Permit

Los Alamos
NATIONAL LABORATORY

Risk Reduction & Environmental Stewardship Division
Water Quality & Hydrology Group (RRES-WQH)
PO Box 1663, MS K497
Los Alamos, New Mexico 87545
(505) 665-1859 / Fax: (505) 665-9344

Date: November 25, 2003
Refer to: RRES-WQH: 03-316

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

SUBJECT: NPDES PERMIT NO. NM0028355, MONTHLY DISCHARGE MONITORING REPORTS (DMRS) FOR OCTOBER, 2003

Dear Ms. Strickley:

Enclosed are Los Alamos National Laboratory's monthly DMRs for October, 2003, as required under NPDES Permit No. NM0028355. There were no effluent limitations exceeded for the industrial outfalls and for Sanitary Outfall 13S during this monitoring period.

Please note, there was no discharge from Outfall 051 during the week of October 1, 2003 through October 11, 2003, therefore, only three samples are being reported for this monitoring period.

Please contact Carla Jacquez at (505) 665-0450 or Mike Saladen at (505) 665-6085 if you have questions concerning these DMRs.

Sincerely,

Steven R. Rae
Group Leader
Water Quality & Hydrology Group

SR:CJ/lm

DEC 1 2003
16154
iversity of California

Enclosures: a/s

Cy: M. Leavitt, NMED/SWQB, Santa Fe, NM, w/enc.
C. Voorhees, NMED/DOE/OB, Santa Fe, NM, w/enc.
N. Weber, San Ildefonso Pueblo Environmental Department, Santa Fe, NM, w/enc.
J. Vozella, DOE/OLASO, w/enc., MS A316
G. Turner, DOE/OLASO, w/enc., MS A316
J. Holt, ADO, w/enc., MS A104
B. Ramsey, RRES-DO, w/enc., MS J591
T. Grieggs, RRES-DO, w/enc., MS J591
T. George, RRES-DO, w/enc., MS J591
D. Stavert, RRES-EP w/enc., MS J591
C. Jacquez, RRES-WQH, w/enc., MS K497
RRES-WQH File, w/enc., MS K497
IM-5, w/enc., MS A150

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

NAME UNIVERSITY OF CALIFORNIA
LOS ALAMOS NATIONAL LABORATORY

ADDRESS PO BOX 1663; MAIL STOP K497
LOS ALAMOS, NM 87545

FACILITY UNIVERSITY OF CALIFORNIA
LOCATION LOS ALAMOS, NM 87545
ATTN: STEVEN RAE, RRES-WQH Grp. Ldr.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NM0028355	001 A
PERMIT NUMBER	**DISCHARGE NUMBER**

MAJOR

F - FINAL
POWER PLANT WASTEWATER

*** NO DISCHARGE _____ ***

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	03	10	01	TO	03	10	31

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	*****	*****		7.7	*****	7.7	(12)	0	01/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	1	1	(19)	0	01/30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	30 MO AVG	100 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.2781	0.2781	(03)	*****	*****	*****			01/30	ESTIMA TOTALIZED
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***** *****		ONCE/ MONTH	ESTIMA
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	0	0	(28)	0	01/30	GRAB
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	11 MO AVG	11 DAILY MX	UG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Steven R. Rae
RRES-WQH GROUP LEADER

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT THIS DOCUMENT AND ALL ATTACHMENTS WERE PREPARED UNDER MY DIRECTION OR SUPERVISION IN ACCORDANCE WITH A SYSTEM DESIGNED TO ASSURE THAT QUALIFIED PERSONNEL PROPERLY GATHER AND EVALUATE THE INFORMATION SUBMITTED. BASED ON MY INQUIRY OF THE PERSON OR PERSONS WHO MANAGE THE SYSTEM OR THOSE PERSONS DIRECTLY RESPONSIBLE FOR GATHERING THE INFORMATION, THE INFORMATION SUBMITTED IS, TO THE BEST OF MY KNOWLEDGE AND BELIEF, TRUE, ACCURATE, AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT FOR KNOWING VIOLATIONS.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
505 665-0453		03	11	25
AREA CODE	NUMBER	YEAR	MO	DAY

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

GEL QUALIFIER: TSS(J).PERMIT MODIFICATION DATED 2/26/01 - REPORTING DATE CHANGED TO BE DUE 28TH OF MONTH. TOTALIZED FLOW ESTIMATE.

