

Exelon Generation Company, LLC
Byron Station
4450 North German Church Road
Byron, IL 61010-9794

www.exeloncorp.com

Joe Cox

ExelonSM
Nuclear

August 20, 2009

**LTR: BYRON 2009-0087
File: 2.09.0411
1.10.0101**

**Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276**

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant Elimination System (NPDES) Permit Number IL0048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period of July 1, 2009 through July 31, 2009.

If there are any questions regarding this report, please contact M. Stanley Kerr, Chemistry Manager, at (815) 406-3200.

Respectfully,

Bradley J. Adams

**Bradley J. Adams
Plant Manager
Byron Nuclear Generation Station**

BJA\ZC\sdk

Attachments

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
DEMINEALIZER REGENERATE (001A)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
	7	0	1		7	3	1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 0.9	< 0.9	(19)	0	285	EC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-S
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01057 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager
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.

Bradley J. Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE		DATE		
815	406-3700	09	08	20
AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 29 of 31 days during this month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DEMINEALIZER REGENERATE (001A)

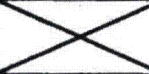
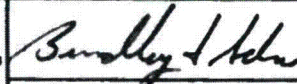
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0			9			0			To: 0		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
01082 1 0 0	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.017	0.085	(03)	-----			----	0	135	CN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----			----		DAILY	CONTIN
50050 1 0 0	SAMPLE MEASUREMENT										
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
PRINCIPAL EXECUTIVE OFFICER							615	408-3700	09	08	20
Bradley J. Adams							AREA CODE	NUMBER	YEAR	MONTH	DAY
Plant Manager											
TYPED OR PRINTED											

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

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 001B)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	7	0	1

From: To:

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.27	0.33	(28)	-----	< 8.3	13.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	38.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.02	-----	7.27	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	8.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.051	0.055	(28)	-----	1.5	2.2	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	38.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.005	0.008	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.					TELEPHONE		DATE			
Bradley J. Adams						815	408-3700	09	08	20	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 28 of 31 days during the month.											
2. BOD result for July 21, 2009 is an estimated value only because the seed depletion was outside the method acceptance limits.											

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER


MAJOR
(BUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

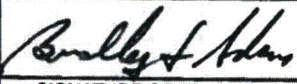
FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0 9 0			0 7 0			1			To: 0 9 0		

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.9	2.6	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.		TELEPHONE		DATE			
Bradley J. Adams			815	406-3700	09	08	20	
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT							

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 19 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0046313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD												
YEAR		MONTH		DAY			YEAR		MONTH		DAY	
From: 0	9	0	7	0	1		To: 0	9	0	7	3	1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.5	1.8	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.030	0.057	(03)	-----	-----	-----	-----	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

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 PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 408-3700

AREA
CODE

NUMBER

DATE

09 08 20

YEAR MONTH DAY

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

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

RADWASTE TREATMENT (FORMER 001D)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	07	01	09	07	31

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.7	1.1	(19)	0	240	CP
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.5	2.0	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.023	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTN
	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

Bradley J. Adams
Plant Manager

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 PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA
CODE

NUMBER

DATE

09 08 20

YEAR MONTH DAY

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

1. Flow existed through this outfall 8 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exton Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
	7	0	1		7	3	1

MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	-----	-----	-----	(12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	8.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
00630 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

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 PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA
CODE

NUMBER

09

YEAR

08

MONTH

20

DAY

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 6 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	07	01	09	07	31

From: To:

MAJOR (SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	4.2	6.5	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.104	0.284	(03)	-----	-----	-----	-----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	08	20	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
COOLING SYSTEM BLOWDOWN
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD
From: YEAR MONTH DAY 0 9 0 7 0 1 To: YEAR MONTH DAY 0 9 0 7 3 1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH					8.73		8.78	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE					8.0 MINIMUM		9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)				(26)			0.014	(19)	0	240	GR
01042 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			0.071 DAILY MAX	MG/L		WEEKLY	GRAB
ZINC, TOTAL (AS ZN)				(26)			0.025	(19)	0	240	GR
01082 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL				(26)				(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		21.98	28.99	(03)					0	135	CN
50060 1 0 0 EFFLUENT GROSS VALUE		REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL				(26)		0.14	0.32	(19)	0	240	GR
50060 1 0 0 EFFLUENT GROSS VALUE				LBS/DY		0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
HYDRAZINE				(26)				(19)		500	
81313 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.					TELEPHONE		DATE			
Bradley J. Adams Plant Manager						615 406-3700		09	08	20	
TYPED OR PRINTED						AREA CODE		NUMBER	YEAR	MONTH	DAY
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment											
SEE ATTACHED											
EPA Form 3320-1 (Rev 3/99)											

