL NO. (list)	2. OPERATION(S) CONTRIBUTING FLOW a. OPERATION (list)	b. AVERAGE FLOW (include units)	3. TREATMENT a. DESCRIPTION	b. LIST CODES FROM TABLE 2C-1	
09S	TA-53 Sewage Treatment	15,062 GPD	Stabilization Ponds (2)	3G	
	Plant Sanitary				
	Wastewater				
	Septage				

OFFICIAL USE ONLY *(effluent guidelines sub-categories)*

CONTINUED FROM THE FRONT

C. Except for storm runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

X YES *(complete the following table)* ☐ NO *(go to Section III)*

1. OUTFALL NUMBER *(list)*	2. OPERATION(s) CONTRIBUTING FLOW *(list)*	3. FREQUENCY a. DAYS PER WEEK *(specify average)*	3. FREQUENCY b. MONTHS PER YEAR *(specify average)*	4. FLOW a. FLOW RATE *(in mgd)* 1. LONG TERM AVERAGE	4. FLOW a. FLOW RATE *(in mgd)* 2. MAXIMUM DAILY	4. FLOW b. TOTAL VOLUME *(specify with units)* 1. LONG TERM AVERAGE	4. FLOW b. TOTAL VOLUME *(specify with units)* 2. MAXIMUM DAILY	4. FLOW c. DURATION *(in days)*
09S	Stabilization Pond (2)		7	.015 MGD	.252 MGD	15,062 GPD	252.8 MGD	Feb. 21, 1989

III. PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☐ YES *(complete Item III-B)* X NO *(to to Section IV)*

B. Are the limitations in the applicable effluent guideline expressed in terms of production *(or other measure of operation)*?

☐ YES *(complete Item III-C)* X NO *(go to Section IV)*

C. If you answered "yes" to Item III-B, list the quantity which represents an actual measurement of your level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

1. AVERAGE DAILY PRODUCTION a. QUANTITY PER DAY	b. UNITS OF MEASURE	c. OPERATION, PRODUCT, MATERIAL, ETC. *(specify)*	2. AFFECTED OUTFALLS *(list outfall numbers)*

IV. IMPROVEMENTS

A. Are you now required by any Federal, State or local authority to meet any implementation schedule for the construction, upgrading or operation of wastewater treatment equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders, and grant or loan conditions.

☐ YES *(complete the following table)* X NO *(go to Item IV-B)*

1. IDENTIFICATION OF CONDITION, AGREEMENT, ETC.	2. AFFECTED OUTFALLS a. NO.	2. AFFECTED OUTFALLS b. SOURCE OF DISCHARGE	3. BRIEF DESCRIPTION OF PROJECT	4. FINAL COMPLIANCE DATE a. REQUIRED	4. FINAL COMPLIANCE DATE b. PROJECTED

B. OPTIONAL: You may attach additional sheets describing any additional water pollution control programs *(or other environmental projects which may affect your discharges)* you now have underway or which you plan. Indicate whether each program is now underway or planned, and indicate your actual or planned schedules for construction. ☐ MARK "X" IF DESCRIPTION OF ADDITIONAL CONTROL PROGRAMS IS ATTACHED

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V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding — Complete one set of tables for each outfall — Annotate the outfall number in the space provided.
NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered V-1 through V-9.

D. Use the space below to list any of the pollutants listed in Table 2c-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

1. POLLUTANT	2. SOURCE	1. POLLUTANT	2. SOURCE
N/A			

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

Is any pollutant listed in Item V-C a substance or a component of a substance which you currently use or manufacture as an intermediate or final product or byproduct?

☐ YES (list all such pollutants below) ☒ NO (go to Item VI-B)

CONTINUED FROM THE FRONT

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or receiving water in relation to your discharge within the last 3 years?

☐ YES *(identify the test(s) and describe their purposes below)* ☒ NO *(go to Section VIII)*

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

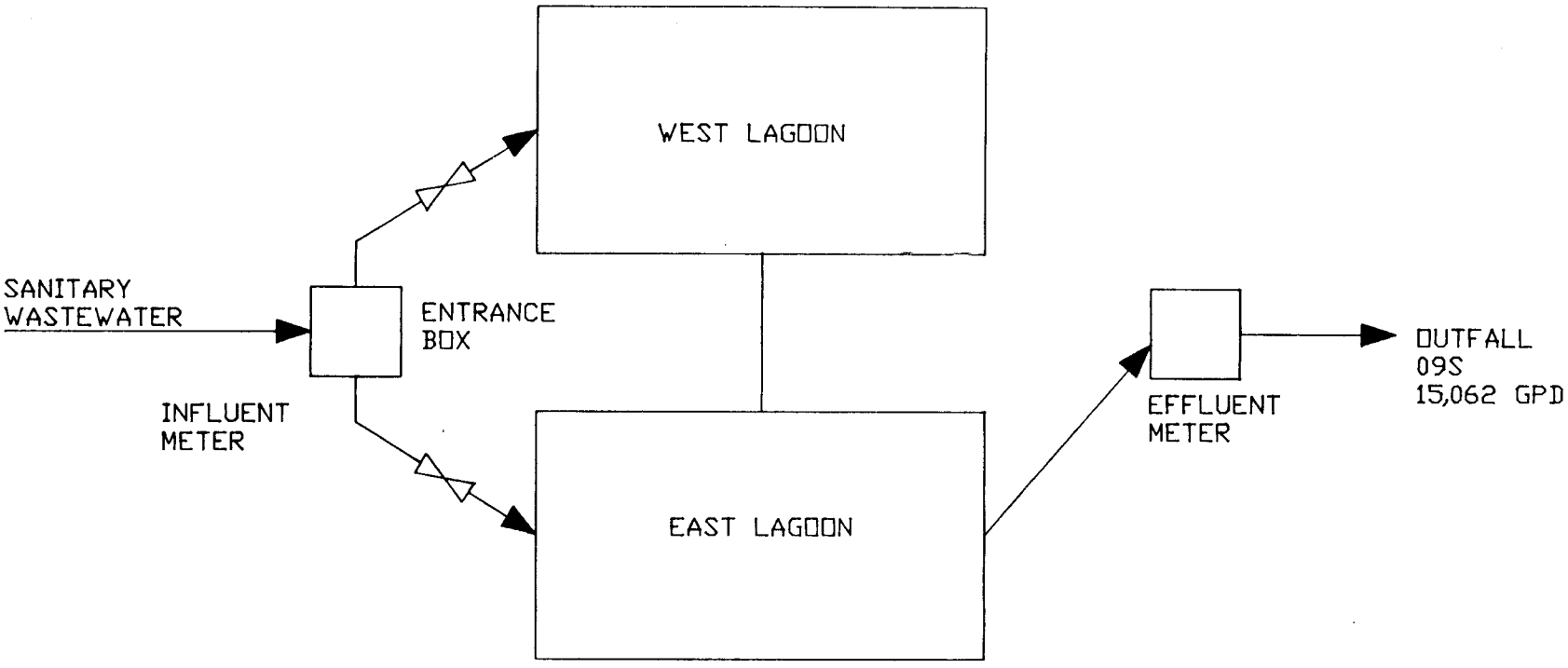
☐ YES *(list the name, address, and telephone number of, and pollutants analyzed by, each such laboratory or firm below)* ☒ NO *(go to Section IX)*

A. NAME	B. ADDRESS	C. TELEPHONE (area code & no.)	D. POLLUTANTS ANALYZED (list)

IX. CERTIFICATION

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

A. NAME & OFFICIAL TITLE (type or print)	B. PHONE NO. (area code & no.)
Harry T. Season, Jr., Acting Area Manager, DOE	(505) 667-5105
Allen J. Tiedman, Associate Director for Operations, LANL	(505) 667-5061
C. SIGNATURE	D. DATE SIGNED



TA-53 SANITARY TREATMENT PLANT

NOT TO SCALE

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets *(use the same format)* instead of completing these pages. SEE INSTRUCTIONS.

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V. INTAKE AND EFFLUENT CHARACTERISTICS *(continued from page 3 of Form 2-C)*

OUTFALL NO. 09S

PART A - You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.

1. POLLUTANT	2. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (2) MASS	d. NO. OF ANALYSES	3. UNITS (specify if blank) a. CONCENTRATION	3. UNITS b. MASS	4. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	4. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	4. INTAKE b. NO. OF ANALYSES
a. Biochemical Oxygen Demand *(BOD)*	50.2	2.9						mg/l	kg/d			
b. Chemical Oxygen Demand *(COD)*	244.1	13.9						mg/l	kg/d			
c. Total Organic Carbon *(TOC)*	98.0	5.6						mg/l	kg/d			
d. Total Suspended Solids *(TSS)*	191.	10.9						mg/l	kg/d			
e. Ammonia *(as N)*	3.9	222.3						mg/l	g/d			
f. Flow	VALUE 15062		VALUE		VALUE			gal/day		VALUE		
g. Temperature *(winter)*	VALUE 11.0		VALUE		VALUE			°C		VALUE		
h. Temperature *(summer)*	VALUE		VALUE		VALUE			°C		VALUE		
i. pH	MINIMUM	MAXIMUM 9.6	MINIMUM	MAXIMUM				STANDARD UNITS				

PART B - Mark "X" in column 2-a for each pollutant you know or have reason to believe is present. Mark "X" in column 2-b for each pollutant you believe to be absent. If you mark column 2a for any pollutant which is limited either directly, or indirectly but expressly, in an effluent limitations guideline, you must provide the results of at least one analysis for that pollutant. For other pollutants for which you mark column 2a, you must provide quantitative data or an explanation of their presence in your discharge. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. *(if available)*	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	5. INTAKE a. LONG TERM AVERAGE VALUE (2) MASS	5. INTAKE b. NO. OF ANALYSES
a. Bromide (24959-67-9)		X	< 5.0	< 285.0						mg/l	g/d			
b. Chlorine, Total Residual		X	0.0	0.0						mg/l	mg/d			
c. Color	X		575							units				
d. Fecal Coliform	X		5952.5							CFU/100 ml				
e. Fluoride (16984-48-8)	X		2.16	123.1						mg/l	g/d			
f. Nitrate-Nitrite *(as N)*	X		1.15	65.6						mg/l	g/d			

CONTINUE ON REVERSE

ITEM V-B CONTINUED FROM FRONT

1. POLLUTANT AND CAS NO. (if available)	2. MARK 'X' a. BELIEVED PRESENT	2. MARK 'X' b. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	4. UNITS b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
g. Nitrogen, Total Organic (as N)	X		29.6	1.7						mg/l	kg/d			
h. Oil and Grease		X	< 510.9	< 29.1						mg/l	kg/d			
i. Phosphorus (as P), Total (7723-14-0)	X		1.67	95.2						mg/l	g/d			
j. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium, Total		X												
(4) Radium 226, Total		X												
k. Sulfate (as SO_4) (14808-79-8)	X		37.5	2.1						mg/l	kg/d			
l. Sulfide (as S)	X		0.14	8.0						mg/l	g/d			
m. Sulfite (as SO_3) (14265-45-3)	X		0.0							mg/l	g/d			
n. Surfactants	X		0.33	18.8						mg/l	g/d			
o. Aluminum, Total (7429-90-5)	X		0.05	2.9						mg/l	g/d			
p. Barium, Total (7440-39-3)	X		0.1	5.7						mg/l	g/d			
q. Boron, Total (7440-42-8)	X		0.35	20.0						mg/l	g/d			
r. Cobalt, Total (7440-48-4)		X	< 0.89	< 50.7						mg/l	g/d			
s. Iron, Total (7439-89-6)	X		0.68	38.8						mg/l	g/d			
t. Magnesium, Total (7439-95-4)	X		9.7	553.0						mg/l	g/d			
u. Molybdenum, Total (7439-98-7)	X		.055	3.1						mg/l	g/d			
v. Manganese, Total (7439-96-5)	X		.046	2.6						mg/l	g/d			
w. Tin, Total (7440-31-5)		X	< .050	< 2.9						mg/l	g/d			
x. Titanium, Total (7440-32-6)		X	< .006	< 342.1						mg/l	mg/d			

