

# Los Alamos

NATIONAL LABORATORY

Los Alamos National Laboratory  
Los Alamos, New Mexico 87545

Date: August 28, 1998  
In Reply Refer To: ESH-18/WQ&H:98-0296  
Mail Stop: K497  
Telephone: (505) 665-1859

NPDES

Ms. Diana Gamble  
U.S. Environmental Protection Agency  
Compliance Assurance and Enforcement Division  
Water Enforcement Branch (6EN-W)  
1445 Ross Avenue  
Dallas, Texas 75202-2733

**SUBJECT: DISCHARGE MONITORING REPORTS (DMRs) FOR WATER QUALITY  
STANDARDS (WQS) NPDES PERMIT NO. NM0028355**

Dear Ms. Gamble:

Enclosed are Los Alamos National Laboratory's DMRs (EPA Form 3320-1) for the yearly Water Quality Standards (WQS) parameters for the period August 1, 1997, through July 31, 1998, as required under the above referenced NPDES Permit. We have also included a table summarizing WQS sampling. Samples were collected at 31 outfalls which were active during the sampling period. There was one WQS effluent limitation exceeded from 412 analyses conducted on industrial and sanitary outfall samples.

The Laboratory's NPDES Permit requires reporting of accelerator-produced tritium in the DMRs. Please note that tritium results have been reported in the DMRs even though the source of tritium (accelerator or reactor-produced) has not been confirmed. A result of 6,300 pCi/L was obtained for tritium at Outfall 051, but it was not included in the DMR since Waste Stream Survey results indicate that only reactor-produced tritium enters the TA-50 treatment facility. This result for Outfall 051 meets the accelerator-produced effluent limit for tritium of 3,000,000 pCi/L.

Routine monthly and quarterly sampling results have been submitted under separate cover.

Please contact me at (505) 665-1859 or Mike Saladen at (505) 665-6085 if you desire any additional information concerning these DMRs.

Sincerely,



Steven R. Rae  
Group Leader  
Water Quality & Hydrology Group



15722

Lab/Env - H. Scott / NPDES

Ms. Diana Gamble  
ESH-18/WQ&H:98-0296

- 2 -

August 28, 1998

SR:MS/md

Enclosures: a/s

Cy: G. Saums, NMED, Santa Fe, New Mexico, w/enc.  
J. Parker, NMED/AIP, Santa Fe, New Mexico, w/enc.  
J. Vozella, DOE/LAAO, w/enc., MS A316  
C. Soden, DOE/AL, Albuquerque, New Mexico, w/enc.  
D. Erickson, LANL, ESH-DO, w/enc., MS K491  
LANL Outfall Owners, w/enc.  
M. Brown, JCI/JENV, w/enc., MS A199  
S. Moore, JCNNM-CONT, w/enc., MS A199  
WQ&H File, w/enc., MS K497  
CIC-10, w/enc., MS A150

RECEIVED  
SEP 02 1998  
DOE OVERSIGHT BUREAU

# INDUSTRIAL WASTE DEVIATIONS

## Water Quality Standards (WQS)

<u>EPA ID</u>	<u>TECH AREA LOCATION</u>	<u>DATE</u>	<u>PARAMETER</u>	<u>RESULTS/LIMIT</u>	<u>UNITS</u>
03A181	TA55-6	10/30/97	Vanadium	0.28/0.10 max.	mg/l

University of California  
Los Alamos National Laboratory  
Los Alamos, New Mexico 87545

**SUBJECT: NONCOMPLIANCE WITH EFFLUENT LIMITATION  
IN NPDES PERMIT NM0028355**

**1. Location of noncompliant discharge**

Serial 03A181 TA-55-6

**2. Description of noncompliant discharge**

A vanadium concentration of 0.28 mg/l exceeded the daily maximum permit limit of 0.10 mg/l.

**3. Impact upon the receiving waters**

Outfall 03A181 discharges indirectly into Mortandad Canyon. No adverse impacts were observed.

**4. Cause of noncompliance**

The non-compliance condition was discovered during routine compliance monitoring of the cooling tower discharge. It was discovered during the occurrence investigation that the cycles of concentration in the cooling tower were too high resulting in a low blow-down frequency which allowed the vanadium to concentrate in the cooling tower basin above permit limits. This condition also caused the pH to elevate above permit limits. The pH exceedance has been previously reported to EPA on the October 1997, Discharge Monitoring Reports.

**5. Anticipated time of condition if applicable**

Unknown. The non-compliant condition was discovered during routine monitoring of Outfall 03A181 on October 30, 1997 at 12:17 pm.

**6. Duration of condition if uncorrected**

The discharge from this cooling tower is intermittent. Repeat samples collected on November 20, 1997, and March 4, 1998, were compliant with permit limits.

**7. Steps taken to reduce and eliminate condition**

Upon discovery of the non-compliant condition, the discharge was stopped. Due to safety/equipment damage concerns, the discharge was resumed upon completion of adjusting the pH with HCL to within permit limits. The operating group has reduced the number of cycles of concentration in the cooling tower to lower the pH and reduce vanadium concentrations in the cooling tower basin.



**8. Steps taken to prevent a recurrence of the condition**

As a result of this incident, a review of the procedures and equipment for the TA-55-6 cooling tower was performed. The review revealed that equipment maintenance and procedures were not consistent with Laboratory standards for cooling tower maintenance. The operating group has assigned personnel to track routine inspections, operation & maintenance and preventative maintenance on the cooling tower.

**9. Steps taken to minimize any adverse impact to navigable water**

No adverse impact to navigable waters is anticipated as the discharge did not cross the Laboratory boundary or reach the Rio Grande.

**Water Quality Standard Sampling  
Los Alamos National Laboratory  
NPDES Permit # NM0028355  
Permit Year 8/1/97 through 7/31/98**

<b>Outfall#</b>	<b>TA/Bldg</b>	<b>Sample Collected</b>	<b>Comments</b>
01A001	3-22	yes	N/A
02A007	16-540	No	No Discharge
02A129	21-357	yes	N/A
03A021	3-29	yes	N/A
03A022	3-127	yes	N/A
03A024	3-187	No	No Discharge
03A025	3-208	yes	N/A
03A027	3-285	yes	N/A
03A028	15-202	yes	N/A
03A034	21-166	No	No Discharge
03A035	21-210	No	No Discharge
03A036	21-220	No	No Discharge
03A038	33-114	No	No Discharge
03A040	43-1	No	No Discharge
03A042	46-1	No	No Discharge
03A045	48-1	No	No Discharge
03A047	53-60	yes	N/A
03A048	53-62	yes	N/A
03A049	53-64	yes	N/A
03A113	53-293,365,1032	yes	N/A
03A125	53-28	No	No Discharge
03A130	11-30	yes	N/A
03A145	53-6	No	No Discharge
03A146	53-14	No	No Discharge
03A148	3-1837	No	No Discharge
03A158	21-209	yes	N/A
03A160	35-124	No	Outfall discharged, No sample collected
03A181	55-6	yes	N/A
03A185	15-312	yes	N/A
04A016	48-1	No	No Discharge
04A070	16-220	No	No Discharge
04A083	16-202	No	No Discharge
04A091	16-450	No	No Discharge
04A092	16-370	No	No Discharge
04A094	3-170	No	No Discharge
04A101	40-9	No	No Discharge
04A115	8-70	No	No Discharge
04A118	Pajarito Well #4	yes	N/A
04A127	35-213	No	No Discharge
04A131	48-1	No	No Discharge
04A139	15-184	No	No Discharge
04A141	39-69	No	No Discharge
04A143	15-306	yes	N/A
04A152	48-28	No	No Discharge
04A153	48-1	yes	N/A