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	9	0	7	0	1	0	9	0	7	3	1

From:

To:

MAJOR
(SUBR 01)
F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	<input checked="" type="checkbox"/>										
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)			
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	09	08	20
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. This discharge point was not used this month.

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR			MONTH			DAY			YEAR			MONTH			DAY		
0	9	0	7	0	1	0	9	0	7	3	1						

From: To:

MAJOR
(SUBR 01)
F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	---			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		TWICE/MONTH	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	08	20	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
July 2009**

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
07/05/09	120	89.5
07/11/09	120	89.4
07/18/09	120	84.3
07/25/09	120	89.1

Note: Station procedures derive the *Calculated Maximum Allowable Blowdown Temperature* based on existing Rock River temperature and a calculated maximum river temperature increase. When the arithmetic sum of these values exceeds 120 degrees Fahrenheit, the *Calculated Maximum Allowable Temperature* limit defaults to 120 degrees Fahrenheit.

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of July 2009.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
July 2009**

COMMENTS:

1. The weekly halogen concentration curves and daily halogen dosing time reports are attached.
2. Bromine was not used this month.
3. There was no discharge of steam generator chemical cleaning wastewater containing hydrazine in this month.
4. Flow existed through this outfall 31 of 31 days.

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
07/01/09	45	45	07/08/09	45	45
07/02/09	45	45	07/09/09	45	45
07/03/09	37	37	07/10/09	38	39
07/04/09	38	38	07/11/09	45	40
07/05/09	39	39	07/12/09	45	45
07/06/09	45	45			
07/07/09	45	45			

HALOGEN DOSING CURVE

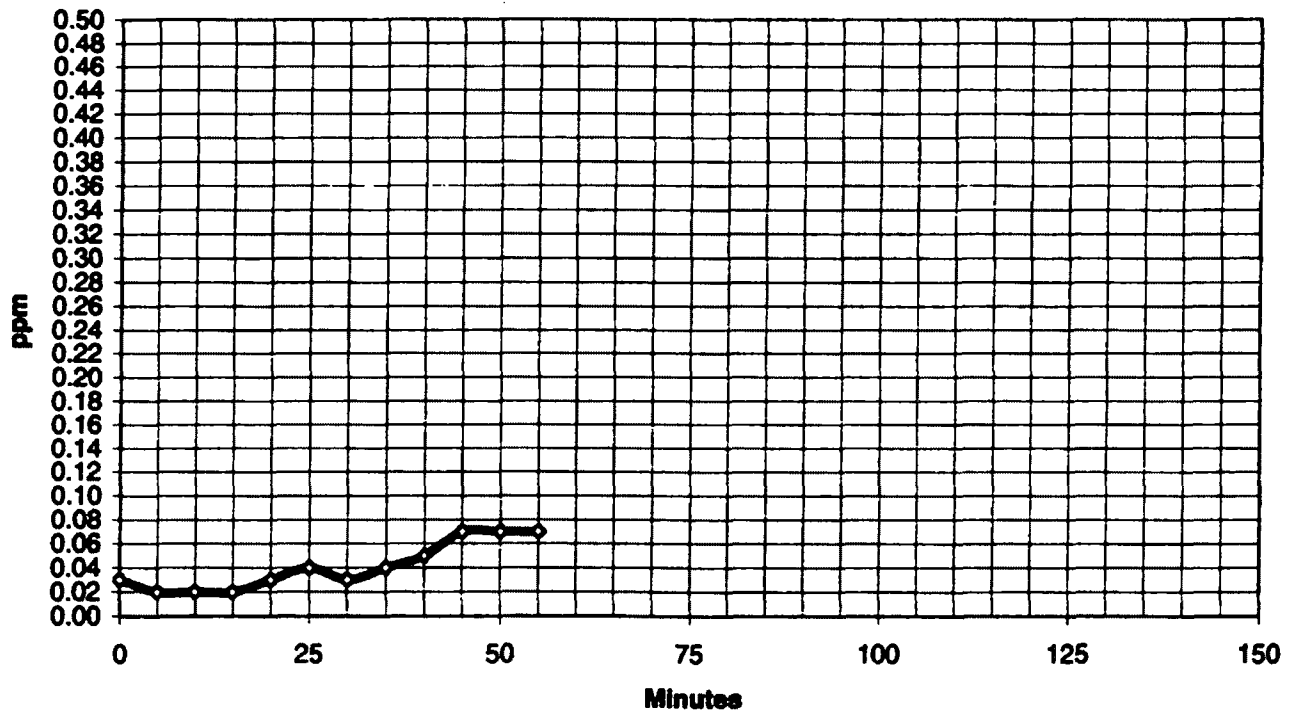
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/06/09
Time: 11:34