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CONTINUED FROM PAGE 3 OF FORM 2-C

PART C - If you are a primary industry and this outfall contains process wastewater, refer to Table 2c-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark "X" in column 2-a for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark column 2-a *(secondary industries, nonprocess wastewater outfalls, and nonrequired GC/MS fractions)*, mark "X" in column 2-b for each pollutant you know or have reason to believe is present. Mark "X" in column 2-c for each pollutant you believe is absent. If you mark column 2a for any pollutant, you must provide the results of at least one analysis for that pollutant. If you mark column 2b for any pollutant, you must provide the results of at least one analysis for that pollutant if you know or have reason to believe it will be discharged in concentrations of 10 ppb or greater. If you mark column 2b for acrolein, acrylonitrile, 2,4 dinitrophenol, or 2-methyl-4, 6 dinitrophenol, you must provide the results of at least one analysis for each of these pollutants which you know or have reason to believe that you discharge in concentrations of 100 ppb or greater. Otherwise, for pollutants for which you mark column 2b, you must either submit at least one analysis or briefly describe the reasons the pollutant is expected to be discharged. Note that there are 7 pages to this part; please review each carefully. Complete one table *(all 7 pages)* for each outfall. See instructions for additional details and requirements.

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
METALS, CYANIDE, AND TOTAL PHENOLS															
1M. Antimony, Total (7440-36-0)			X	< .050	< 2.9						mg/l	g/d			
2M. Arsenic, Total (7440-38-2)		X		3.3	188.1						mg/l	g/d			
3M. Beryllium, Total, 7440 41-7)			X	< .001	< 57.0						mg/l	mg/d			
4M. Cadmium, Total (7440-43 9)		X		0.29	16.5						mg/l	g/d			
5M. Chromium, Total (7440-47-3)		X		.013	741.1						mg/l	mg/d			
6M. Copper, Total (7440-50-8)		X		.029	1.7						mg/l	g/d			
7M. Lead, Total (7439-92-1)		X		.015	855.1						mg/l	mg/d			
8M. Mercury, Total (7439-97-6)			X	< .0002	< 11.4						mg/l	mg/d			
9M. Nickel, Total (7440-02-0)		X		0.02	1.1						mg/l	g/d			
10M. Selenium, Total (7782-49-2)			X	< .001	< 57.0						mg/l	mg/d			
11M. Silver, Total (7440-22-4)			X	< 0.01	570.1						mg/l	mg/d			
12M. Thallium, Total (7440 28-0)		X		2.34	133.4						mg/l	g/d			
13M. Zinc, Total (7440 66-6)		X		0.19	10.8						mg/l	g/d			
14M. Cyanide, Total (57-12-5)		X		.034	1.9						mg/l	g/d			
15M. Phenols, Total		X		.014	798.1						mg/l	mg/d			
DIOXIN															
2,3,7,8 Tetra chlorodibenzo P Dioxin (1764 01 6)			X	DESCRIBE RESULTS											

CONTINUE ON REVERSE

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – VOLATILE COMPOUNDS															
1V. Acrolein (107-02-8)			X												
2V. Acrylonitrile (107-13-1)			X												
3V. Benzene (71-43-2)			X	< .005	< 285.0						mg/l	mg/d			
4V. Bis (Chloromethyl) Ether (542-88-1)			X												
5V. Bromoform (75-25-2)			X	< .005	< 285.0						mg/l	mg/d			
6V. Carbon Tetrachloride (56-23-5)			X	< .005	< 285.0						mg/l	mg/d			
7V. Chlorobenzene (108-90-7)			X	< .005	< 285.0						mg/l	mg/d			
8V. Chlorodibromomethane (124-48-1)			X	< .005	< 285.0						mg/l	mg/d			
9V. Chloroethane (75-00-3)			X	< .010	< 570.1						mg/l	mg/d			
10V. 2-Chloroethylvinyl Ether (110-75-8)			X	< .050	< 2.9						mg/l	g/d			
11V. Chloroform (67-66-3)			X	< .005	< 285.0						mg/l	mg/d			
12V. Dichlorobromomethane (75-27-4)			X	< .005	< 285.0						mg/l	mg/d			
13V. Dichlorodifluoromethane (75-71-8)			X	< .010	< 570.1						mg/l	mg/d			
14V. 1,1-Dichloroethane (75-34-3)			X	< .005	< 285.0						mg/l	mg/d			
15V. 1,2-Dichloroethane (107-06-2)			X	< .005	< 285.0						mg/l	mg/d			
16V. 1,1-Dichloroethylene (75-35-4)			X	< .005	< 285.0						mg/l	mg/d			
17V. 1,2-Dichloropropane (78-87-5)			X	< .005	< 285.0						mg/l	mg/d			
18V. 1,3-Dichloropropylene (542-75-6)															
19V. Ethylbenzene (100-41-4)			X	< .005	< 285.0						mg/l	mg/d			
20V. Methyl Bromide (74-83-9)			X	< .010	< 570.1						mg/l	mg/d			
21V. Methyl Chloride (74-87-3)			X	< .010	< 570.1						mg/l	mg/d			

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1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – VOLATILE COMPOUNDS *(continued)*															
22V. Methylene Chloride (75-09-2)			X	< .005	< 285.0						mg/l	mg/d			
23V. 1,1,2,2-Tetrachloroethane – (79-34-5)			X	< .005	< 285.0						mg/l	mg/d			
24V. Tetrachloroethylene (127-18-4)			X	< .005	< 285.0						mg/l	mg/d			
25V. Toluene (108-88-3)			X	< .005	< 285.0						mg/l	mg/d			
26V. 1,2-Trans-Dichloroethylene (156-60-5)			X	< .005	< 285.0						mg/l	mg/d			
27V. 1,1,1-Trichloroethane (71-55-6)			X	< .005	< 285.0						mg/l	mg/d			
28V. 1,1,2-Trichloroethane (79-00-5)			X	< .005	< 285.0						mg/l	mg/d			
29V. Trichloroethylene (79-01-6)			X	< .005	< 285.0						mg/l	mg/d			
30V. Trichlorofluoromethane (75-69-4)			X	< .005	< 285.0						mg/l	mg/d			
31V. Vinyl Chloride (75-01-4)			X	< .010	< 570.1						mg/l	mg/d			
GC/MS FRACTION – ACID COMPOUNDS															
1A. 2-Chlorophenol (95-57-8)			X	< .010	< 570.1						mg/l	mg/d			
2A. 2,4-Dichlorophenol (120-83-2)			X	< .010	< 570.1						mg/l	mg/d			
3A. 2,4-Dimethylphenol (105-67-9)			X	< .010	< 570.1						mg/l	mg/d			
4A. 4,6-Dinitro-O-Cresol (534-52-1)			X	< .010	< 570.1						mg/l	mg/d			
5A. 2,4-Dinitrophenol (51-28-5)			X	< .010	< 570.1						mg/l	mg/d			
6A. 2-Nitrophenol (88-75-5)			X	< .010	< 570.1						mg/l	mg/d			
7A. 4-Nitrophenol (100-02-7)			X	< .010	< 570.1						mg/l	mg/d			
8A. P-Chloro-M-Cresol (59-50-7)			X	< .010	< 570.1						mg/l	mg/d			
9A. Pentachlorophenol (87-86-5)			X	< .010	< 570.1						mg/l	mg/d			
10A. Phenol (108-95-2)			X	< .010	< 570.1						mg/l	mg/d			
11A. 2,4,6-Trichlorophenol (88-06-2)			X	< .010	< 570.1						mg/l	mg/d			

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS															
1B. Acenaphthene (83-32-9)			X	< 0.01	< 570.1						mg/l	mg/d			
2B. Acenaphtylene (208-96-8)			X	< 0.01	< 570.1						mg/l	mg/d			
3B. Anthracene (120-12-7)			X	< 0.01	< 570.1						mg/l	mg/d			
4B. Benzidine (92-87-5)			X	< 0.01	< 570.1						mg/l	mg/d			
5B. Benzo *(a)* Anthracene (56-55-3)			X	< 0.01	< 570.1						mg/l	mg/d			
6B. Benzo *(a)* Pyrene (50-32-8)			X	< 0.01	< 570.1						mg/l	mg/d			
7B. 3,4-Benzo-fluoranthene (205-99-2)			X	< 0.01	< 570.1						mg/l	mg/d			
8B. Benzo *(ghi)* Perylene (191-24-2)			X	< 0.01	< 570.1						mg/l	mg/d			
9B. Benzo *(k)* Fluoranthene (207-08-9)			X	< 0.01	< 570.1						mg/l	mg/d			
10B. Bis *(2-Chloro-ethoxy)* Methane (111-91-1)			X	< 0.01	< 570.1						mg/l	mg/d			
11B. Bis *(2-Chloro-ethyl)* Ether (111-44-4)			X	< 0.01	< 570.1						mg/l	mg/d			
12B. Bis *(2-Chloroiso-propyl)* Ether (102-80-1)			X	< 0.01	< 570.1						mg/l	mg/d			
13B. Bis *(2-Ethyl-hexyl)* Phthalate (117-81-7)			X	< 0.01	< 570.1						mg/l	mg/d			
14B. 4-Bromo-phenyl Phenyl Ether (101-55-3)			X	< 0.01	< 570.1						mg/l	mg/d			
15B. Butyl Benzyl Phthalate (85-68-7)			X	< 0.01	< 570.1						mg/l	mg/d			
16B. 2-Chloro-naphthalene (91-58-7)			X	< 0.01	< 570.1						mg/l	mg/d			
17B. 4-Chloro-phenyl Phenyl Ether (7005-72-3)			X	< 0.01	< 570.1						mg/l	mg/d			
18B. Chrysene (218-01-9)			X	< 0.01	< 570.1						mg/l	mg/d			
19B. Dibenzo *(a,h)* Anthracene (53-70-3)			X	< 0.01	< 570.1						mg/l	mg/d			
20B. 1,2-Dichloro-benzene (95-50-1)			X	< 0.01	< 570.1						mg/l	mg/d			
21B. 1,3-Dichloro-benzene (541-73-1)			X	< 0.01	< 570.1						mg/l	mg/d			