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ATTN: STEVEN RAE, RRES-WQH Grp. Ldr.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NM0028355	051 A
PERMIT NUMBER	**DISCHARGE NUMBER**

MAJOR

F - FINAL
TREATED RADIOACTIVE LIQUID

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	03	10	01	TO	03	10	31

*** NO DISCHARGE _____ ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
OXYGEN DEMAND, CHEM. (HIGH LEVEL) (COD)	SAMPLE MEASUREMENT	*****	*****		*****	53	79	(19)	0	03/30	GRAB
00340 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	125 MO AVG	125 DAILY MX	MG/L		WEEKLY	GRAB
PH	SAMPLE MEASUREMENT	*****	*****		6.9	*****	8.1	(12)	0	03/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	REPORT MINIMUM	*****	REPORT DAILY MX	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	*****	*****		*****	2	4	(19)	0	03/30	GRAB
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	30 MO AVG	45 DAILY MX	MG/L		WEEKLY	GRAB
CADMIUM, TOTAL (AS CD)	SAMPLE MEASUREMENT	*****	*****		*****	0	0	(28)	0	03/30	GRAB
01027 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	50 MO AVG	50 DAILY MX	UG/L		WEEKLY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	*****	*****		*****	0.00	0.00	(19)	0	03/30	GRAB
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	1.34 MO AVG	2.68 DAILY MX	MG/L		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	*****	*****		*****	0.012	0.037	(19)	0	03/30	GRAB
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	1.393 MO AVG	1.393 DAILY MX	MG/L		WEEKLY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	*****	*****		*****	0	0	(28)	0	03/30	GRAB
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	423 MO AVG	524 DAILY MX	UG/L		WEEKLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Steven R. Rae
RRES-WQH GROUP LEADER

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
505 665-0453		03	11	25
AREA CODE	NUMBER	YEAR	MO	DAY

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

NO DISCHARGE FIRST WEEK OF OCTOBER 2003 (10/5/03-10/11/03).ONLY 3 SAMPLES FOR OCTOBER 2003.PERMIT MODIFICATION DATED 2/26/01 - REPORTING DATE CHANGED TO BE DUE 28TH OF MONTH.

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

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FACILITY UNIVERSITY OF CALIFORNIA
LOCATION LOS ALAMOS, NM 87545
ATTN: STEVEN RAE, RRES-WQH Grp. Ldr.

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

NM0028355	051 A
PERMIT NUMBER	DISCHARGE NUMBER

MAJOR

F - FINAL
TREATED RADIOACTIVE LIQUID

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	03	10	01	TO	03	10	31

*** NO DISCHARGE _____ ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	QUANTITY OR LOADING UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	QUALITY OR CONCENTRATION UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	*****	*****		*****	0	0	(19)	0	01/30	GRAB
01067 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	REPORT MO AVG	REPORT DAILY MX	MG/L		ONCE/ MONTH	GRAB
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	*****	*****		*****	0.00	0.00	(19)	0	03/30	GRAB
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	4.37 MO AVG	8.75 DAILY MX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.0190	0.0195	(03)	*****	*****	*****			99/99	RCORDR
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***** *****		CONTIN UOUS	RCORDR
MERCURY, TOTAL (AS HG)	SAMPLE MEASUREMENT	*****	*****		*****	0.00	0.00	(28)	0	03/30	GRAB
71900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	0.77 MO AVG	0.77 DAILY MX	UG/L		WEEKLY	GRAB
ORGANICS, TOTAL TOXIC (TTO)	SAMPLE MEASUREMENT	*****	*****		*****	0.0	0.0	(19)	0	01/30	GRAB
78141 1 0 0 * EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	1.0 MO AVG	1.0 DAILY MX	MG/L		ONCE/ MONTH	GRAB

NOTE: OUTFALL 051 - PARAMETERS QUALIFIED BY GEL QA/QC for October 2003
QUALIFIERS: **ESTIMATED VALUE (J) ; UNDETECTED/TARGET ANALYTE NOT DETECTED ABOVE DETECTION LIMIT (U); TARGET ANALYTE WAS DETECTED IN THE SAMPLE AS WELL AS THE ASSOCIATED BLANK (B)**

	COD	TSS	Cd(T)	Cr(T)	Pb(T)	Ni(T)	Zn(T)	Hg(T)
10/5 - 10/11	NO DISCHARGE – FIRST WEEK OF OCTOBER 2003							
10/15/03		J	U	B		B	B	U
10/20/03		J	U	B	B		B	U
10/27/03	J	U	U	B	B		B	B

TTOS
Out of the 86 TTO compounds, 84 compounds were qualified Undetected (U); 2 compounds were qualified estimated (J).

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Steven R. Rae
RRES-WQH GROUP LEADER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
505 665-0453		03	11	25
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
NO DISCHARGE FIRST WEEK OF OCTOBER 2003 (10/5/03-10/11/03).ONLY 3 SAMPLES FOR OCTOBER 2003.PERMIT MODIFICATION DATED 2/26/01 - REPORTING DATE CHANGED TO BE DUE 28TH OF MONTH. *THE LIMITS AND MONITORING FOR TOTAL TOXIC ORGANICS DO NOT INCLUDE 2,3,7,8-TETRACHLORODIBENZO-P-DIOXIN (TCDD), PESTICIDES, OR POLYCHLORINATED BIPHENYLS.