Analyzed by: D.L.
Reviewed by: D.M.

Unit: l

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



**EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION**

Date	Dosing Time (Minutes)	
	U-1	U-2
07/13/09	45	45
07/14/09	45	45
07/15/09	45	45
07/16/09	47	45
07/17/09	37	38
07/18/09	38	39
07/19/09	45	45

HALOGEN DOSING CURVE

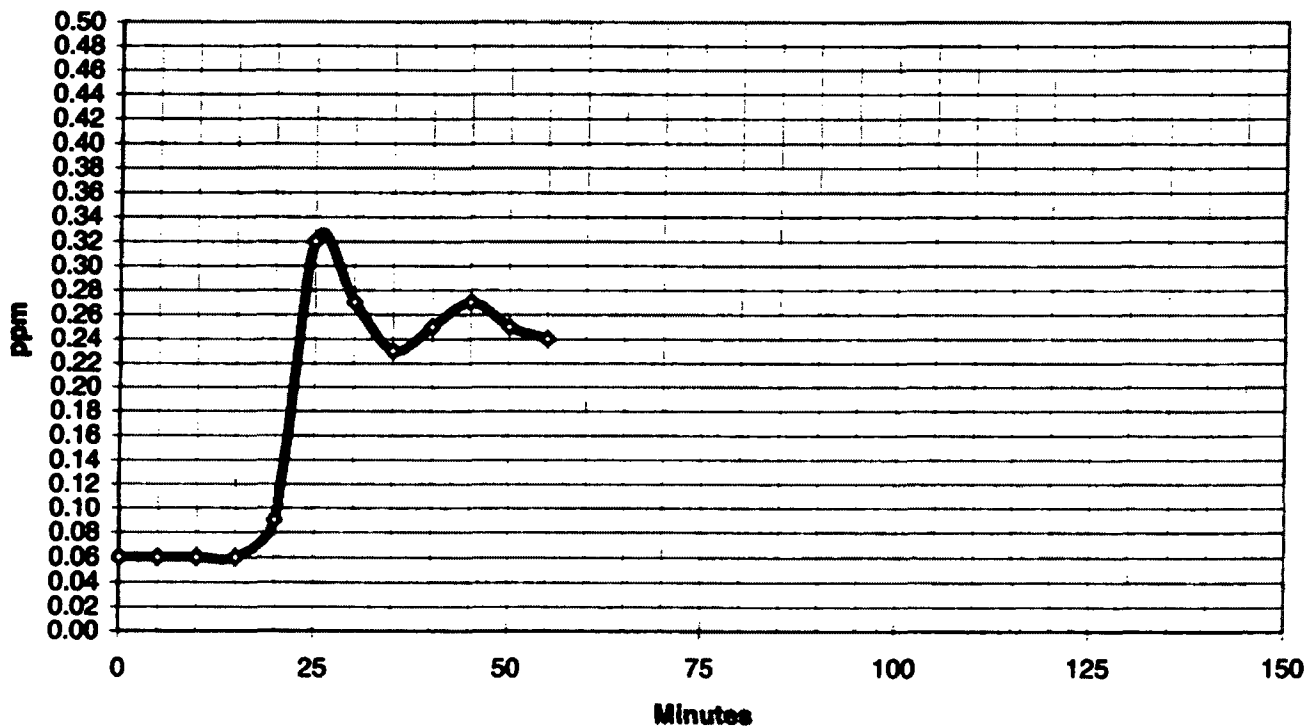
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/13/09
Time: 11:11