CONTINUE ON PAGE V-7

EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
NM0890010515	09S

Form Approved
OMB No. 2040-0086
Approval expires 7-31-88

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
22B. 1,4-Dichlorobenzene (106-46-7)			X	< .010	< 570.1						mg/l	mg/d			
23B. 3,3'-Dichlorobenzidine (91-94-1)			X	< .010	< 570.1						mg/l	mg/d			
24B. Diethyl Phthalate (84-66-2)			X	< .010	< 570.1						mg/l	mg/d			
25B. Dimethyl Phthalate (131-11-3)			X	< .010	< 570.1						mg/l	mg/d			
26B. Di-N-Butyl Phthalate (84-74-2)			X	< .010	< 570.1						mg/l	mg/d			
27B. 2,4-Dinitrotoluene (121-14-2)			X	< .010	< 570.1						mg/l	mg/d			
28B. 2,6-Dinitrotoluene (606-20-2)			X	< .010	< 570.1						mg/l	mg/d			
29B. Di-N-Octyl Phthalate (117-84-0)			X	< .010	< 570.1						mg/l	mg/d			
30B. 1,2-Diphenylhydrazine *(as Azobenzene)* (122-66-7)			X	< .010	< 570.1						mg/l	mg/d			
31B. Fluoranthene (206-44-0)			X	< .010	< 570.1						mg/l	mg/d			
32B. Fluorene (86-73-7)			X	< .010	< 570.1						ug/l	mg/d			
33B. Hexachlorobenzene (118-74-1)			X	< .010	< 570.1						mg/l	mg/d			
34B. Hexachlorobutadiene (87-68-3)			X	< .010	< 570.1						mg/l	mg/d			
35B. Hexachlorocyclopentadiene (77-47-4)			X	< .010	< 570.1						mg/l	mg/d			
36B. Hexachloroethane (67-72-1)			X	< .010	< 570.1						mg/l	mg/d			
37B. Indeno *(1,2,3-cd)* Pyrene (193-39-5)			X	< .010	< 570.1						mg/l	mg/d			
38B. Isophorone (78-59-1)			X	< .010	< 570.1						mg/l	mg/d			
39B. Naphthalene (91-20-3)			X	< .010	< 570.1						mg/l	mg/d			
40B. Nitrobenzene (98-95-3)			X	< .010	< 570.1						mg/l	mg/d			
41B. N-Nitrosodimethylamine (62-75-9)			X	< .010	< 570.1						mg/l	mg/d			
42B. N-Nitrosodi-N-Propylamine (621-64-7)			X	< .010	< 570.1						mg/l	mg/d			

CONTINUED FROM THE FRONT

1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X'			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	a. MAXIMUM DAILY VALUE (1) CONCENTRATION	a. MAXIMUM DAILY VALUE (2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	b. MAXIMUM 30 DAY VALUE (if available) (2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	c. LONG TERM AVRG. VALUE (if available) (2) MASS	d. NO. OF ANALYSES	a. CONCENTRATION	b. MASS	a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	a. LONG TERM AVERAGE VALUE (2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS *(continued)*															
43B. N-Nitrosodiphenylamine (86-30-6)			X	< .010	< 570.1						mg/l	mg/d			
44B. Phenanthrene (85-01-8)			X	< .010	< 570.1						mg/l	mg/d			
45B. Pyrene (129-00-0)			X	< .010	< 570.1						mg/l	mg/d			
46B. 1,2,4 - Trichlorobenzene (120-82-1)			X	< .010	< 570.1						mg/l	mg/d			
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X	< .06	< 3.4						ug/l	mg/d			
2P. α-BHC (319-84-6)			X	< .02	< 1.1						ug/l	mg/d			
3P. β-BHC (319-85-7)			X	< .1	< 5.7						ug/l	mg/d			
4P. γ-BHC (58-89-9)			X	< .03	< 1.7						ug/l	mg/d			
5P. δ-BHC (319-86-8)			X	< .12	< 6.8						ug/l	mg/d			
6P. Chlordane (57-74-9)			X	< .25	< 14.3						ug/l	mg/d			
7P. 4,4'-DDT (50-29-3)			X	< .06	< 3.4						ug/l	mg/d			
8P. 4,4'-DDE (72-55-9)			X	< .04	< 2.3						ug/l	mg/d			
9P. 4,4'-DDD (72-54-8)			X	< .04	< 2.3						ug/l	mg/d			
10P. Dieldrin (60-57-1)			X	< .04	< 2.3						ug/l	mg/d			
11P. α-Endosulfan (115-29-7)			X	< .05	< 2.9						ug/l	mg/d			
12P. β-Endosulfan (115-29-7)			X	< .08	< 4.6						ug/l	mg/d			
13P. Endosulfan Sulfate (1031-07-8)			X	< .09	< 5.1						ug/l	mg/d			
14P. Endrin (72-20-8)			X	< .03	< 1.7						ug/l	mg/d			
15P. Endrin Aldehyde (7421-93-4)			X	< .31	< 17.7						ug/l	mg/d			
16P. Heptachlor (76-44-8)			X	< .03	< 1.7						ug/l	mg/d			

CONTINUE ON PAGE V-9

Form Approved
OMB No. 2040-0086
Approval expires 7/31/88

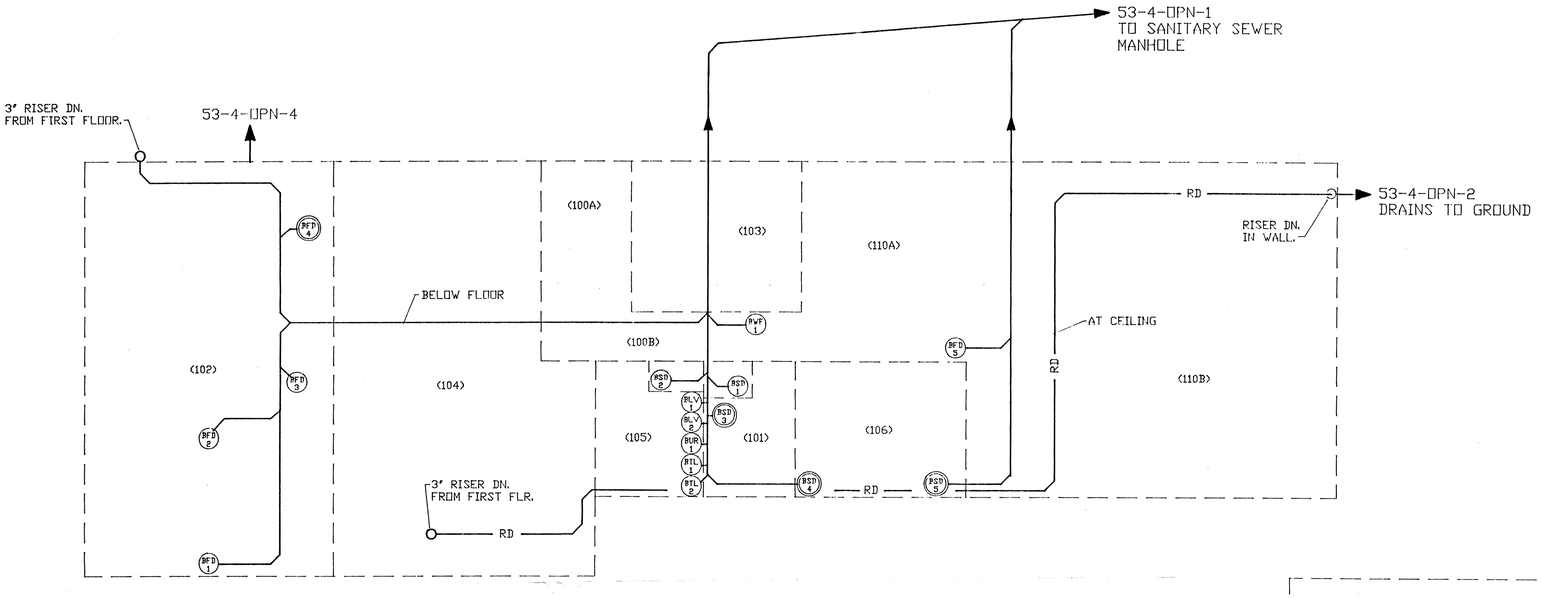
EPA I.D. NUMBER (copy from Item 1 of Form 1)	OUTFALL NUMBER
NM0890010515	09S

CONTINUED FROM PAGE V-8

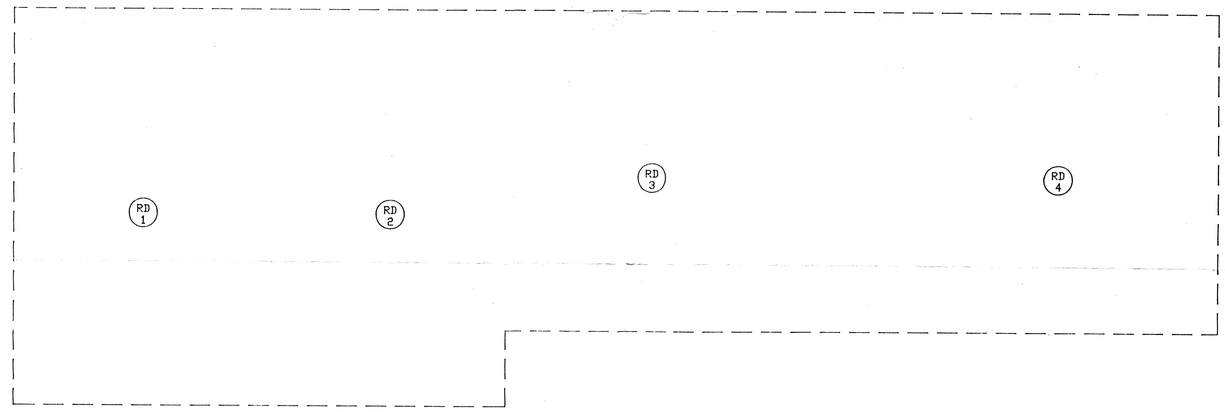
1. POLLUTANT AND CAS NUMBER (if available)	2. MARK 'X' a. TESTING REQUIRED	b. BELIEVED PRESENT	c. BELIEVED ABSENT	3. EFFLUENT a. MAXIMUM DAILY VALUE (1) CONCENTRATION	(2) MASS	b. MAXIMUM 30 DAY VALUE (if available) (1) CONCENTRATION	(2) MASS	c. LONG TERM AVRG. VALUE (if available) (1) CONCENTRATION	(2) MASS	d. NO. OF ANALYSES	4. UNITS a. CONCENTRATION	b. MASS	5. INTAKE (optional) a. LONG TERM AVERAGE VALUE (1) CONCENTRATION	(2) MASS	b. NO. OF ANALYSES
GC/MS FRACTION – PESTICIDES *(continued)*															
17P. Heptachlor Epoxide (1024-57-3)			X	< .04	< 2.3						ug/l	mg/d			
18P. PCB-1242 (53469-21-9)			X	< .67	< 38.2						ug/l	mg/d			
19P. PCB-1254 (11097-69-1)			X	< .67	< 38.2						ug/l	mg/d			
20P. PCB-1221 (11104-28-2)			X	ND											
21P. PCB-1232 (11141-16-5)			X	ND											
22P. PCB-1248 (12672-29-6)			X	ND											
23P. PCB-1260 (11096-82-5)			X	< .67	< 38.2						ug/l	mg/d			
24P. PCB-1016 (12674-11-2)			X	ND											
25P. Toxaphene (8001-35-2)			X	< 2.5	< 142.5						ug/l	mg/d			