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LOS ALAMOS, NM 87545

FACILITY UNIVERSITY OF CALIFORNIA
LOCATION LOS ALAMOS, NM 87545
ATTN: STEVEN RAE, RRES-WQH Grp. Ldr.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NM0028355	055 A
PERMIT NUMBER	**DISCHARGE NUMBER**

MAJOR

F - FINAL
TREATED WASTEWATER

*** NO DISCHARGE _____ ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	03	10	01	TO	03	10	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
RDX, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****	0	0	(28)	0	01/30	GRAB
81364 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	200 MO AVG	660 DAILY MX	UG/L		TWICE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Steven R. Rae
RRES-WQH GROUP LEADER

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
505 665-0453		03	11	25
AREA CODE	NUMBER	YEAR	MO	DAY

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

GEL QUALIFIERS: RDX(U).OUTFALL DISCHARGED ONCE DURING MONITORING PERIOD.PERMIT MODIFICATION DATED 2/26/01 - REPORTING DATE CHANGED TO BE DUE 28TH OF MONTH.

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

NAME UNIVERSITY OF CALIFORNIA
LOS ALAMOS NATIONAL LABORATORY

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LOS ALAMOS, NM 87545

FACILITY UNIVERSITY OF CALIFORNIA
LOCATION LOS ALAMOS, NM 87545
ATTN: STEVEN RAE, RRES-WQH Grp. Ldr.

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NM0028355	097 A
PERMIT NUMBER	**DISCHARGE NUMBER**

MAJOR

F - FINAL
WASTEWATER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	03	10	01	TO	03	10	31

*** NO DISCHARGE X ***

NOTE: Read instructions before completing this form.

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
RDX, TOTAL	SAMPLE MEASUREMENT	*****	*****		*****			(28)	0	00/30	GRAB
81364 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	200 MO AVG	660 DAILY MX	UG/L		TWICE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Steven R. Rae
RRES-WQH GROUP LEADER

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TELEPHONE		DATE		
505 665-0453		03	11	25
AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMIT MODIFICATION DATED 2/26/01 - REPORTING DATE CHANGED TO BE DUE 28TH OF MONTH. NO DISCHARGE DURING MONITORING PERIOD.

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

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)

DISCHARGE MONITORING REPORT (DMR)

NM0028355	13S A
PERMIT NUMBER	**DISCHARGE NUMBER**

MAJOR

F - FINAL
TREATED SANITARY WASTEWATER

*** NO DISCHARGE _____ ***

NOTE: Read instructions before completing this form.

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	03	10	01	TO	03	10	31

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD. 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	4	5	(26)	*****	2	2	(19)	0	03/30	COMP24
00310 1 0 0 * EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	72 MO AVG	108 DAILY MX	LB/DY	*****	30 MO AVG	45 DAILY MX	MG/L		THREE/ MONTH	COMP24
PH	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.4	(12)	0	06/30	GRAB
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	6.0 MINIMUM	*****	9.0 MAXIMUM	SU		WEEKLY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	4	4	(26)	*****	2	2	(19)	0	01/30	COMP24
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	72 MO AVG	108 DAILY MX	LB/DY	*****	30 MO AVG	45 DAILY MX	MG/L		ONCE/ MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.2594	0.3630	(03)	*****	*****	*****			99/99	RCOTOT
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	*****	*****	*****	***** *****		CONTIN UOUS	RCOTOT
CHLORINE, TOTAL *** RESIDUAL	SAMPLE MEASUREMENT	*****	*****		*****	See Note	Below	(28)	0	00/30	GRAB
50060 1 0 0 ** EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	11 MO AVG	11 DAILY MX	UG/L		ONCE/ MONTH	GRAB
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	*****	*****		*****	2	2	(13)	0	01/30	GRAB
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	*****	*****	***** *****	*****	500 LOG MEAN	500 DAILY MX	#/100ML		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Steven R. Rae
RRES-WQH GROUP LEADER

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AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMIT MODIFICATION DATED 2/26/01 - REPORTING DATE CHANGED TO BE DUE 28TH OF MONTH. *AVERAGE DISCHARGE RATE < 0.3083. **TOTAL RESIDUAL CHLORINE - EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS ONLY APPLY WHEN DISCHARGE IS MADE TO CANADA DEL BUEY. ***OUTFALL DID NOT DISCHARGE TO CANADA DEL BUEY.