**Water Quality Standard Sampling  
Los Alamos National Laboratory  
NPDES Permit # NM0028355  
Permit Year 8/1/97 through 7/31/98**

<b>Outfall#</b>	<b>TA/Bldg</b>	<b>Sample Collected</b>	<b>Comments</b>
04A156	39-89	No	No Discharge
04A157	16-460	No	No Discharge
04A161	Otowi Well #1	yes	N/A
04A163	Pajarito Well #1	yes	N/A
04A164	Pajarito Well #2	No	No Discharge
04A165	Pajarito Well #3	yes	N/A
04A166	Pajarito Well #5	No	No Discharge
04A171	Guaje Well #1	No	No Discharge
04A172	Guaje Well #1A	No	No Discharge
04A173	Guaje Well #2	No	No Discharge
04A174	Guaje Well #4	No	No Discharge
04A175	Guaje Well #5	No	No Discharge
04A176	Guaje Well #6	yes	N/A
04A177	Guaje Booster #1	No	No Discharge
04A182	21-1003	yes	N/A
04A186	Otowi #4	yes	N/A
05A053	16-410	No	No Discharge
05A054	16-430	yes	N/A
05A055	16-401,406	yes	N/A
05A056	16-260	No	No Discharge
05A066	9-21,28,29,32-35,37,38 & 40	No	Outfall discharged, No sample collected
05A067	9-41,42,43,45, & 46	No	No Discharge
05A068	9-48	yes	N/A
05A069	11-50	No	No Discharge
05A071	16-430	No	No Discharge
05A072	16-460	No	No Discharge
05A096	11-51	No	No Discharge
05A097	11-52	No	No Discharge
06A073	16-222	No	No Discharge
06A074	8-22	No	No Discharge
06A075	8-21	No	No Discharge
06A079	40-4	yes	N/A
06A080	40-5	No	No Discharge
06A081	40-8	No	No Discharge
06A082	40-12	No	No Discharge
06A099	40-23	No	No Discharge
06A100	40-15	yes	N/A
06A106	36-1	No	No Discharge
06A123	15-183	No	No Discharge
06A132	35-87	No	No Discharge
051051	50-1	yes	N/A
SSS05S	TA21-Sewage Plant	No	No Discharge
SSS13S	TA46 SWSC Plant	yes	N/A

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

001 Y  
DISCHARGE NUMBER

MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

POWER PLANT DISCHARGE

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	505 665-0453	DATE			
			98	8	26	
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

001 Y  
DISCHARGE NUMBER

MAJOR  
F - FINAL

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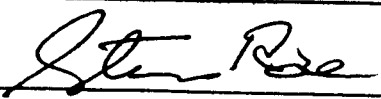
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

POWER PLANT DISCHARGE

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.3	2.3	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30.0 DAILY AVG	30.0 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	131	131	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under those statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
STEVEN R. RAE ESH-18 GROUP LEADER			505 665-0453	98	8	26
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

02A 007  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

BOILER BLOWDOWN  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*Steven Rae*

TELEPHONE

505 665-0453

DATE

98 8 26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

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(2-16) (17-19)

NM0028355

PERMIT NUMBER

02A 007

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

BOILER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE		NUMBER		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

02A 129  
DISCHARGE NUMBER

Y MAJOR  
F FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

BOILER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0 *	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0 *	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE 505 665-0453		DATE 98 8 26		
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Results for Cr and Cu reported in Quarterly DMRs per EPA instructions



PERMITTEE NAME/ADDRESS (Include Facility Name/Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

02A 129

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

BOILER BLOWDOWN  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.7	2.7	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	253	253	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. HAE ESH-18 GROUP LEADER							505 865-0453		98 8 26		
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER		
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Cull

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 021  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD								
FROM			TO					
YEAR	MO	DAY	YEAR	MO	DAY			
97	08	01	98	07	31			
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)					

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC	⊗	*****	*****	*****	*****					
01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON		*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
TOTAL CADMIUM		*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM		*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
TOTAL COBALT		*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
TOTAL COPPER		*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
TOTAL LEAD		*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 865-0483		DATE 98 8 26		
STEVEN H. RAE ESH-18 GROUP LEADER										
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

⊗ Results for As reported in quarterly DMRs per EPA instructions. (SR)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Cull

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 021  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

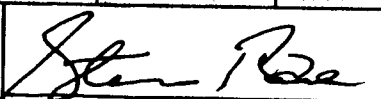
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	177	177	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER  TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 505 665-0453		DATE 98 8 26		
			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: L. Woodrow

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 022  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*Steven R. Rae*

TELEPHONE

505 665-0453

DATE

98 8 26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As reported in quarterly DMRs per EPA instructions.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: L. Woodrow

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 022  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

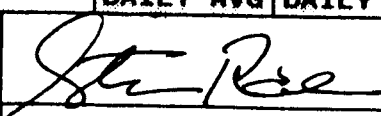
Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	4.9	4.9	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	225	225	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26		
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: L. Woodrow

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 024  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 865-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: L. Woodrow

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 024

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

## MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \_X\_ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: L. Rowton

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 025  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01002 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	*****	0.04	0.04		1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01022 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	*****	5.0	5.0		1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01027 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	*****	0.2	0.2		1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01034 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	*****	5.1	5.1		1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01037 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	*****	1.0	1.0		1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01042 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	*****	1.6	1.6		1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01051 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	*****	0.4	0.4		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN H. RAE ESH-18 GROUP LEADER							505 665-0453		8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Results for As reported in Quarterly DMRs per EPA instructions.



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 025  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: L. Rowton

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

COOLING TOWER BLOWDOWN  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	4.6	4.6	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	1100	1100	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)					TELEPHONE		DATE	
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 027  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: T. Trezona

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01	TO	98	07	31
(20-21)		(22-23)	(24-25)	(26-27)		(28-29) (30-31)

COOLING TOWER BLOWDOWN  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L		
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN H. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 865-0453		DATE 98 8 26		
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Steven Rae</i>		AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As reported in Quarterly DMRs per EPA instructions

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Trezona

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 027  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.03	0.03	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.2	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.1	3.5	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0	0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE	
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 028  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	⊗	SAMPLE MEASUREMENT *****	*****	*****	*****			MG/L			
		PERMIT REQUIREMENT *****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0		SAMPLE MEASUREMENT *****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
		PERMIT REQUIREMENT *****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0		SAMPLE MEASUREMENT *****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
		PERMIT REQUIREMENT *****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0		SAMPLE MEASUREMENT *****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
		PERMIT REQUIREMENT *****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0		SAMPLE MEASUREMENT *****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
		PERMIT REQUIREMENT *****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0		SAMPLE MEASUREMENT *****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
		PERMIT REQUIREMENT *****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0		SAMPLE MEASUREMENT *****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
		PERMIT REQUIREMENT *****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

⊗ Results for As reported in Quarterly DMRs per EPA instructions.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 028

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

## MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.8	3.8	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	54	54	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)									
STEVEN R. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				TELEPHONE		DATE			
						505 665-0453		98 8 26			
						AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 034  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

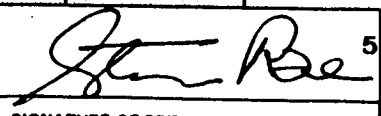
MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBAL	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER  
NM0028355