DYE STUDY INFORMATION

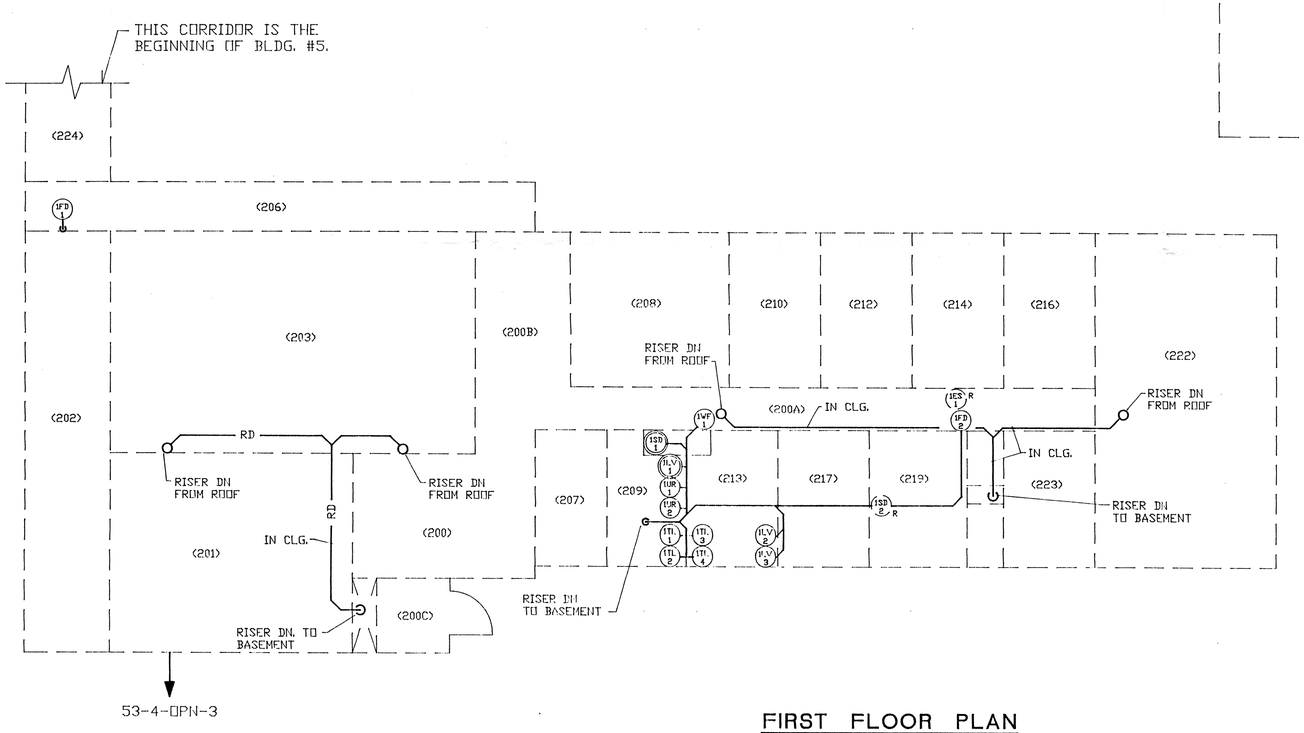
BUILDING NUMBER	DRAIN NUMBER	DID DYE REACH EXPECTED DESTINATION?	COMMENTS
53-4	BFD4	YES	NONE
53-4	BSD3	YES	NONE
53-4	BSD4	YES	NONE
53-4	BSD5	YES	NONE
53-4	1LV1	YES	NONE
53-4	1SD1	YES	NONE
53-14	1LV1	YES	NONE
53-14	1SD3	YES	NONE
53-27	1SD1	YES	NONE
53-544	1LV1	YES	NONE
53-570	1LV2	YES	NONE
53-675	1LV2	YES	NONE
53-889	1LV4	YES	NONE



BASEMENT PLAN



ROOF PLAN



FIRST FLOOR PLAN

SYMBOL LEGEND	
ES	EMERGENCY SHOWER
FD	FLOOR DRAIN
LV	LAVATORY
RD	ROOF DRAIN
SD	SINK DRAIN
TL	TOILET
UR	URINAL
WF	WATER FOUNTAIN

DYE TESTED DRAIN

R DRAIN HAS BEEN REMOVED

NOTE:

THIS SCHEMATIC WAS DERIVED FROM L.A.N.L. DRAWINGS C-60801, C-60802, C-60803, C-60804, C-60806, C-60807, C-60814, C-60815, C-60816, C-60822, C-60823, C-60824, C-60825, C-60826, C-60827, C-60828, C-60829, C-51249, PL-02851 AND SITE VISIT.

N

15272-A

SANTA FE ENGINEERING, LTD.

TA 53-4
DRAIN SCHEMATIC

DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
DATE	4-17-92

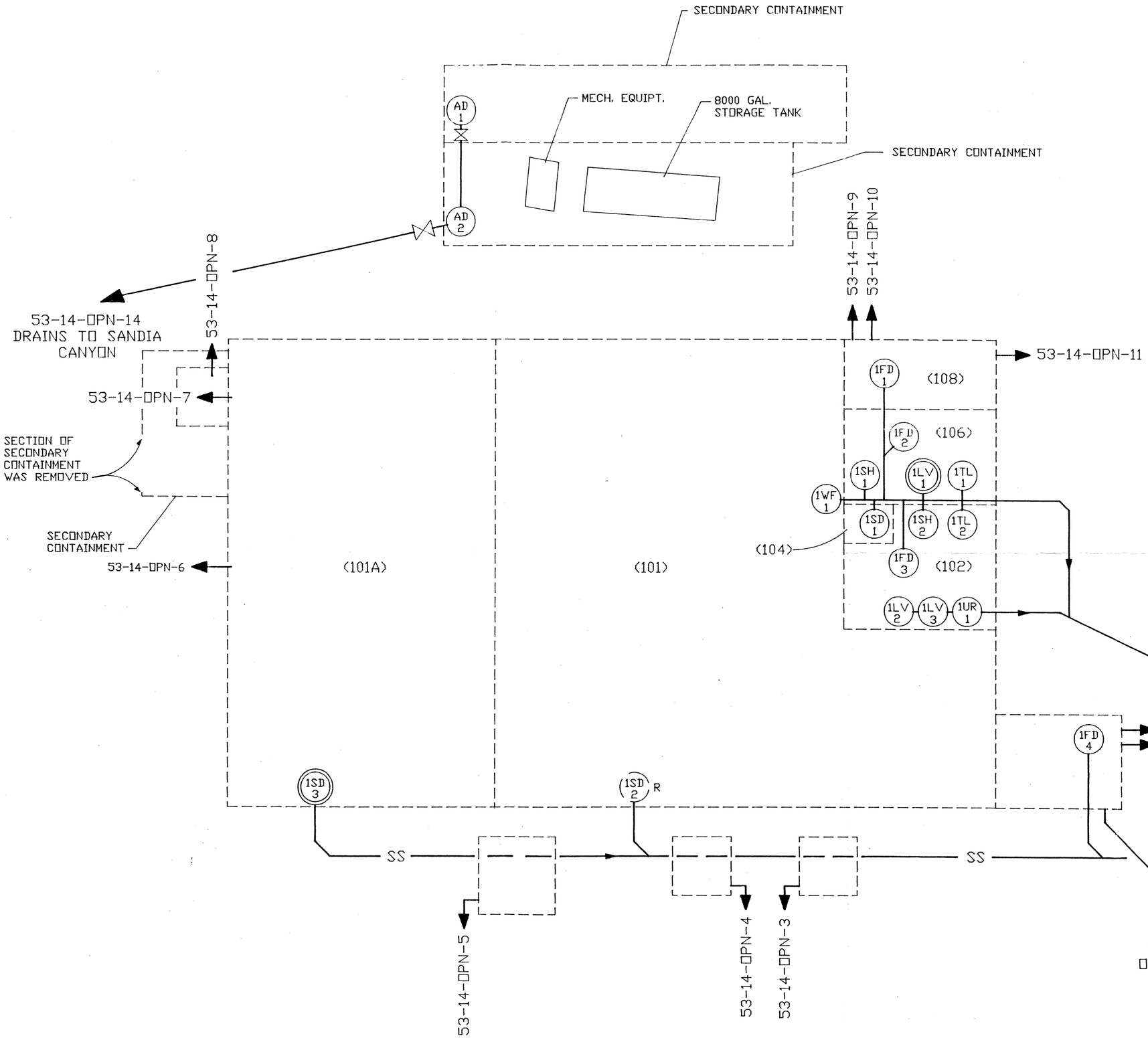
SUBMITTED | RECOMMENDED | APPROVED

Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545

SHEET 1 OF 1

CLASSIFICATION | REVIEWER | DATE

REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 1	



SYMBOL LEGEND	
AC	AIR COND. UNIT
AD	AREA DRAIN
FD	FLOOR DRAIN
LV	LAVATORY
SD	SINK DRAIN
SH	SHOWER
SS	SANITARY SEWER
TL	TOILET
UR	URINAL
WF	WATER FOUNTAIN

N

DYE TESTED DRAIN

R REMOVED

NOTE:

1. THIS DRAIN SCHEMATIC WAS DERIVED FROM L.A.N.L. DRAWINGS; C-44174, C-45606, C-51286, C-51328, AND SITE VISIT.

15272-B

SANTA FE ENGINEERING, LTD.

TA53-14 DRAIN SCHEMATIC

DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
DATE	4-17-92

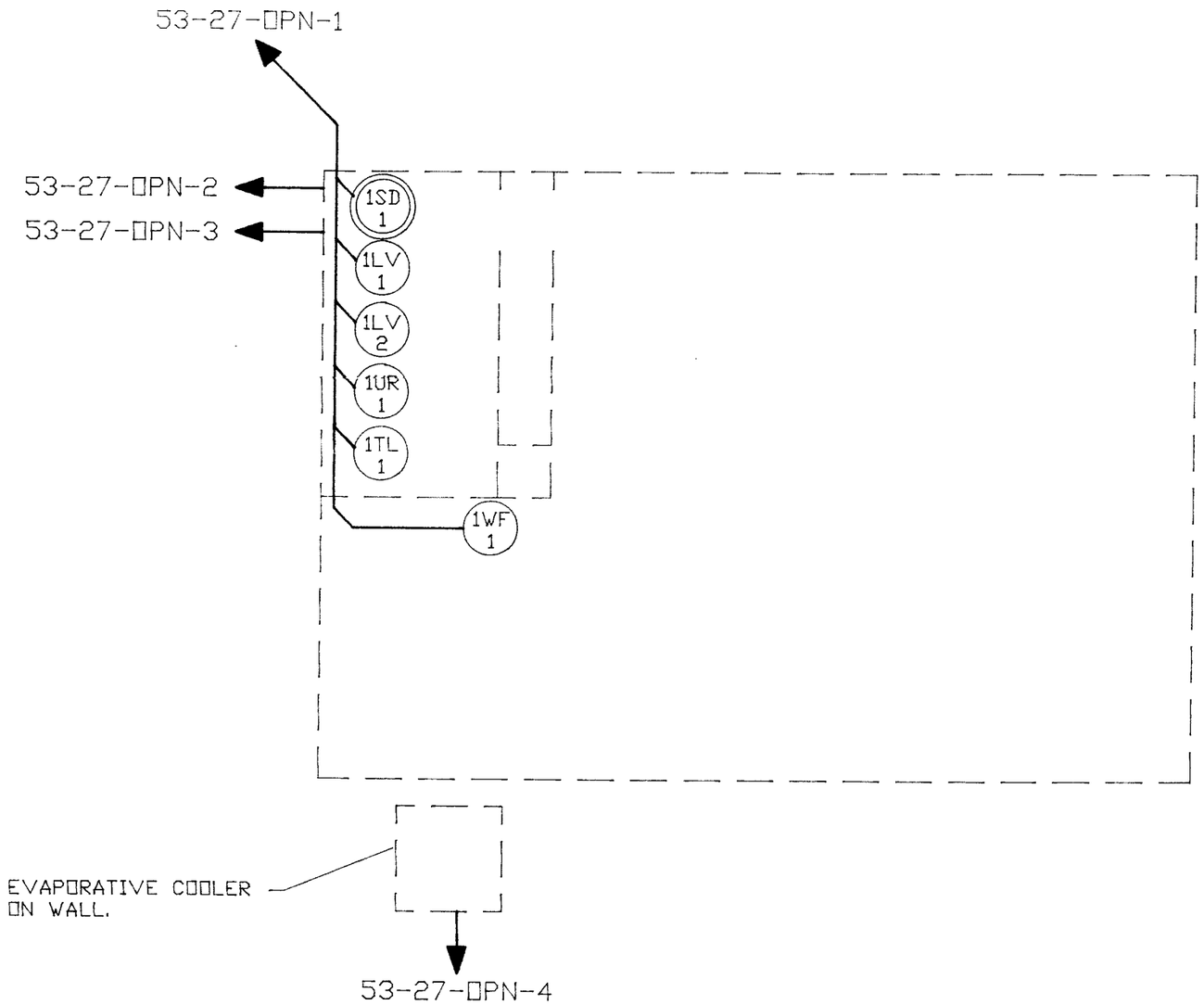
SUBMITTED | RECOMMENDED | APPROVED

Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545

SHEET 1 OF 1

CLASSIFICATION | REVIEWER | DATE

REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 2	



SYMBOL LEGEND	
LV	LAVATORY
SD	SINK DRAIN
TL	TOILET
UR	URINAL
WF	WATER FOUNTAIN

DYE TESTED DRAIN

NOTE:

THIS SCHEMATIC WAS DERIVED FROM L.A.N.L. DRAWINGS C-51046 AND SITE VISITS.