Analyzed by: D. A.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
07/20/09	43	44
07/21/09	43	42
07/22/09	45	42
07/23/09	43	44
07/24/09	40	40
07/25/09	40	40
07/26/09	40	40

HALOGEN DOSING CURVE

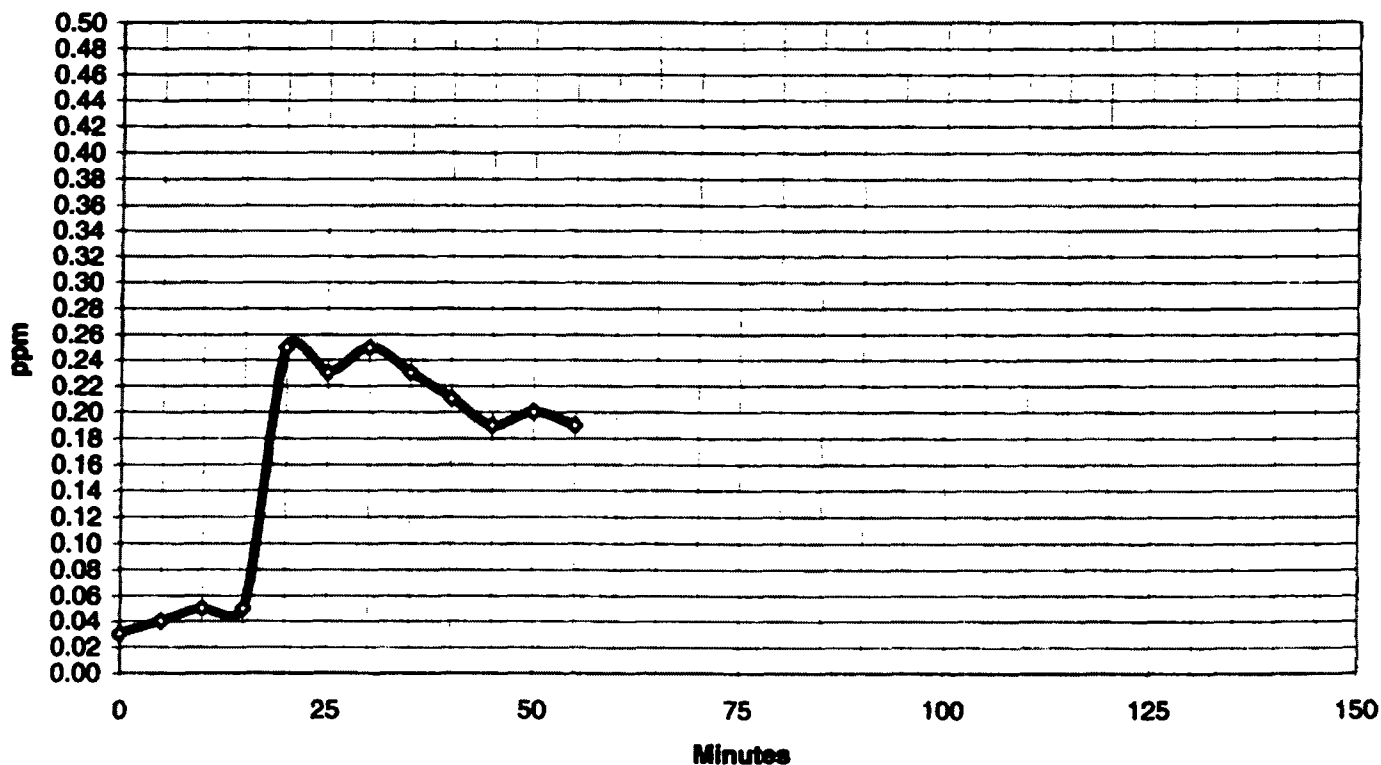
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/20/09
Time: 11:21

Analyzed by: T. M.
Reviewed by: D. M.