DISCHARGE NUMBER  
03A 034

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD  
FROM YEAR 97 MO 06 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX	MG/L	0	0/YR	GRAB
TOTAL ZINC 01092 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX	MG/L	0	0/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX	MG/L	0	0/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX	MG/L	0	0/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX	PCI/L	0	0/YR	GRAB
TOTAL MERCURY 71900 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX	MG/L	0	0/YR	GRAB
TRITIUM 82126 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX	PCI/L	0	0/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*Steven R. Rae*

TELEPHONE  
505 665-0453

DATE  
98 8 26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 035  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

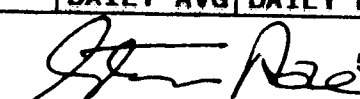
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
STEVEN R. RAE ESH-18 GROUP LEADER			505 665-0453	98 8 26			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 035

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS							
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX				1/YR	GRAB			
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX				1/YR	GRAB			
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB			
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX				1/YR	GRAB			
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB			
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX				1/YR	GRAB			
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX				1/YR	GRAB			
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB			
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX				1/YR	GRAB			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE							
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 0 26							
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR		MO		DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA

ADDRESS LOS ALAMOS NATIONAL LABORATORY

PO BOX 1663;

LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER NM0028355

DISCHARGE NUMBER 03A 036

Y MAJOR

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 036  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

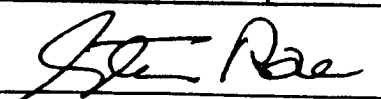
Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD  
FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \_X\_ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		TELEPHONE 505 665-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 038

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: P. Bussolini

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0433		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 15, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: P. Bussolini

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 038

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45)			UNITS (54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM					
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10	0.10				1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4	95.4				1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0				1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05	0.05				1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30	30				1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01	0.01				1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000	3000000				1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE				
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26				
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
 ADDRESS LOS ALAMOS NATIONAL LABORATORY  
 PO BOX 1663; MAIL STOP K490  
 LOS ALAMOS,, NM 87545

FACILITY  
 LOCATION Outfall Owner: J. Wilson

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

NM0028355  
 PERMIT NUMBER

03A 040  
 DISCHARGE NUMBER

Y MAJOR  
 F - FINAL

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN  
 \*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Wilson

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 040  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
STEVEN R. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE NUMBER		YEAR MO DAY			
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 042  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

COOLING TOWER BLOWDOWN  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER  TYPED OR PRINTED	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE 505 665-0453		DATE 98 8 26		
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-18) (17-19)

NM0028355  
PERMIT NUMBER

03A 042  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Steve Rae</i>		AREA CODE NUMBER			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 045

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: S. Helmick

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \_X\_ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE						505 665-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA

ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 045  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

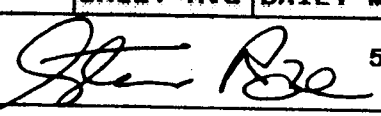
MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE JUL 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 047

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE 505 865-0453		DATE 98 8 26		
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Steven Rae</i>		AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As reported in Quarterly DMRs per EPA instructions

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (f/Dispers))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 047  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.3	3.0	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0	0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*Steven Rae*

TELEPHONE

505 865-0453

DATE

98 8 26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 048  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD  
FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 TO 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-66)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC		*****	*****	*****	*****						
01002 1 0 0		SAMPLE MEASUREMENT						MG/L			
		PERMIT REQUIREMENT				0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB	
TOTAL BORON		*****	*****	*****	*****	0.0	0.1	MG/L	0	2/YR	
01022 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB	
TOTAL CADMIUM		*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	
01027 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB	
TOTAL CHROMIUM		*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	
01034 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB	
TOTAL COBALT		*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	
01037 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB	
TOTAL COPPER		*****	*****	*****	*****	0.0	0.1	MG/L	0	2/YR	
01042 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB	
TOTAL LEAD		*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	
01051 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As reported in Quarterly DMRs per EPA instructions.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 048  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.1	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.4	2.2	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	21	21	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505-665-0453		DATE 98 8 26		
TYPED OR PRINTED										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
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LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 049  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

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OMB No. 2040-0004  
Approval expires 05-31-98

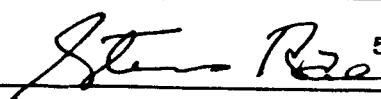
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****					
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
STEVEN R. RAE ESH-18 GROUP LEADER			505 665-0453	98 8 26			
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments hereto)

Results for As reported in Quarterly DMRs per EPA instructions

SR



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

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ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 049  
DISCHARGE NUMBER

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F - FINAL

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MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	MG/L	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.5	2.5	PCI/L	0	1/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	500	500	PCI/L	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED							SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

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FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 113  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

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MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
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(20-21)	(22-23)	(24-26)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
01002 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	0.04	0.04			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01022 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	5.0	5.0			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01027 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	0.2	0.2			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01034 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	5.1	5.1			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01037 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	1.0	1.0			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01042 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	1.6	1.6			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01051 1 0 0		PERMIT REQUIREMENT	*****	*****	*****	0.4	0.4			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 865-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

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COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.5	4.2	PCI/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	47	47	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1316. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. HAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 125  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (48-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of July 20, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16)

NM0028355  
PERMIT NUMBER

03A 125  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

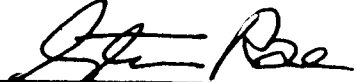
MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (39-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of July 20, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 130  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (46-53)			QUANTITY OR CONCENTRATION (46-53)			UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04	0.04			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2	0.2			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1	5.1			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0	1.0			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6	1.6			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4	0.4			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As reported in Quarterly DMRs per EPA instructions. *SR*

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 130  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.9	2.1	PCI/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	717	717	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1310. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 145  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
STEVEN R. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 11 1998



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 145

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX				1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX				1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX				1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX				1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX				1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX				1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE			
STEVEN H. HAE ESH-18 GROUP LEADER							505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: J. Fraser

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 146  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 6 years.)				TELEPHONE 505 665-0433		DATE 98 8 26			
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16) NM0028355 (17-19) 03A 146  
PERMIT NUMBER DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: J. Fraser

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10	0.10			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4	95.4			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01 47 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05	0.05			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30	30			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01	0.01			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000	3000000			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505-665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Trezona

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 148  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

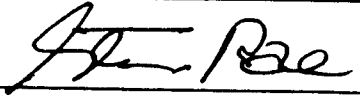
MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE	
STEVEN R. RAE ESH-18 GROUP LEADER			505 665-0453	98 8 26	
TYPED OR PRINTED			AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Trezona

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 148  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 158  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****					
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Results for As reported in Quarterly DMRs per EPA instructions.

SR

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 158  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.2	4.0	PCI/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	8506	8506	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 160  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall discharged during sampling and monitoring period.  
No sample was obtained.