N

SANTA FE ENGINEERING, LTD.

TA 53-27 DRAIN SCHEMATIC

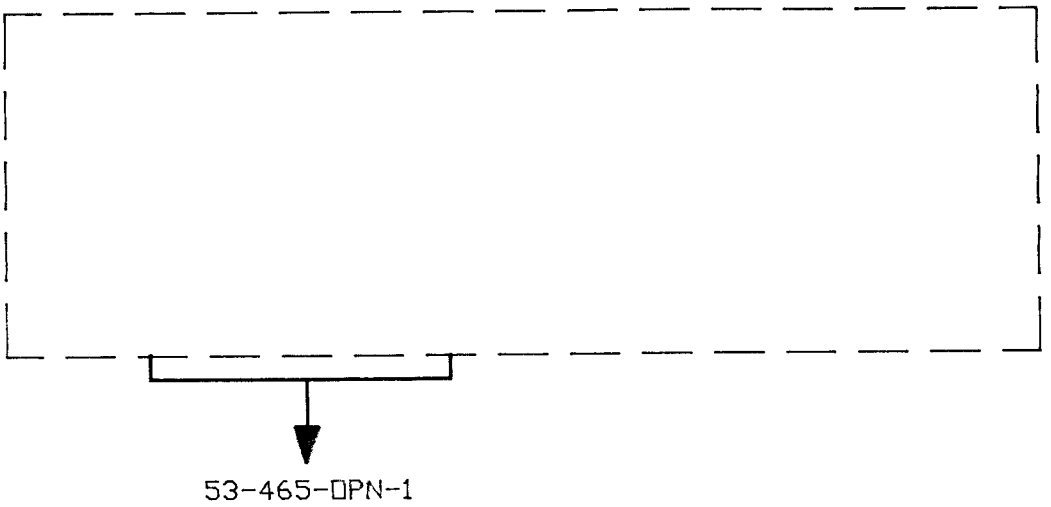
DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
DATE	4-17-92

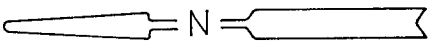
SUBMITTED | RECOMMENDED | APPROVED

Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545

SHEET 1 OF 1

REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 3	

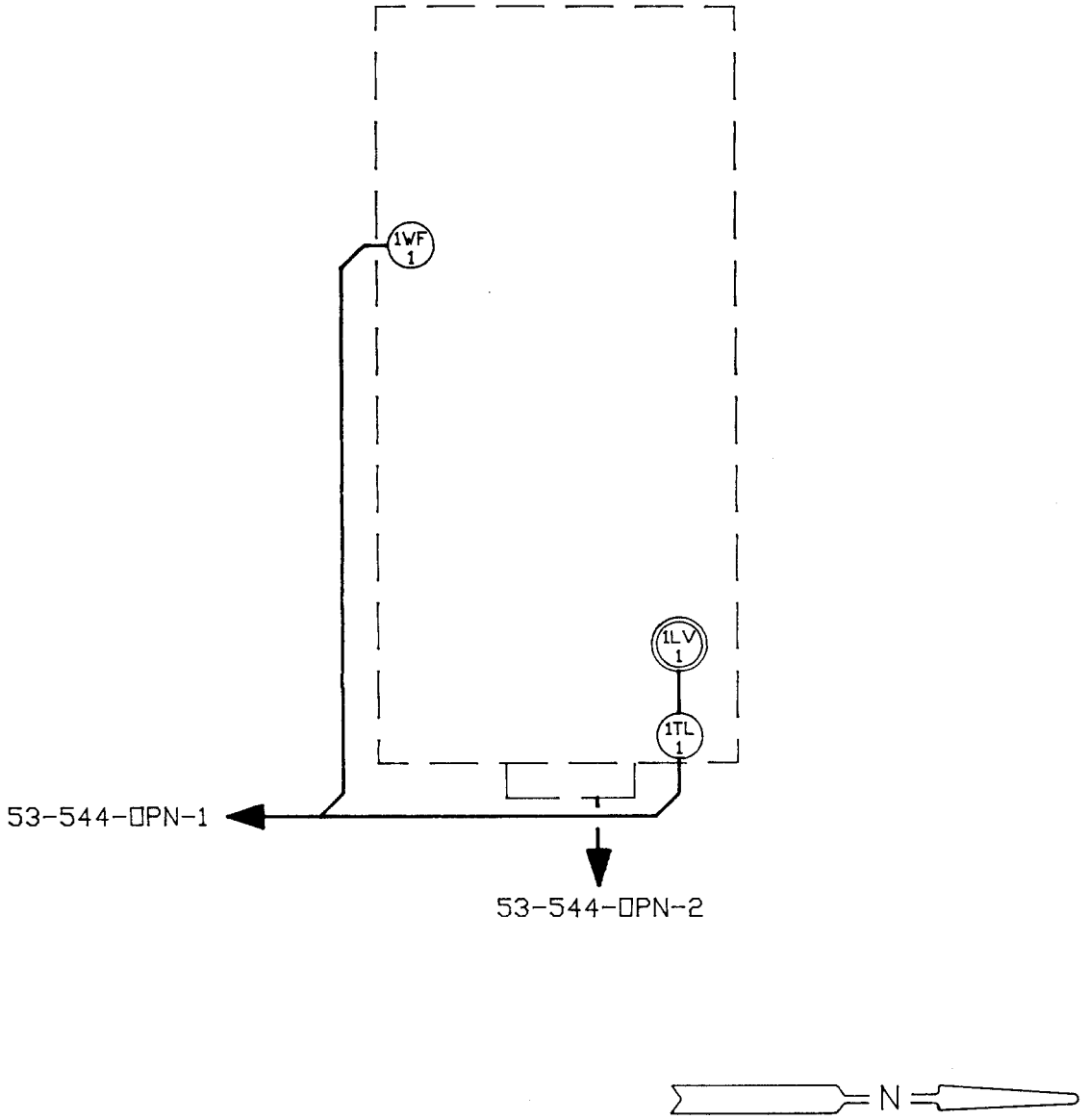




NOTE:

1. THIS DRAIN SCHEMATIC WAS DERIVED FROM SITE VISITS.

SANTA FE ENGINEERING, LTD.			
TA 53-465 DRAIN SCHEMATIC		DRAWN	M.E.W.
		DESIGN	M.E.W.
		CHECKED	P.E.B.
		DATE	4-17-92
SUBMITTED	RECOMMENDED	APPROVED	
Los Alamos	Los Alamos National Laboratory Los Alamos, New Mexico 87545	SHEET	1 OF 1
CLASSIFICATION	REVIEWER	DATE	
REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 4	



SYMBOL LEGEND	
LV	LAVATORY
TL	TOILET
WF	WATER FOUNTAIN

DYE TESTED DRAIN

NOTES

1. THIS SCHEMATIC WAS DERIVED FROM SITE VISITS.

SANTA FE ENGINEERING, LTD.