Unit: 1

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
07/27/09	45	38
07/28/09	45	39
07/29/09	40	40
07/30/09	34	35
07/31/09	36	36

HALOGEN DOSING CURVE

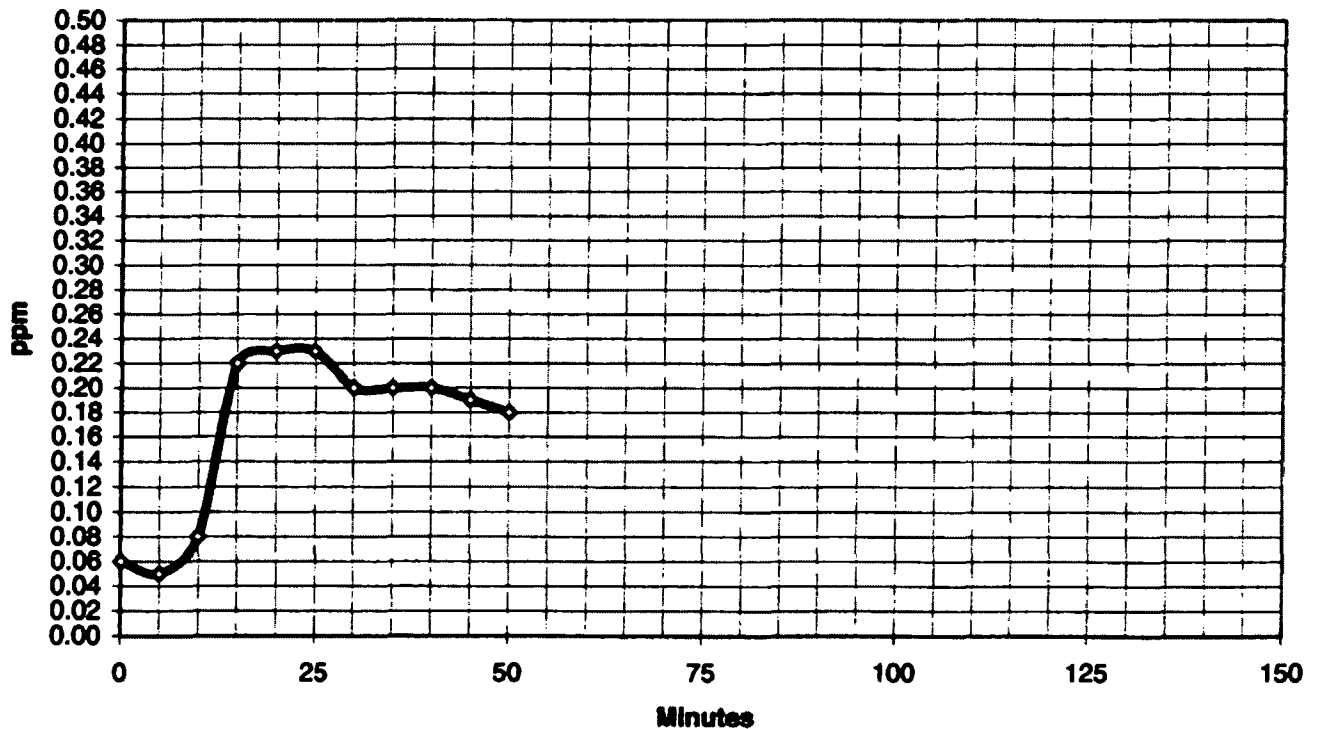
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/27/09
Time: 11:55

Analyzed by: D.B.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



Exelon Generation Company, LLC
Byron Station
4450 North German Church Road
Byron, IL 61010-9794

www.exeloncorp.com

Joe Cox

Exelon
Nuclear

September 17, 2009

**LTR: BYRON 2009-0099
File: 2.09.0411
1.10.0101**

**Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276**

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant Discharge Elimination System (NPDES) Permit Number IL0048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period of August 1, 2009 through August 31, 2009.

If there are any questions regarding this report, please contact Mr. Stanley Kerr, Chemistry Manager, at (815) 406-3200.

Respectfully,

Bradley J. Adams

**Bradley J. Adams
Plant Manager
Byron Nuclear Generating Station**

BJA/ZC

Attachments

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
DEMINERALIZER REGENERATE (001A)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

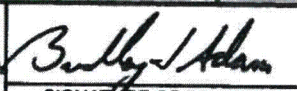
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 9 0 8 0 1			0 9 0 8 3 1		

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.5	< 1.5	(19)	0	285	EC
00630 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-8
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Bradley J. Adams Plant Manager 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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 815 406-3700	DATE 09 09 17		
			AREA CODE NUMBER	YEAR MONTH DAY		

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 30 of 31 days during this month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD											
YEAR			MONTH			DAY			To:		
0	9	0	8	0	1	0	9	0	8	3	1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.014	0.068	(03)	-----	-----	-----	----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN
	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

Bradley J. Adams
Plant Manager

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.