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 160  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Post

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

03A 181  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21)		(22-23)	(24-25)	(26-27) (28-29) (30-31)	

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC		*****	*****	*****	*****			MG/L			
01002 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				0.04	0.04			1/YR	GRAB
TOTAL BORON		*****	*****	*****	*****	0.2	0.3	MG/L	0	2/YR	GRAB
01022 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				5.0	5.0			1/YR	GRAB
TOTAL CADMIUM		*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01027 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				0.2	0.2			1/YR	GRAB
TOTAL CHROMIUM		*****	*****	*****	*****	0.1	0.1	MG/L	0	2/YR	GRAB
01034 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				5.1	5.1			1/YR	GRAB
TOTAL COBALT		*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01037 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				1.0	1.0			1/YR	GRAB
TOTAL COPPER		*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01042 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				1.6	1.6			1/YR	GRAB
TOTAL LEAD		*****	*****	*****	*****	0.1	0.1	MG/L	0	2/YR	GRAB
01051 1 0 0		SAMPLE MEASUREMENT									
		PERMIT REQUIREMENT				0.4	0.4			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE						505-865-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As reported in quarterly DMRs per EPA instructions. (Signature)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
 ADDRESS LOS ALAMOS NATIONAL LABORATORY  
 PO BOX 1663; MAIL STOP K490  
 LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Post

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 181

DISCHARGE NUMBER

Y MAJOR  
 F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

## MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.10	0.28	MG/L	1	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.4	0.7	MG/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.2	1.8	MG/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.03	0.05	MG/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.9	3.7	PCI/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0	0	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 6 years.)					TELEPHONE		DATE		
STEVEN R. HAE ESH-18 GROUP LEADER							505 865-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Max for V exceeded.

See attached non-compliance report.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA

ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 185

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	QUANTITY OR LOADING (46-53)			QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L		
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN H. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26		
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Steve Rae</i>		AREA CODE	NUMBER	YEAR

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As reported in Quarterly DMRs per EPA instructions. (SR)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

03A 185

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

COOLING TOWER BLOWDOWN

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53)			QUANTITY OR CONCENTRATION (4 Card Only) (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.03	0.03	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.2	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	5.35 DAILY AVG	6.96 DAILY MAX	PCI/L	0	2/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	20	20	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)									
STEVEN R. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				TELEPHONE		DATE			
						505 665-0453		98 8 26			
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		AREA CODE				NUMBER		YEAR MO DAY			

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

04A 016

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 016  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

04A 070

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: R. Grace

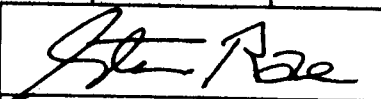
MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.8 DAILY AVG	1.8 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505-865-0453		DATE 98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 				AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 070  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: R. Grace

MONITORING PERIOD							
YEAR			MO	DAY	YEAR		
FROM	97	08	01	TO	98	07	31
(20-21)			(22-23)	(24-25)	(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)				TELEPHONE 505 665-0453		DATE 98 8 26		
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT <i>Steven Rae</i>		AREA CODE	NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

00028355  
PERMIT NUMBER

04A 083  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

505 665-0453

DATE

98 8 26

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 083  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB	
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB	
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB	
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB	
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB	
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB	
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB	
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB	
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB	
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB	
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB	
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB	
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB	
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 091  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)									
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM												
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB								
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB								
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB								
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB								
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB								
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB								
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26											
STEVEN R. RAE ESH-18 GROUP LEADER																			
TYPED OR PRINTED																			
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER	YEAR	MO	DAY								

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

04A 091

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS	
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB	
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB	
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB	
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB	
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB	
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB	
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB	
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB	
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE				
STEVEN R. HAE ESH-18 GROUP LEADER						505 665-0453		98 8 26				
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA Letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

04A 092

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. HAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

04A 092

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-26) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \_\_\_X\_\_\_ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX				1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX				1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX				1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX				1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX				1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX				1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE				
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26				
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER				

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. McCleary

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 094  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER		505 665-0453		98 8 26		
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997



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FACILITY

LOCATION Outfall Owner: S. McCleary

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 094  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*[Signature]*

TELEPHONE

505 665-0453

DATE

98 8 26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

04A 101

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

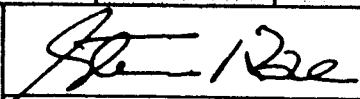
Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 101  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.				TELEPHONE 505-665-0453		DATE 98 8 26		
TYPED OR PRINTED										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

PERMIT NUMBER NM0028355

DISCHARGE NUMBER 04A 115

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05 31 98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS							
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX				1/YR	GRAB			
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB			
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX				1/YR	GRAB			
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX				1/YR	GRAB			
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX				1/YR	GRAB			
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX				1/YR	GRAB			
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX				1/YR	GRAB			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1310. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE							
STEVEN H. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26							
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR		MO		DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 115  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

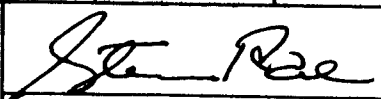
FACILITY

LOCATION Outfall Owner: R. Grace

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.				TELEPHONE 505 665-0483		DATE 98 8 26		
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

04A 118  
PERMIT NUMBER

04A 118  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	505 665-0453	TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						48	8	26	
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 118  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01	TO	98	07	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB	
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10	0.10		1/YR	GRAB	
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB	
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4	95.4		1/YR	GRAB	
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB	
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0		1/YR	GRAB	
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB	
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05	0.05		1/YR	GRAB	
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.8	0.8	0	1/YR	GRAB	
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30	30		1/YR	GRAB	
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB	
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01	0.01		1/YR	GRAB	
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	386	386	0	1/YR	GRAB	
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000	3000000		1/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: L. Woodrow

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 127  
DISCHARGE NUMBER

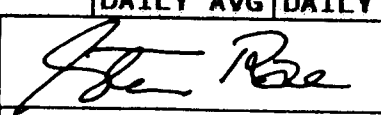
Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS	
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB	
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB	
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB	
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB	
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB	
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB	
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB	
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE				
STEVEN R. RAE ESH-18 GROUP LEADER												
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR	MO	DAY
						505		665-0453		98	8	26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

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ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: L. Woodrow

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 127  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01	TO	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)			

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 131  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM (20-21) (22-23) (24-25)			TO (26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

TELEPHONE

505 665-0453

DATE

98 8 26

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 131  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: S. Helmick

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	08	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 139  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	FROM	YEAR	MO	DAY
97	08	01	TO	98	07	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE \_\_\_X\_\_\_ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under those statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 6 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 663-0433		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
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PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

04A 139  
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MONITORING PERIOD					
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97	08	01	98	07	31
(20-21)		(22-23)	(24-25)	(26-27)	(28-29)
		(30-31)			

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26		AREA CODE NUMBER		
STEVEN R. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT										

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 141  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 665-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 141  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 143  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM (20-21) (22-23) (24-25)			TO (26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 143  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.8	2.8	0	1/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	162	162	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26		
STEVEN R. RAE ESH-18 GROUP LEADER										
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

NM0028355

PERMIT NUMBER

04A 152

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)  
97 08 01 98 07 31

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX				1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX				1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX				1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX				1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX				1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX				1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE				
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26				
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER		YEAR MO DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)  
NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 152  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	08	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26		
TYPED OR PRINTED										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 153  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: S. Helmick

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16)

NM0028355  
PERMIT NUMBER

04A 153  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

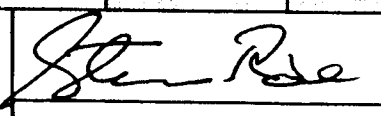
Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.2	MG/L	0	1/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.6	0.6	PCI/L	0	1/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	263	263	PCI/L	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 6 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