TA 53-544 DRAIN SCHEMATIC

DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
DATE	4-17-92

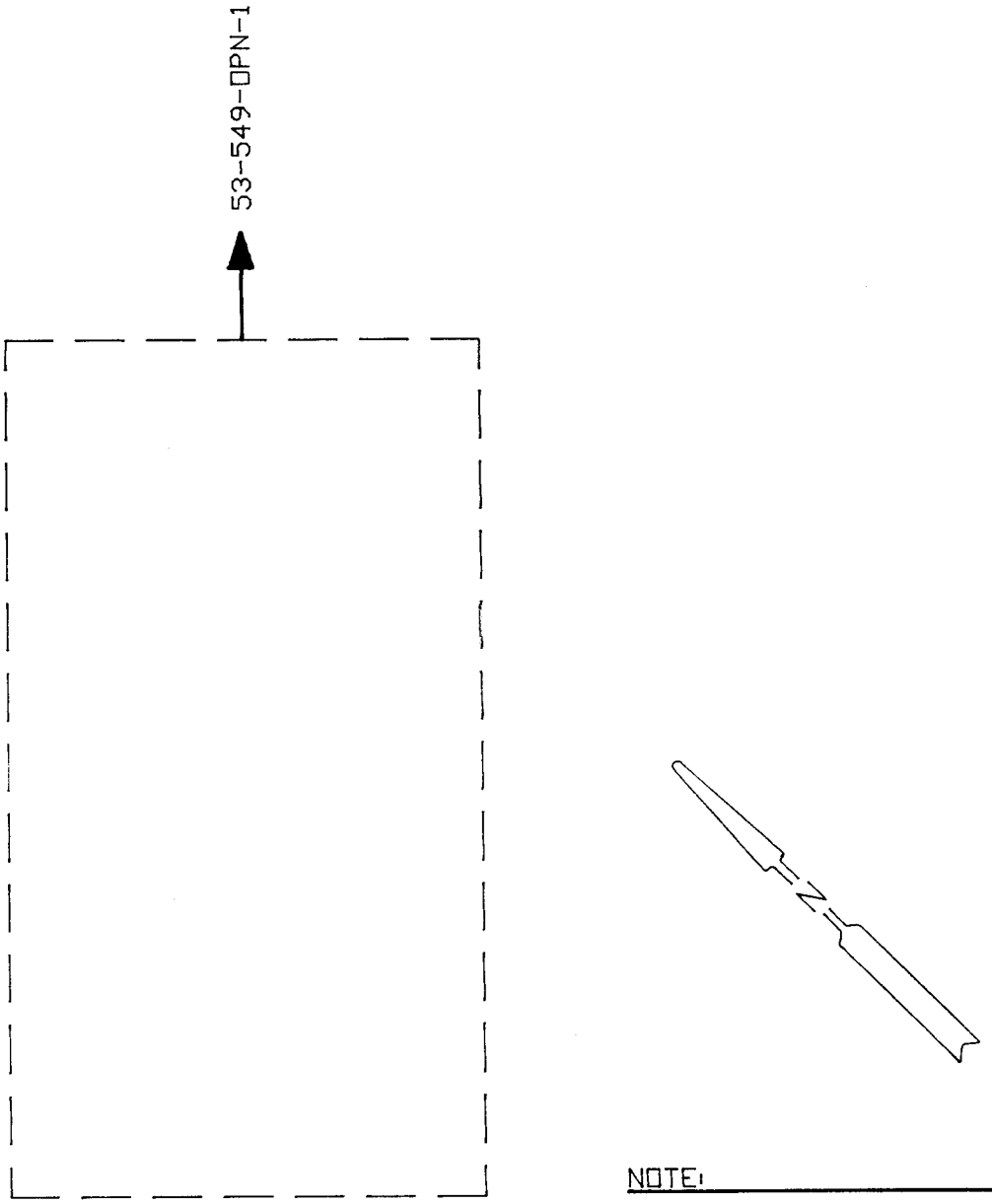
SUBMITTED | RECOMMENDED | APPROVED

Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545

SHEET 1 OF 1

CLASSIFICATION | REVIEWER | DATE

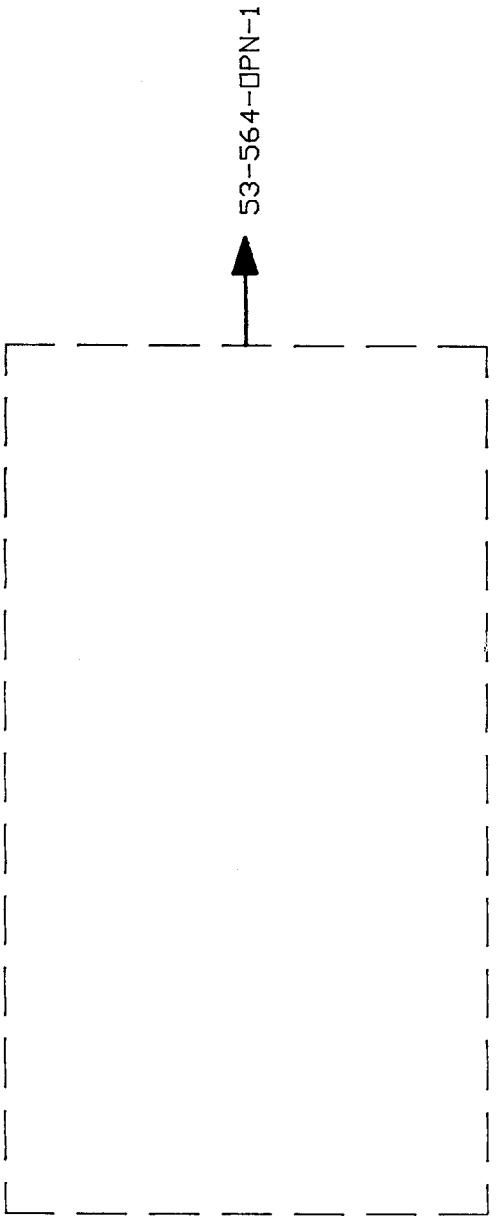
REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 5	

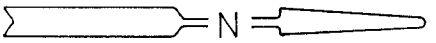


NOTE:

1. THIS DRAWING WAS DERIVED FROM SITE VISIT.

SANTA FE ENGINEERING, LTD.		
TA 53-549 DRAIN SCHEMATIC	DRAWN	M.E.W.
	DESIGN	M.E.W.
	CHECKED	P.E.B.
	DATE	4-17-92
SUBMITTED	RECOMMENDED	APPROVED
Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545	SHEET	1 OF 1
CLASSIFICATION	REVIEWER	DATE
REQUESTING DIVISION / REQUESTING GROUP EM-8	LAB JOB NO. 11056-32	DRAWING NO. FIGURE 6 / REV.

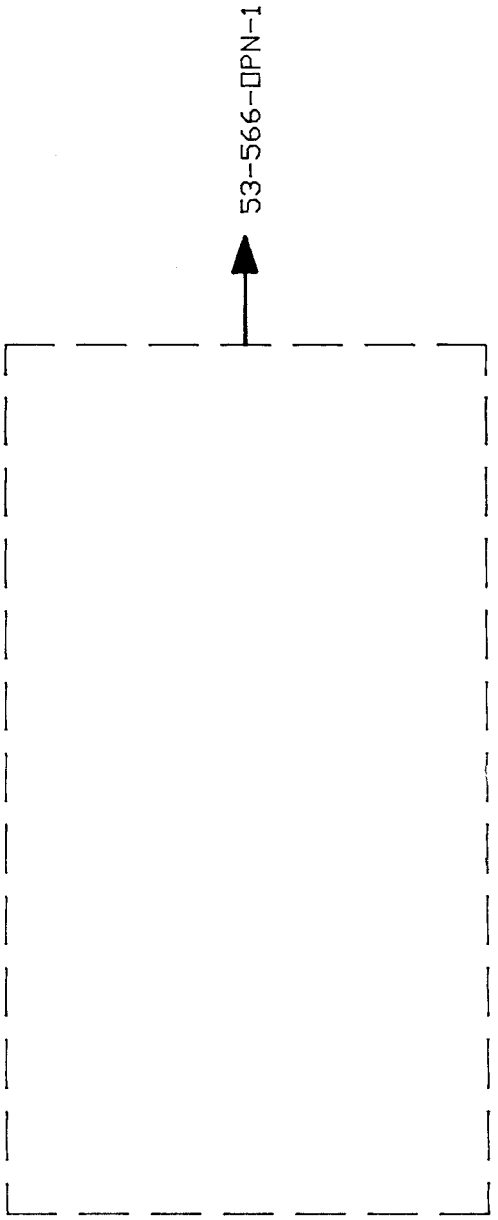


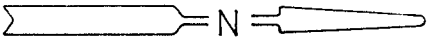


NOTE:

1. THIS DRAWING WAS DERIVED FROM SITE VISIT.

SANTA FE ENGINEERING, LTD.		
TA 53-564 DRAIN SCHEMATIC	DRAWN	M.E.W.
	DESIGN	M.E.W.
	CHECKED	P.E.B.
	DATE	4-17-92
SUBMITTED	RECOMMENDED	APPROVED
Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545	SHEET	1 OF 1
CLASSIFICATION	REVIEWER	DATE
REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 7	

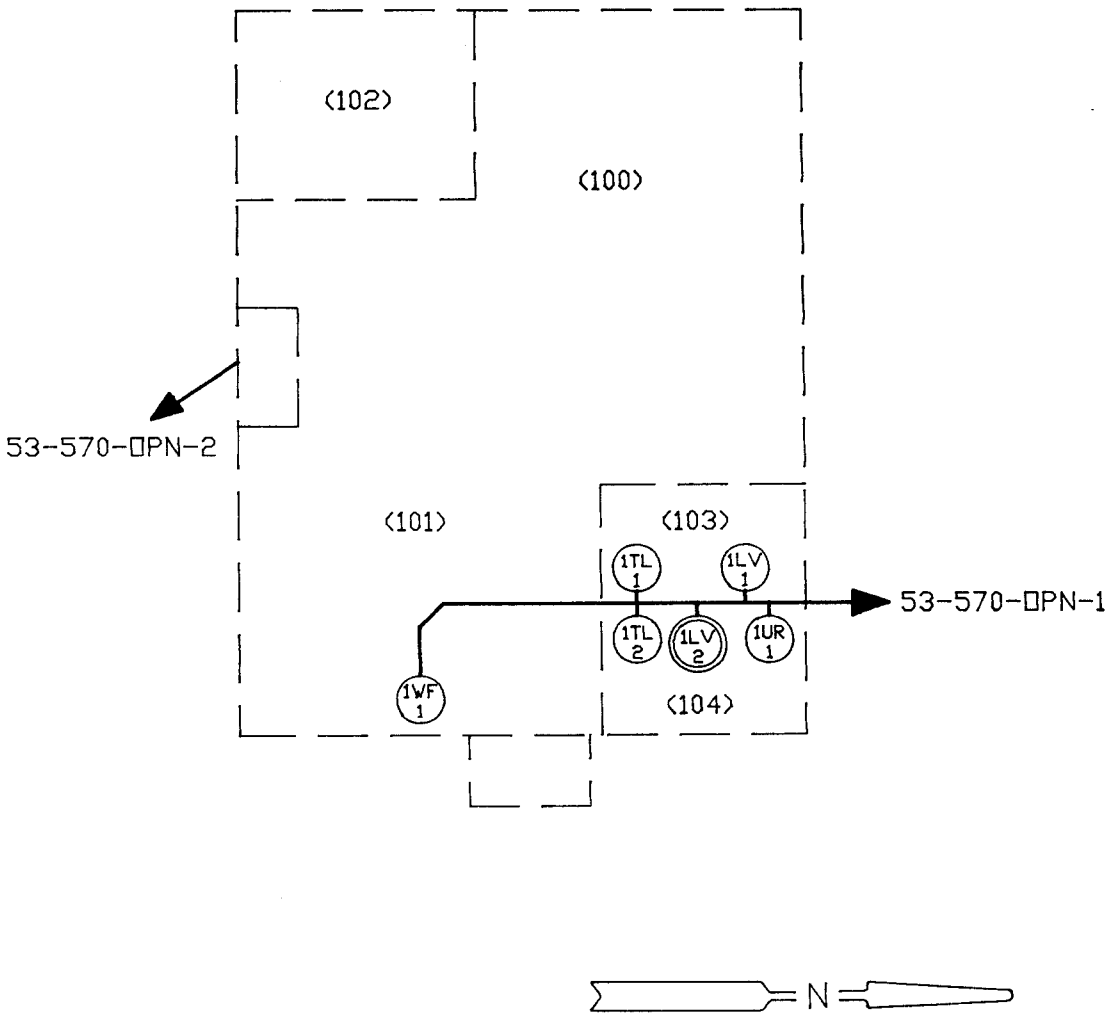




NOTE:

1. THIS DRAWING WAS DERIVED FROM SITE VISIT.

SANTA FE ENGINEERING, LTD.		
TA 53-566 DRAIN SCHEMATIC	DRAWN	M.E.W.
	DESIGN	M.E.W.
	CHECKED	P.E.B.
	DATE	4-17-92
SUBMITTED	RECOMMENDED	APPROVED
Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545	SHEET	1 OF 1
CLASSIFICATION	REVIEWER	DATE
REQUESTING DIVISION	LAB JOB NO.	DRAWING NO. / REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 8



SYMBOL LEGEND	
LV	LAVATORY
TL	TOILET
UR	URINAL
WF	WATER FOUNTAIN

DYE TESTED DRAIN

NOTE:

1. THIS SCHEMATIC WAS DERIVED FROM SITE VISITS.

SANTA FE ENGINEERING, LTD.