Bradley J. Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA CODE NUMBER

DATE

09 09 17

YEAR MONTH DAY

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

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 001B)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD
From: YEAR MONTH DAY To: YEAR MONTH DAY
0 9 0 8 0 1 To: 0 9 0 8 3 1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.40	0.61	(26)	-----	5.7	8.1	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH	SAMPLE MEASUREMENT	-----	-----	----	7.30	-----	7.46	(12)	0	290	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	----	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.12	0.17	(26)	-----	1.9	2.9	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.006	0.014	(03)	-----	-----	-----	----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	09	17	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 30 of 31 days during the month.											

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

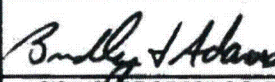
YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	08	01	09	08	31

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.2	3.3	(19)	0	240	DC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		WEEKLY	COMP24
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1	0.2	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2	0.4	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01057 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 406-3700	09	09	17
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 18 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9 0 8 0 1	To: 0 9 0 8 3 1				

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.6	1.7	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.031	0.051	(03)	-----	-----	-----	----	0	135	TM
60050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	TOTALZ
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE	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.					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815 408-3700		09	09	17	
Bradley J. Adams Plant Manager								YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MONTH	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0 9 0 8 0 1						To: 0 9 0 8 3 1					

MAJOR
(SUBR 01)

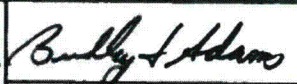
F - FINAL

RADWASTE TREATMENT (FORMER 001D)
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<0.5	0.9	(19)	0	240	CP
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
OIL AND GREASE 03682 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.4	<1.4	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.024	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Bradley J. Adams Plant Manager 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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			815 408-3700	09 09 17	AREA CODE	NUMBER	YEAR

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

1. Flow existed through this outfall 12 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MONITORING PERIOD

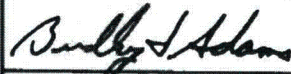
From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
	8	0	1		8	3	1

MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)		500	
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 406-3700	09	09	17
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 7 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

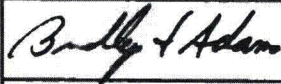
MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	9		0	8		0	1		0	9	

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.4	1.5	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.253	0.773	(03)	-----	-----	-----	----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/MONTH	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Bradley J. Adams Plant Manager 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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			815	406-3700	09	09	17
			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

MONITORING PERIOD

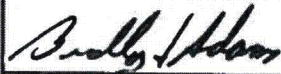
YEAR	MONTH	DAY	From:	YEAR	MONTH	DAY	To:
0	9	0	8	0	9	0	8
0	1			3	1		

MAJOR
(SUBR 01)
F - FINAL
COOLING SYSTEM BLOWDOWN
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH					8.50		8.72	(12)	0	240	GR
00400 1 0 0					8.0		8.0	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)				(26)			0.013	(19)	0	240	GR
01042 1 0 0				LBS/DY			0.071	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE							DAILY MAX				
ZINC, TOTAL (AS ZN)				(26)			0.031	(19)	0	240	GR
01092 1 0 0				LBS/DY			1.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE							DAILY MAX				
OXIDANTS, TOTAL RESIDUAL				(26)				(19)		500	
34044 1 0 0				LBS/DY			0.05	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE							DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		21.58	30.19	(03)					0	135	CN
50050 1 0 0		REPORT	REPORT	MGD						DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
CHLORINE, TOTAL RESIDUAL				(26)		0.19	0.34	(19)	0	240	GR
50060 1 0 0				LBS/DY		0.2	0.5	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
HYDRAZINE				(26)				(19)		500	
81313 1 0 0				LBS/DY			0.031	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE							DAILY MAX				

NAME/TITLE Principal Executive Officer	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE			
Bradley J. Adams			815 406-3700	09	09	17	
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment

SEE ATTACHED

EPA Form 3320-1 (Rev 3/99)

SD

PAGE 1 OF 1

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0	9	0	To: 0	9	0
		8			8
		0			3
		1			1

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)			
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

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.

Bradley J. Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE		DATE		
815	406-3700	09	09	17
AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. This discharge point was not used this month.