04A 156  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: T. Alexander

MONITORING PERIOD											
FROM			TO								
YEAR	MO	DAY	YEAR	MO	DAY						
97	08	01	98	07	31						

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS							
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01002 1 0 0	PERMIT REQUIREMENT	*****	*****			0.04 DAILY AVG	0.04 DAILY MAX				1/YR	GRAB			
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01022 1 0 0	PERMIT REQUIREMENT	*****	*****			5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB			
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01027 1 0 0	PERMIT REQUIREMENT	*****	*****			0.2 DAILY AVG	0.2 DAILY MAX				1/YR	GRAB			
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01034 1 0 0	PERMIT REQUIREMENT	*****	*****			5.1 DAILY AVG	5.1 DAILY MAX				1/YR	GRAB			
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01037 1 0 0	PERMIT REQUIREMENT	*****	*****			1.0 DAILY AVG	1.0 DAILY MAX				1/YR	GRAB			
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01042 1 0 0	PERMIT REQUIREMENT	*****	*****			1.6 DAILY AVG	1.6 DAILY MAX				1/YR	GRAB			
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB			
01051 1 0 0	PERMIT REQUIREMENT	*****	*****			0.4 DAILY AVG	0.4 DAILY MAX				1/YR	GRAB			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE							
STEVEN R. RAE ESH-18 GROUP LEADER						505 865-0453		98 0 26							
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR		MO		DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

04A 156  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

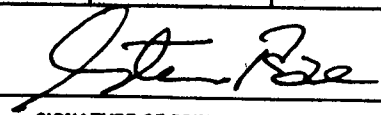
MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(120-21) (122-23) (124-25) (126-27) (128-29) (130-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		07/YR	GRAB	
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB	
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB	
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****						
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB	
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****						
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB	
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****						
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB	
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****						
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. HALE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		TELEPHONE 595 665-6459		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 157  
DISCHARGE NUMBER

Y MAJOR  
F FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	FROM	YEAR	MO	DAY
97	08	01	TO	98	07	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX				1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX				1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX				1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX				1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX				1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX				1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1310. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE				
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26				
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of September 19, 1997



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 157  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 161  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-63)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.03	< 0.06	MG/L	0	2/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04	0.04			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	2/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2	0.2			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1	5.1			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0	1.0			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6	1.6			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.1	MG/L	0	2/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4	0.4			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE		DATE	
STEVEN R. RAE ESH-18 GROUP LEADER		505 665-0453			
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Results for As were "less than" 0.06 mg/l.

This results was on a special sample taken for the Permit Re-Application.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 161  
DISCHARGE NUMBER

Y MAJOR  
F FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

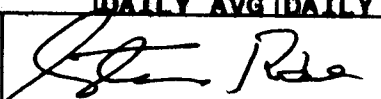
MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10	0.10		1/YR	GRAB
						DAILY AVG	DAILY MAX			
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.5	0.7	0	2/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4	95.4		1/YR	GRAB
						DAILY AVG	DAILY MAX			
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.3	0.5	0	2/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0	5.0		1/YR	GRAB
						DAILY AVG	DAILY MAX			
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.03	0.05	0	2/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05	0.05		1/YR	GRAB
						DAILY AVG	DAILY MAX			
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.2	3.4	0	2/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	30	30		1/YR	GRAB
						DAILY AVG	DAILY MAX			
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	2/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01	0.01		1/YR	GRAB
						DAILY AVG	DAILY MAX			
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	302	302	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000	3000000		1/YR	GRAB
						DAILY AVG	DAILY MAX			

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE
STEVEN R. RAE ESH-18 GROUP LEADER			505 665-0453	98 8 26
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 163  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

FROM

TO

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1310. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 163  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM							
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	0	1/YR	GRAB				
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB				
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB				
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB				
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB				
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB				
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB				
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB				
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.4	1.4	0	1/YR	GRAB				
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB				
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB				
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB				
THITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	515	515	0	1/YR	GRAB				
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE						
STEVEN R. RAE						505 665-0453		98 8 26						
ESH-18 GROUP LEADER						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR MO DAY				
TYPED OR PRINTED														
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)														

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 164  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN H. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)  
NM0028355  
PERMIT NUMBER

(17-19)  
04A 164  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if different))  
NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1863; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 165  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

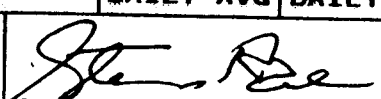
Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31

(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT (38-45)	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		TELEPHONE 505 865-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
 ADDRESS LOS ALAMOS NATIONAL LABORATORY  
 PO BOX 1683; MAIL STOP K490  
 LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

 NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)

NM0028355

PERMIT NUMBER

04A 165

DISCHARGE NUMBER

 Y MAJOR  
 F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

## MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
 97 08 01 98 07 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			(46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	GRAB		
01087 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10	0.10	DAILY AVG DAILY MAX		1/YR	GRAB		
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB		
01092 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4	95.4	DAILY AVG DAILY MAX		1/YR	GRAB		
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB		
01105 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0	5.0	DAILY AVG DAILY MAX		1/YR	GRAB		
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB		
01147 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05	0.05	DAILY AVG DAILY MAX		1/YR	GRAB		
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.6	3.6	PCI/L	0	1/YR	GRAB		
11503 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	30	30	DAILY AVG DAILY MAX		1/YR	GRAB		
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB		
71900 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01	0.01	DAILY AVG DAILY MAX		1/YR	GRAB		
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	44	44	PCI/L	0	1/YR	GRAB		
82126 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000	3000000	DAILY AVG DAILY MAX		1/YR	GRAB		
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE				
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26				
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 166  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE						505 665-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)	(17-19)
NM0028355	04A 166
PERMIT NUMBER	DISCHARGE NUMBER


Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		TELEPHONE 505-865-0453		DATE 98 8 26	
TYPED OR PRINTED								AREA CODE		NUMBER	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 171  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
 ADDRESS LOS ALAMOS NATIONAL LABORATORY  
 PO BOX 1663; MAIL STOP K490  
 LOS ALAMOS,, NM 87545

FACILITY  
 LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

NM0028355  
 PERMIT NUMBER

04A 171  
 DISCHARGE NUMBER

Y MAJOR  
 F - FINAL

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
 97 08 01 98 07 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10	0.10			1/YR	GRAB
						DAILY AVG	DAILY MAX				
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4	95.4			1/YR	GRAB
						DAILY AVG	DAILY MAX				
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
						DAILY AVG	DAILY MAX				
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05	0.05			1/YR	GRAB
						DAILY AVG	DAILY MAX				
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30	30			1/YR	GRAB
						DAILY AVG	DAILY MAX				
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01	0.01			1/YR	GRAB
						DAILY AVG	DAILY MAX				
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000	3000000			1/YR	GRAB
						DAILY AVG	DAILY MAX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE

ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

TELEPHONE

505 665-0453

DATE

98 8 26

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA CODE NUMBER YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
 ADDRESS LOS ALAMOS NATIONAL LABORATORY  
 PO BOX 1663; MAIL STOP K490  
 LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
 DISCHARGE MONITORING REPORT (DMR)  
 (2-16) (17-19)

NM0028355  
 PERMIT NUMBER

04A 172  
 DISCHARGE NUMBER

Y MAJOR  
 F - FINAL

Form Approved.  
 OMB No. 2040-0004  
 Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
 97 08 01 98 07 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-46)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 6 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE		NUMBER	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 172  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. RAE ESH-18 GROUP LEADER						505 665-0453		8 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 173  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM (20-21) (22-23) (24-25)			TO (26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. HAE ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	98 8 26			
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)								YEAR	MO	DAY	



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

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MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26		
STEVEN R. RAE ESH-18 GROUP LEADER										
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

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FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

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MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
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NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1310. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of July 20, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

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ADDRESS LOS ALAMOS NATIONAL LABORATORY  
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(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 174  
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Y MAJOR  
F - FINAL