TA 53-570 DRAIN SCHEMATIC

DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
DATE	4-17-92

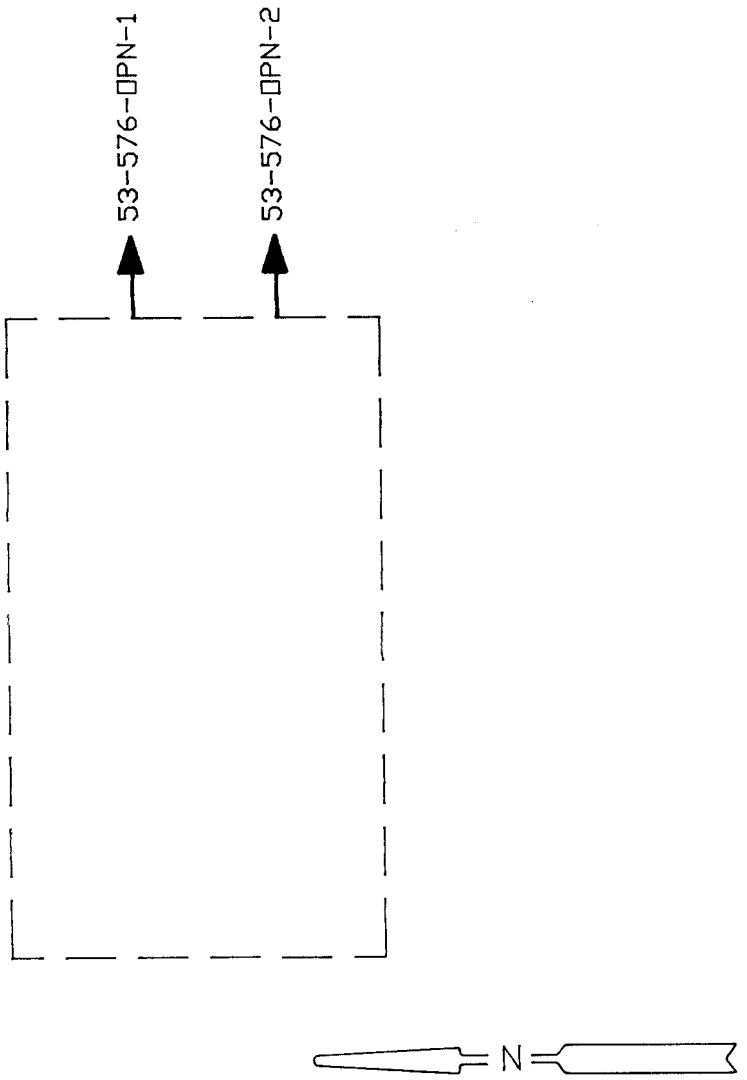
SUBMITTED | RECOMMENDED | APPROVED

Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545

SHEET 1 OF 1

CLASSIFICATION | REVIEWER | DATE

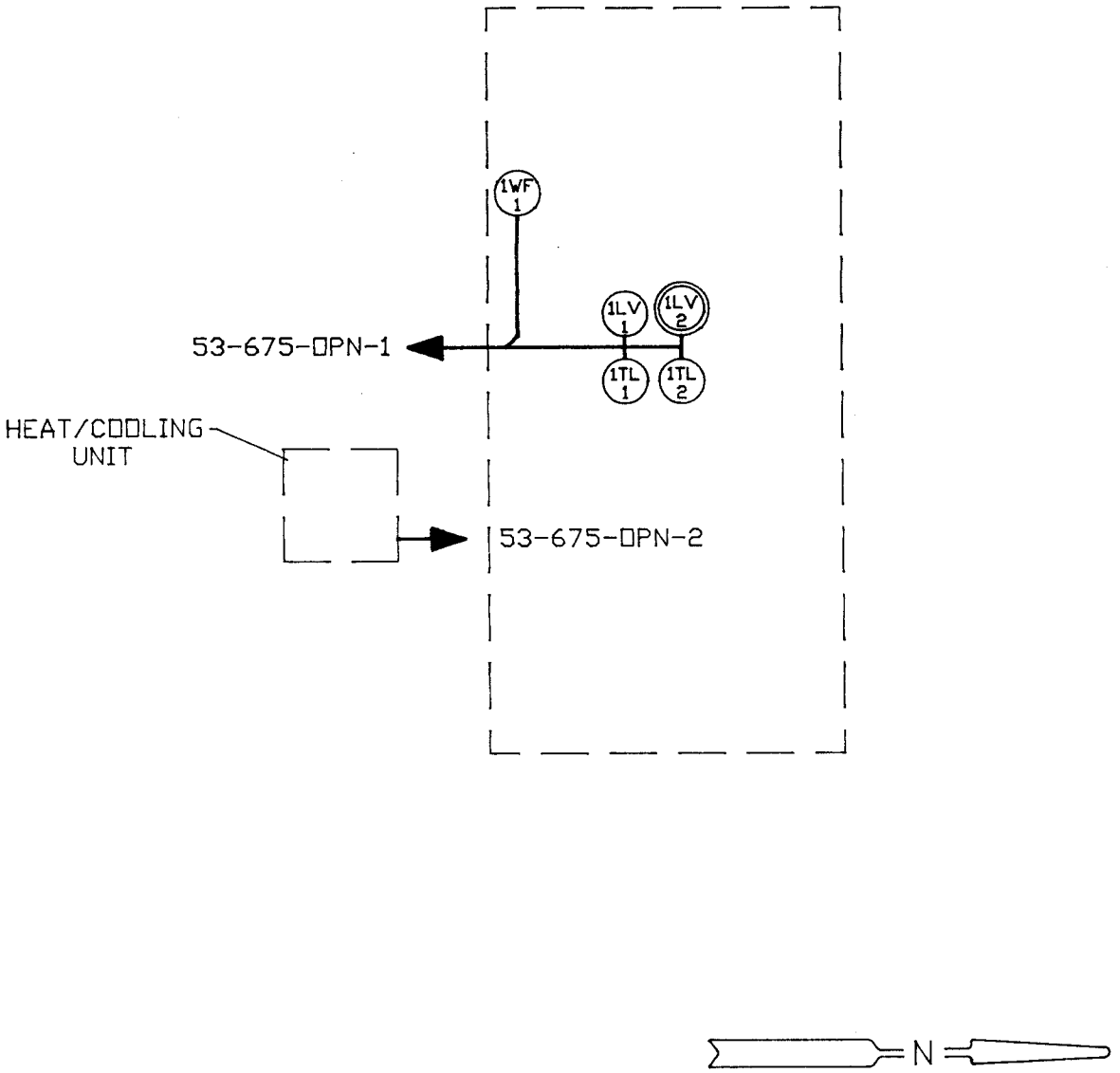
REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 9	



NOTE:

1. THIS SCHEMATIC WAS DERIVED FROM SITE VISITS.

SANTA FE ENGINEERING, LTD.		
TA 53-576 DRAIN SCHEMATIC	DRAWN	M.E.W.
	DESIGN	M.E.W.
	CHECKED	P.E.B.
	DATE	4-17-92
SUBMITTED	RECOMMENDED	APPROVED
Los Alamos	Los Alamos National Laboratory, Los Alamos, New Mexico 87545	SHEET 1 OF 1
CLASSIFICATION	REVIEWER	DATE
REQUESTING DIVISION / REQUESTING GROUP EM-8	LAB JOB NO. 11056-32	DRAWING NO. FIGURE 10 / REV.



SYMBOL LEGEND	
LV	LAVATORY
TL	TOILET
WF	WATER FOUNTAIN

DYE TESTED DRAIN

NOTES

1. THIS SCHEMATIC WAS DERIVED FROM SITE VISITS.

SANTA FE ENGINEERING, LTD.

TA 53-675 DRAIN SCHEMATIC

DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
RELEASED	
DATE	4-17-92

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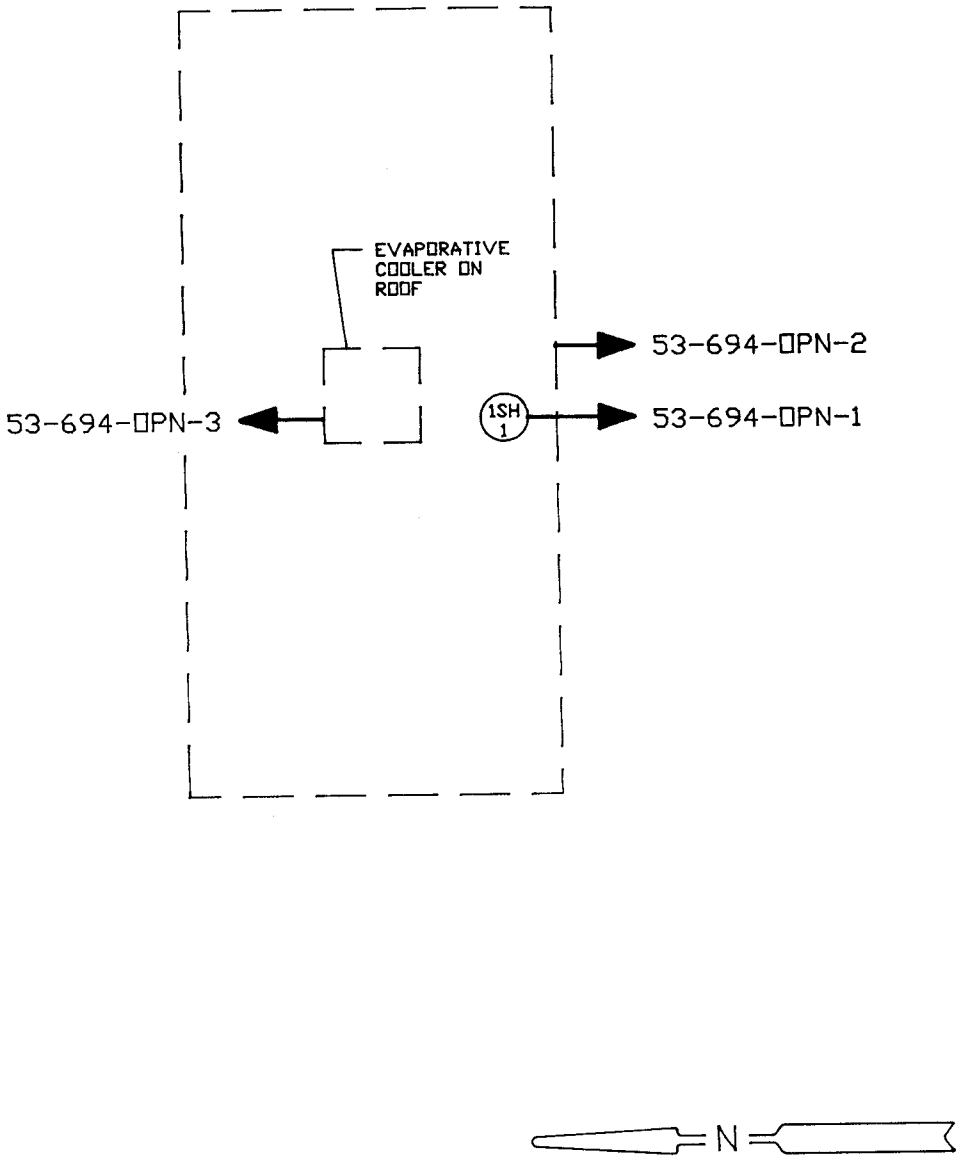
SHEET 1 OF 1

CLASSIFICATION | REVIEWER | DATE

REQUESTING DIVISION | LAB JOB NO. | DRAWING NO. | REV.

REQUESTING GROUP EM-8 | 11056-32 | FIGURE 11



SYMBOL LEGEND	
SH	SHOWER

NOTE:

1. THIS SCHEMATIC WAS DERIVED FROM SITE VISITS.

SANTA FE ENGINEERING, LTD.