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

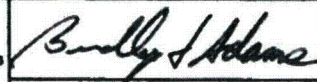
MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0	9	0	To: 0	9	0
8	0	1	3	1	

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01087 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 80060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	---	---	---	---			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 408-3700	09	09	17
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH

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

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
August 2009

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
08/01/09	120	88.4
08/08/09	120	97.0
08/15/09	120	93.3
08/22/09	120	85.3
08/29/09	120	85.5

Note: Station procedures derive the *Calculated Maximum Allowable Blowdown Temperature* based on existing Rock River temperature and a calculated maximum river temperature increase. When the arithmetic sum of these values exceeds 120 degrees Fahrenheit, the *Calculated Maximum Allowable Temperature* limit defaults to 120 degrees Fahrenheit.

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of August 2009.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
August 2009**

COMMENTS:

1. The weekly halogen concentration curves and daily halogen dosing time reports are attached.
2. Bromine was not used this month.
3. There was no discharge of steam generator chemical cleaning wastewater containing hydrazine in this month.
4. Flow existed through this outfall 31 of 31 days.

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/01/09	34	35
08/02/09	36	35
08/03/09	40	40
08/04/09	48	50
08/05/09	60	50
08/06/09	52	50
08/07/09	44	45
08/08/09	50	40
08/09/09	60	60

HALOGEN DOSING CURVE

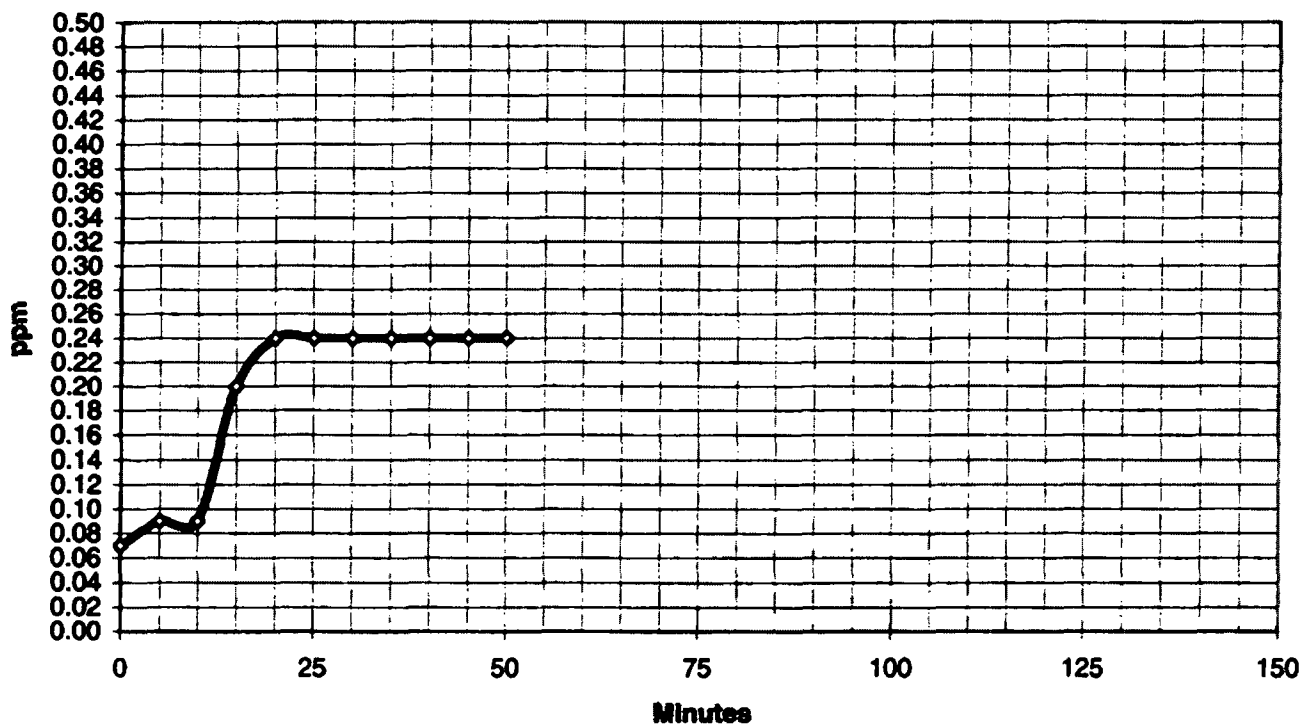
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/03/09
Time: 12:38

Analyzed by: D.C.A.
Reviewed by: D. M.