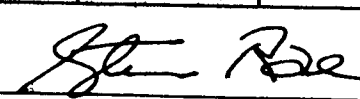
Form Approved.  
OMB No. 2040-0004  
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MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN H. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 565-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of July 20, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 175  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. HAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 175  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: D. Padilla

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21)			(26-27)		
(22-23)			(28-29)		
(24-25)			(30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0433		DATE 98 8 26		
TYPED OR PRINTED										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 176  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-61)			(4 Card Only) QUANTITY OR CONCENTRATION (46-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 176  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10	0.10			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4	95.4			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05	0.05			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.7	0.7	PCI/L	0	1/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30	30			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01	0.01			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	26	26	PCI/L	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000	3000000			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

04A 177  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (39-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.5 DAILY AVG	1.5 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505-665-0455		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)  
NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 177  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: D. Padilla

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
97	08	01	98	07	31	
(20-21)			(22-23)			(24-25)
(26-27)			(28-29)			(30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 663-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 182  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-63)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16) NM0028355 (17-19) 04A 182  
PERMIT NUMBER DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD  
FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	3.2	3.2	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	123	123	PCI/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 665-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

04A 186  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04	0.04			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2	0.2			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1	5.1			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0	1.0			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6	1.6			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4	0.4			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. HAE						505 865-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355

PERMIT NUMBER

04A 186

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

NONCONTACT COOLING WATER

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-63) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.02	MG/L	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10	0.10			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4	95.4			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05	0.05			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	5	5	PCI/L	0	1/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30	30			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01	0.01			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0	0	PCI/L	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	300000	300000			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		78 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 053  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 053  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM  
YEAR MO DAY  
97 08 01 TO 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 054  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD								
YEAR MO DAY			YEAR MO DAY					
97 08 01			98 07 31					
(20-21)			(22-23)			(24-25)		

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE \*\*\*  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (46-53)			QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)					TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER							505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of July 20, 1998



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 054  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31

FROM (20-21) (22-23) (24-25) TO (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10	0.10			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4	95.4			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.4	0.4	MG/L	0	1/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05	0.05			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	6.1	6.1	PCI/L	0	1/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30	30			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01	0.01			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	116	116	PCI/L	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000	3000000			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

STEVEN R. RAE

ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

*Steven R. Rae*

TELEPHONE

505 665-0453

DATE

98 8 26

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of July 20, 1998

AREA CODE NUMBER

YEAR MO DAY

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 055  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	< 0.06	MG/L	0	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.1	MG/L	0	3/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)

TELEPHONE  
505 865-0453

DATE  
98 8 20

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT  
*Steve Rae*

AREA CODE NUMBER  
YEAR MO DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As were "less than" 0.06 mg/L.

This results was on a special sample taken for the Permit Re-Application.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

05A 055  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM (20-21) (22-23) (24-25)			TO (26-27) (28-29) (30-31)		

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM							
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	2/YR	GRAB				
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB				
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.3	0.7	0	3/YR	GRAB				
	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB				
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.3	0.5	0	3/YR	GRAB				
	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB				
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.02	0.05	0	3/YR	GRAB				
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB				
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.1	2.3	0	2/YR	GRAB				
	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB				
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	3/YR	GRAB				
	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB				
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	381	452	0	2/YR	GRAB				
	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE						
STEVEN R. RAE						505 665-0453		78 8 26						
ESH-18 GROUP LEADER						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT								
TYPED OR PRINTED						AREA CODE	NUMBER	YEAR	MO	DAY				

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 056  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		8 8 25		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 056  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: R. Grace

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	08	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX				1/YR	GRAB	
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX				1/YR	GRAB	
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX				1/YR	GRAB	
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX				1/YR	GRAB	
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB	
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX				1/YR	GRAB	
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX				1/YR	GRAB	
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				PCI/L	0	0/YR	GRAB	
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX				1/YR	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26					
STEVEN R. RAE ESH-18 GROUP LEADER													
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR		MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

05A 066  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY

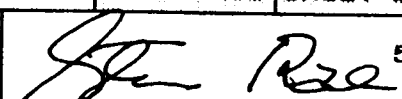
LOCATION Outfall Owner: T. Alexander

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)			 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 665-0453		DATE 98 8 26		
TYPED OR PRINTED							AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

Note: Outfall discharged during monitoring period. No sample was obtained.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 066  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: T. Alexander

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	08	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE						505 865-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16) NM0028355 (17-19) 05A 067  
PERMIT NUMBER DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD  
FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 665-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998



PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if different))

NAME UNIVERSITY OF CALIFORNIA

ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

(2-16)

(17-19)

NM0028355  
PERMIT NUMBER

05A 067  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 06 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 6 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 865-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 068  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: T. Alexander

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	08	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.5 DAILY AVG	1.5 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	0	1/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  
STEVEN R. RAE  
ESH-18 GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)

TELEPHONE  
505 665-0453

DATE  
98 8 26

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

AREA CODE

NUMBER

YEAR

MO

DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)  
NM0028355  
PERMIT NUMBER

(17-19)  
05A 068  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10	0.10	MG/L		1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4	95.4	MG/L		1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0	5.0	MG/L		1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05	0.05	MG/L		1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	PCI/L	0	1/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	30	30	PCI/L		1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01	0.01	MG/L		1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	107	107	PCI/L	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000	3000000	PCI/L		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE						505-665-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 069  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM (20-21) (22-23) (24-25)			TO (26-27) (28-29) (30-31)		

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			UNITS (54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)								
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM												
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB								
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB								
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB								
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB								
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB								
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB								
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 865-0453		DATE 98 8 26											
STEVEN R. RAE																			
ESH-18 GROUP LEADER																			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																			

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 069  
DISCHARGE NUMBER

Y MAJOR  
F FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 071  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	FROM	YEAR	MO	DAY
97	08	01	TO	98	07	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA

ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 071  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE \_X\_ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 665-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))  
NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

(2-16)  
NM0028355  
PERMIT NUMBER

(17-19)  
05A 072  
DISCHARGE NUMBER


Y MAJOR  
F - FINAL

FACILITY  
LOCATION Outfall Owner: R. Grace

MONITORING PERIOD						
FROM			TO			
YEAR	MO	DAY	YEAR	MO	DAY	
97	08	01	98	07	31	
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)			

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		TELEPHONE 595-665-6459		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997



PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) NM0028355 (17-19) 05A 072 Y MAJOR  
PERMIT NUMBER DISCHARGE NUMBER  
F - FINAL

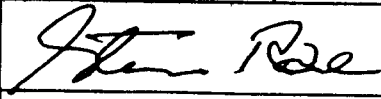
Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: R. Grace

MONITORING PERIOD  
FROM YEAR MO DAY TO YEAR MO DAY  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		TELEPHONE 505-865-0459		DATE 98 8 26	
TYPED OR PRINTED								AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 096  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: R. Grace

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	08	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

HIGH EXPLOSIVE WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*  
NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-63) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 096  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

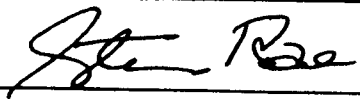
MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
STEVEN R. RAE ESH-18 GROUP LEADER								505 665-0453		98 8 26	
TYPED OR PRINTED						AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355

PERMIT NUMBER

05A 097

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-46)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE						505 665-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05A 097  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

HIGH EXPLOSIVE WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 073  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. HAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 073  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