TA 53-694 DRAIN SCHEMATIC

DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
DATE	4-17-92

SUBMITTED | RECOMMENDED | APPROVED

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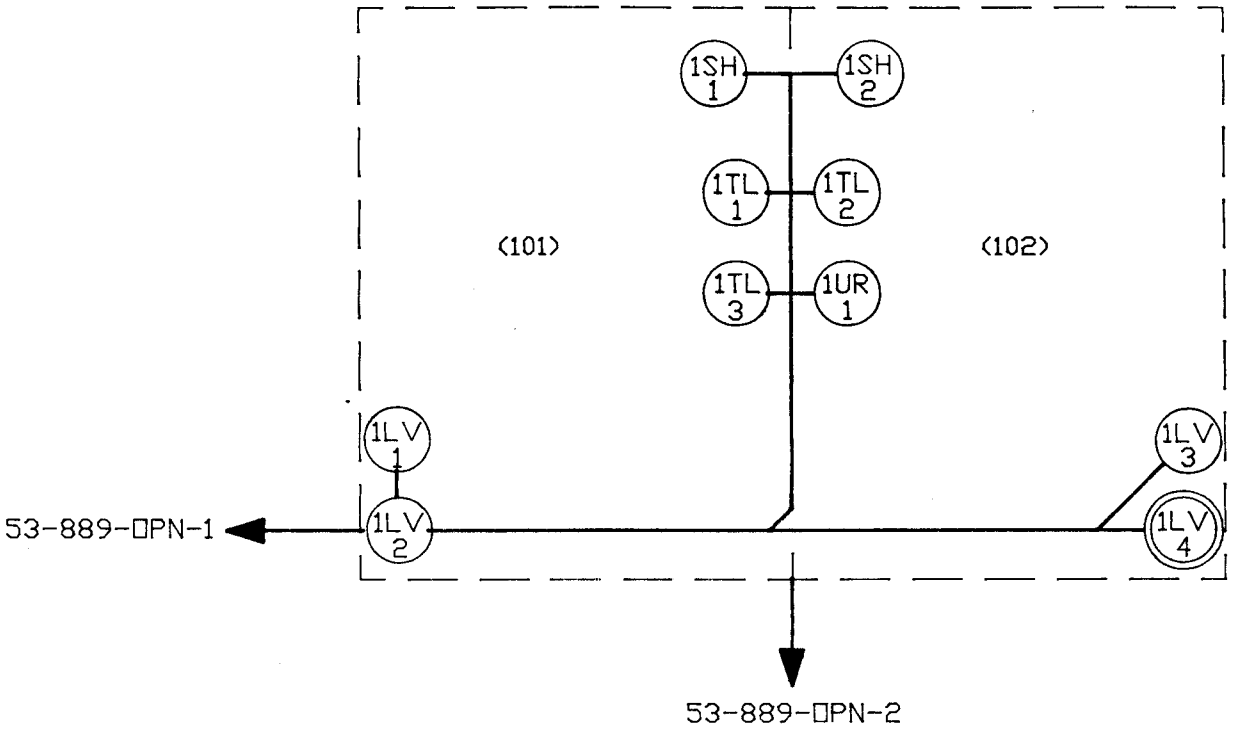
CLASSIFICATION | REVIEWER | DATE

REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 12	



SYMBOL LEGEND	
LV	LAVATORY
TL	TOILET
SH	SHOWER
UR	URINAL

DYE TESTED DRAIN

NOTE:

1. THIS DRAIN SCHEMATIC WAS DERIVED FROM L.A.N.L. DRWG. R-7137 AND SITE VISIT.

SANTA FE ENGINEERING, LTD.

TA 53-889 DRAIN SCHEMATIC

DRAWN	M.E.W.
DESIGN	M.E.W.
CHECKED	P.E.B.
DATE	4-17-92

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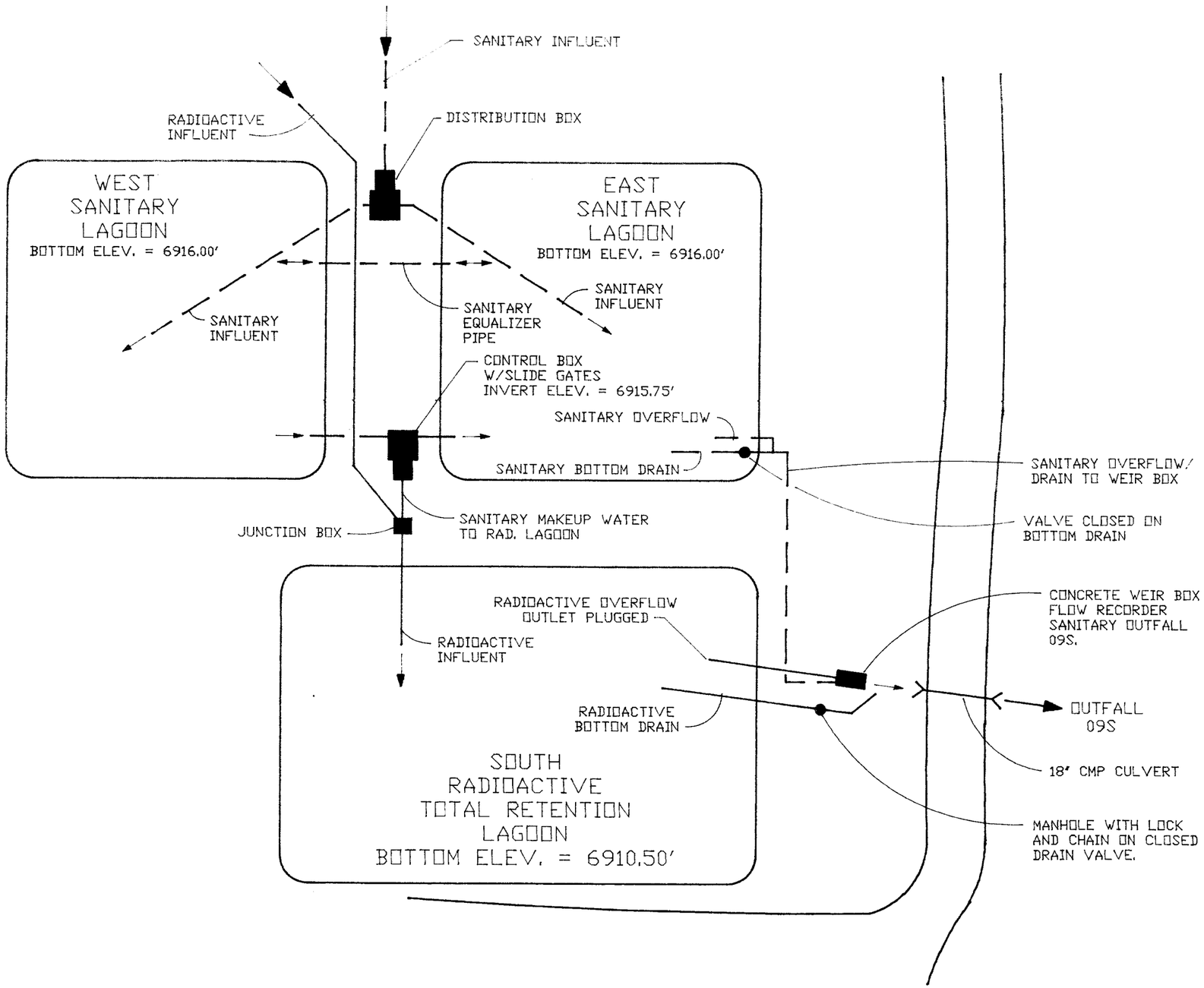
CLASSIFICATION | REVIEWER | DATE

REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 13	



SANTA FE ENGINEERING, LTD.

TA-53 SEWAGE TREATMENT PLANT	DRAWN	M.E.W.
	DESIGN	M.E.W.
	CHECKED	P.E.B.
	DATE	4-17-92

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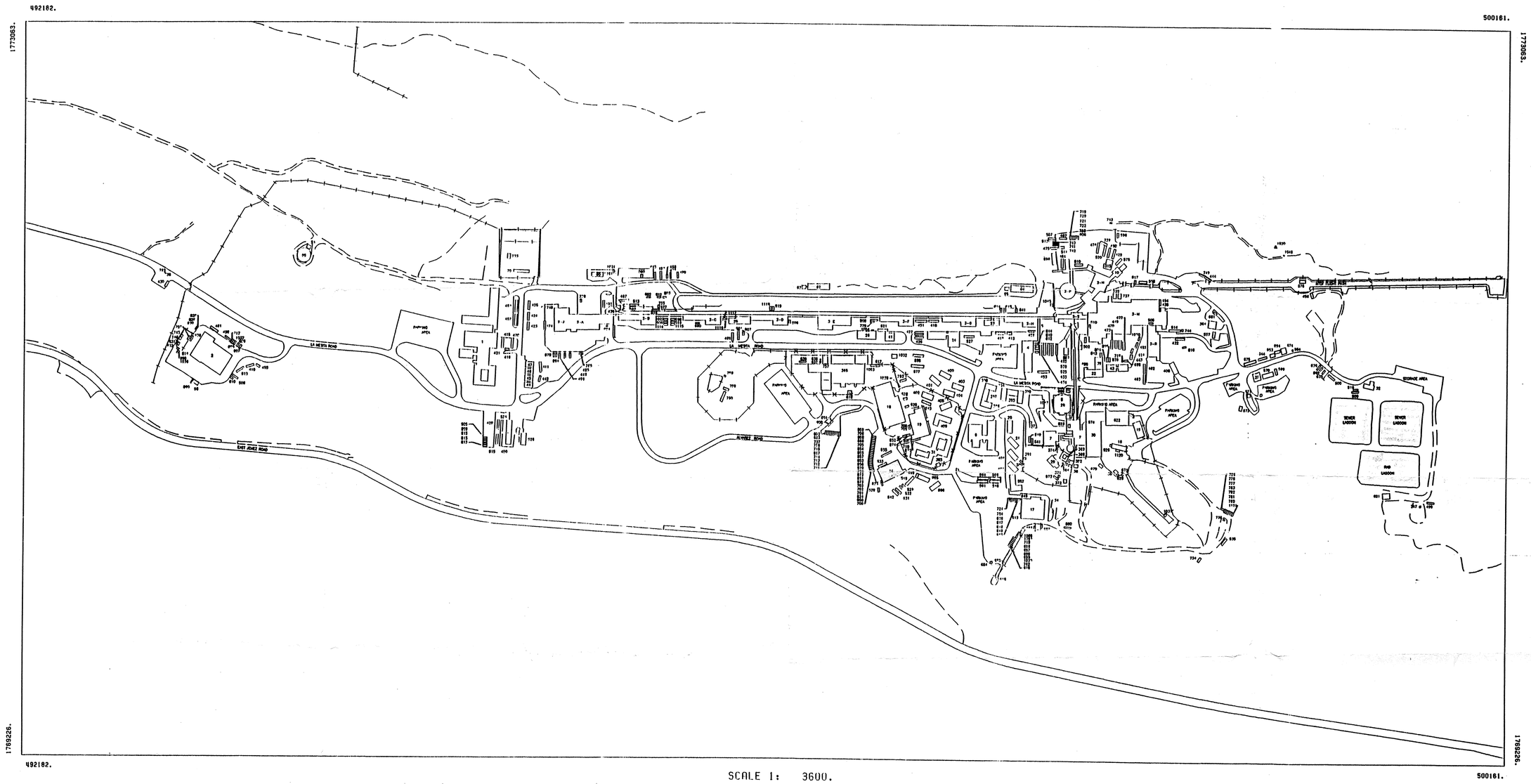
REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP EM-8	11056-32	FIGURE 14	

TA-53



SCALE 1: 3600.

300 0 300 600 FEET

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15272-C

SANTA FE ENGINEERING, LTD.		
TA-53 SITE PLAN	DRAWN	M.E.W.
	DESIGN	M.E.W.
	CHECKED	R.E.B
	DATE	4-17-92
SUBMITTED	RECOMMENDED	APPROVED
Los Alamos — Los Alamos National Laboratory, Los Alamos, New Mexico 87545	SHEET	1 OF 1
CLASSIFICATION	REVIEWER	DATE
REQUESTING DIVISION	LAB JOB NO.	DRAWING NO.	REV.
REQUESTING GROUP FM-8	11056-32	FIGURE 15	