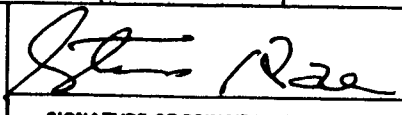
Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)										
STEVEN R. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		TELEPHONE						DATE			
		505 665-0453						78	8	26	
		AREA CODE	NUMBER				YEAR	MO	DAY		

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 074  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM (20-21) (22-23) (24-25)			TO (26-27) (28-29) (30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: R. Grace

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 074  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT PERMIT REQUIREMENT	QUANTITY OR LOADING (46-53)			QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE		NUMBER	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 075  
DISCHARGE NUMBER

Y MAJOR  
F FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 075  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

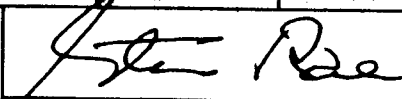
MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	SAMPLE MEASUREMENT	(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX	MG/L	0	0/YR	GRAB
TOTAL ZINC 01092 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX	MG/L	0	0/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX	MG/L	0	0/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX	MG/L	0	0/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX	PCI/L	0	0/YR	GRAB
TOTAL MERCURY 71900 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX	MG/L	0	0/YR	GRAB
TRITIUM 82126 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX	PCI/L	0	0/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		TELEPHONE 505 665-0453	DATE 98 8 26			
TYPED OR PRINTED					AREA CODE		NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 079  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(120-21) (122-23) (124-25)				(126-27) (128-29) (130-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER		YEAR MO DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)  
NMO028355  
PERMIT NUMBER

(17-19)  
06A 079  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)									
		AVERAGE (54-61)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (54-61)				UNITS (54-61)								
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB								
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB								
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.2	MG/L	0	1/YR	GRAB								
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB								
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	1/YR	GRAB								
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB								
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB								
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB								
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	1.0	1.0	PCI/L	0	1/YR	GRAB								
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB								
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB								
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB								
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	78	78	PCI/L	0	1/YR	GRAB								
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 865-0453		DATE JUL 8 26											
STEVEN R. RAE																			
ESH-18 GROUP LEADER																			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		Note: Outfall deleted. Please see EPA letter of May 15, 1998				YEAR		MO DAY											

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)  
NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 080  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM							
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB			
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB			
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB			
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB			
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB			
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB			
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB			
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB			
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB			
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB			
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB			
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB			
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB			
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE						
STEVEN R. RAE						505 665-0453		98 8 26						
ESH-18 GROUP LEADER														
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY				

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16) NM0028355

PERMIT NUMBER

(17-19) 06A 080

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

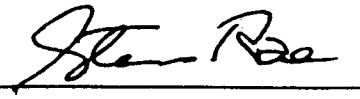
MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE \_\_\_X\_\_\_ \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			UNITS (54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT 		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

06A 081  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21)		(22-23)	(24-25)		(26-27)
		(28-29)			(30-31)

PHOTO WASTE DISCHARGES  
\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			UNITS (54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)								
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM												
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB								
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB								
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB								
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB								
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB								
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB								
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26											
STEVEN R. RAE ESH-18 GROUP LEADER																			
TYPED OR PRINTED																			
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY									

Note: Outfall deleted.

Please see EPA letter of March 10, 1998



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
 ADDRESS LOS ALAMOS NATIONAL LABORATORY  
 PO BOX 1663; MAIL STOP K490  
 LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355

PERMIT NUMBER

06A 081

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

## MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
 97 08 01 98 07 31  
 (20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

## PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 082  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM (20-21) (22-23) (24-25)			TO (26-27) (28-29) (30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX		1/YR	GRAB
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX		1/YR	GRAB
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX		1/YR	GRAB
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX		1/YR	GRAB
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX		1/YR	GRAB
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		7/ 8/ 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 082  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD								
YEAR	MO	DAY	TO	YEAR	MO	DAY		
97	08	01		98	07	31		
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)				

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355

PERMIT NUMBER

06A 099

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)	X	(3 Card Only) QUANTITY OR LOADING (46-53) (54-61)			(4 Card Only) QUANTITY OR CONCENTRATION (39-45) (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355

PERMIT NUMBER

06A 099

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 6 years.)				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 505 865-0453		DATE 98 8 26	
TYPED OR PRINTED						AREA CODE		NUMBER		YEAR	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of September 19, 1997

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA

ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16) NM0028355

PERMIT NUMBER

(17-19) 06A 100

DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.

OMB No. 2040-0004

Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)  
97 08 01 98 07 31

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			UNITS (54-61)	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	1/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER STEVEN R. RAE ESH-18 GROUP LEADER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0433		DATE 98 8 26			
TYPED OR PRINTED											SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 100  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY

LOCATION Outfall Owner: T. Alexander

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	06	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)									
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM												
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	0	1/YR	GRAB									
01087 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB									
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB									
01092 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB									
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	0	1/YR	GRAB									
01105 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB									
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB									
01147 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB									
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.1	2.1	0	1/YR	GRAB									
11503 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB									
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	0	1/YR	GRAB									
71900 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB									
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	145	145	0	1/YR	GRAB									
82126 1 0 0	PERMIT REQUIREMENT	*****	*****	*****	*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB									
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0433		DATE JUL 8 26											
STEVEN R. RAE																			
ESH-18 GROUP LEADER																			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY									

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of May 15, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: E. Mullen

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

(2-16)  
NM0028355  
PERMIT NUMBER

(17-19)  
06A 106  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR MO DAY TO YEAR MO DAY  
97 08 01 98 07 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1310. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		78 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)



PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: E. Mullen

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)

NM0028355  
PERMIT NUMBER

06A 106  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-25) (26-27) (28-29) (30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE (54-61)	MAXIMUM (54-61)	UNITS (54-61)	MINIMUM (38-45)	AVERAGE (46-53)	MAXIMUM (46-53)	UNITS (46-53)			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE						505 665-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 123  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (46-53)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE		NUMBER			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY LOCATION Outfall Owner: T. Alexander

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 123  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN H. RAE						505 665-0453		98 8 26			
ESH-18 GROUP LEADER											
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of January 14, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: P. Bussolini

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 132  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD								
YEAR	MO	DAY	TO	YEAR	MO	DAY		
97	08	01		98	07	31		
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)									
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS								
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB								
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB								
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB								
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB								
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB								
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB								
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR	GRAB								
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB								
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 665-0453		DATE 98 8 26											
STEVEN R. HAE																			
ESH-18 GROUP LEADER																			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY									

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location (If Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: P. Bussolini

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

06A 132  
DISCHARGE NUMBER

Y MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
FROM			TO		
(20-21) (22-23) (24-25)			(26-27) (28-29) (30-31)		

PHOTO WASTE DISCHARGES

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			0	0/YR	GRAB
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. HAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please See EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: S. Hanson

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

051 A  
DISCHARGE NUMBER

MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01		98	07	31
(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

INDUST. WASTE TREATMENT DISCHARGE

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04 DAILY AVG	0.04 DAILY MAX			1/YR	GRAB
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	2/YR	GRAB
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2 DAILY AVG	0.2 DAILY MAX			1/YR	GRAB
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1 DAILY AVG	5.1 DAILY MAX			1/YR	GRAB
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	GRAB
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0 DAILY AVG	1.0 DAILY MAX			1/YR	GRAB
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6 DAILY AVG	1.6 DAILY MAX			1/YR	GRAB
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4 DAILY AVG	0.4 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		78 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY	

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

\* Results for Cd, Cr, Cu, and Pb reported in Quarterly DMRs per EPA instructions.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

051 A  
DISCHARGE NUMBER

MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

FACILITY  
LOCATION Outfall Owner: S. Hanson

MONITORING PERIOD							
FROM	YEAR	MO	DAY	TO	YEAR	MO	DAY
	97	08	01		98	07	31
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

INDUST. WASTE TREATMENT DISCHARGE

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)				NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TOTAL VANADIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01087 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	GRAB
TOTAL ZINC	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
01092 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	GRAB
TOTAL ALUMINUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.1	MG/L	0	2/YR	GRAB
01105 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	GRAB
TOTAL SELENIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	1/YR	GRAB
01147 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	GRAB
RADIUM-226 + 228	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L			
11503 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	30.0 DAILY AVG	30.0 DAILY MAX			1/YR	GRAB
TOTAL MERCURY	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L			
71900 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	GRAB
TRITIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	1/YR	GRAB
82126 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	300000 DAILY AVG	300000 DAILY MAX			1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1316. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE 505 565-0453		DATE 98 8 26				
STEVEN R. RAE ESH-18 GROUP LEADER											
TYPED OR PRINTED					SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for Zn, Ra-226/228, Hg reported in Quarterly DMRs per EPA instructions.  
Waste stream survey results for Outfall 051 indicated no accelerator - produced tritium.  
Tritium results of 6300 nCi/L is reactor produced.

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY  
LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05S A  
DISCHARGE NUMBER

MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD					
YEAR	MO	DAY	YEAR	MO	DAY
97	08	01	98	07	31
(20-21)		(22-23)	(24-25)		(26-27)
		(28-29)			(30-31)

FROM TO

TREATED SANITARY SEWAGE EFFLUENT

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53)			(4 Card Only) (38-45)			(5-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
TOTAL ARSENIC	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01002 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.04	0.04				1/YR	GRAB	
						DAILY AVG	DAILY MAX						
TOTAL BORON	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01022 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0				1/YR	GRAB	
						DAILY AVG	DAILY MAX						
TOTAL CADMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01027 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.2	0.2				1/YR	GRAB	
						DAILY AVG	DAILY MAX						
TOTAL CHROMIUM	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01034 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	5.1	5.1				1/YR	GRAB	
						DAILY AVG	DAILY MAX						
TOTAL COBALT	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01037 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.0	1.0				1/YR	GRAB	
						DAILY AVG	DAILY MAX						
TOTAL COPPER	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01042 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	1.6	1.6				1/YR	GRAB	
						DAILY AVG	DAILY MAX						
TOTAL LEAD	SAMPLE MEASUREMENT	*****	*****	*****	*****				MG/L	0	0/YR	GRAB	
01051 1 0 0	PERMIT REQUIREMENT	*****	*****		*****	0.4	0.4				1/YR	GRAB	
						DAILY AVG	DAILY MAX						

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)	TELEPHONE	DATE
STEVEN R. RAE ESH-18 GROUP LEADER		505 665-0453	98 8 26
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998



PERMITTEE NAME/ADDRESS (Include Facility Name/Location (if Different))

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

05S A  
DISCHARGE NUMBER

MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD						
YEAR	MO	DAY	TO	YEAR	MO	DAY
97	08	01	TO	98	07	31
(20-21) (22-23) (24-25)				(26-27) (28-29) (30-31)		

TREATED SANITARY SEWAGE EFFLUENT

\*\*\* NO DISCHARGE X \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53)			(4 Card Only) QUANTITY OR CONCENTRATION (38-45)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX		1/YR	GRAB
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX		1/YR	GRAB
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX		1/YR	GRAB
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX		1/YR	GRAB
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX		1/YR	GRAB
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			MG/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX		1/YR	GRAB
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****			PCI/L	0	0/YR
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX		1/YR	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE		
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26		
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Note: Outfall deleted.

Please see EPA letter of March 10, 1998

PERMITTEE NAME/ADDRESS (Include Facility Name/ Location if Different)

NAME UNIVERSITY OF CALIFORNIA  
ADDRESS LOS ALAMOS NATIONAL LABORATORY  
PO BOX 1663; MAIL STOP K490  
LOS ALAMOS,, NM 87545

FACILITY

LOCATION Outfall Owner: D. Padilla

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
(2-16) (17-19)

NM0028355  
PERMIT NUMBER

13S A  
DISCHARGE NUMBER

MAJOR  
F - FINAL

Form Approved.  
OMB No. 2040-0004  
Approval expires 05-31-98

MONITORING PERIOD

FROM YEAR 97 MO 08 DAY 01 TO YEAR 98 MO 07 DAY 31  
(20-21) (22-23) (24-26) (28-27) (28-29) (30-31)

TREATED SANITARY SEWAGE EFFLUENT  
\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (45-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (46-53) (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL ARSENIC 01002 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.03	< 0.06	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	0.04	0.04	SR		1/YR	COMP
TOTAL BORON 01022 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.2	0.4	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	5.0	5.0	DAILY AVG DAILY MAX		1/YR	COMP
TOTAL CADMIUM 01027 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	0.2	0.2	DAILY AVG DAILY MAX		1/YR	COMP
TOTAL CHROMIUM 01034 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	5.1	5.1	DAILY AVG DAILY MAX		1/YR	COMP
TOTAL COBALT 01037 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	1.0	1.0	DAILY AVG DAILY MAX		1/YR	COMP
TOTAL COPPER 01042 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.0	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	1.6	1.6	DAILY AVG DAILY MAX		1/YR	COMP
TOTAL LEAD 01051 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.0	0.1	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	0.4	0.4	DAILY AVG DAILY MAX		1/YR	COMP
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT				AREA CODE NUMBER		YEAR MO DAY			

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Results for As were "less than" 0.06 mg/L.

This results was on a special sample taken for the Permit Re-Application. SR

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

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FACILITY

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)  
DISCHARGE MONITORING REPORT (DMR)  
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TREATED SANITARY SEWAGE EFFLUENT

\*\*\* NO DISCHARGE \*\*\*

NOTE: Read instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61)			(4 Card Only) (38-45) QUANTITY OR CONCENTRATION (54-61)			NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM				UNITS
TOTAL VANADIUM 01087 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.01	0.01	MG/L	0	1/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	0.10 DAILY AVG	0.10 DAILY MAX			1/YR	COMP
TOTAL ZINC 01092 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.1	0.2	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	95.4 DAILY AVG	95.4 DAILY MAX			1/YR	COMP
TOTAL ALUMINUM 01105 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.3	0.5	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	5.0 DAILY AVG	5.0 DAILY MAX			1/YR	COMP
TOTAL SELENIUM 01147 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.03	0.05	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	0.05 DAILY AVG	0.05 DAILY MAX			1/YR	COMP
RADIUM-226 + 228 11503 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	2.2	4.5	PCI/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	30 DAILY AVG	30 DAILY MAX			1/YR	COMP
TOTAL MERCURY 71900 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	0.00	0.00	MG/L	0	2/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	0.01 DAILY AVG	0.01 DAILY MAX			1/YR	COMP
TRITIUM 82126 1 0 0	SAMPLE MEASUREMENT	*****	*****	*****	*****	50	50	PCI/L	0	1/YR	COMP
	PERMIT REQUIREMENT	*****	*****		*****	3000000 DAILY AVG	3000000 DAILY MAX			1/YR	COMP
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1318. (Penalties under these statutes may include fines up to \$10,000 and/or maximum imprisonment of between 6 months and 5 years.)				TELEPHONE		DATE			
STEVEN R. RAE ESH-18 GROUP LEADER						505 665-0453		98 8 26			
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COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)