Unit: l

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/10/09	40	40
08/11/09	48	35
08/12/09	50	50
08/13/09	50	50
08/14/09	50	50
08/15/09	40	50
08/16/09	50	50

HALOGEN DOSING CURVE

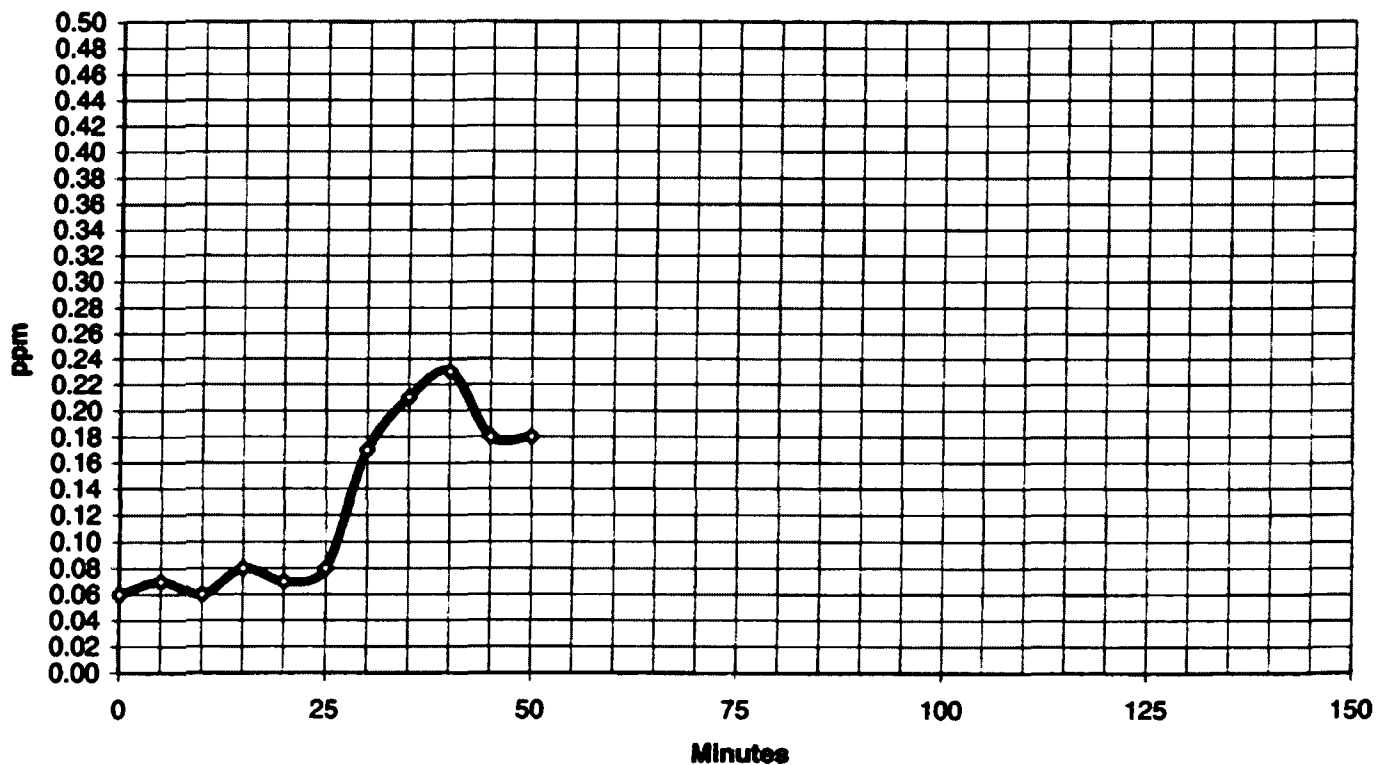
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/10/09
Time: 12:25

Analyzed by: G.S.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/17/09	50	50
08/18/09	45	50
08/19/09	45	44
08/20/09	51	50
08/21/09	43	47
08/22/09	45	45
08/23/09	47	47

HALOGEN DOSING CURVE

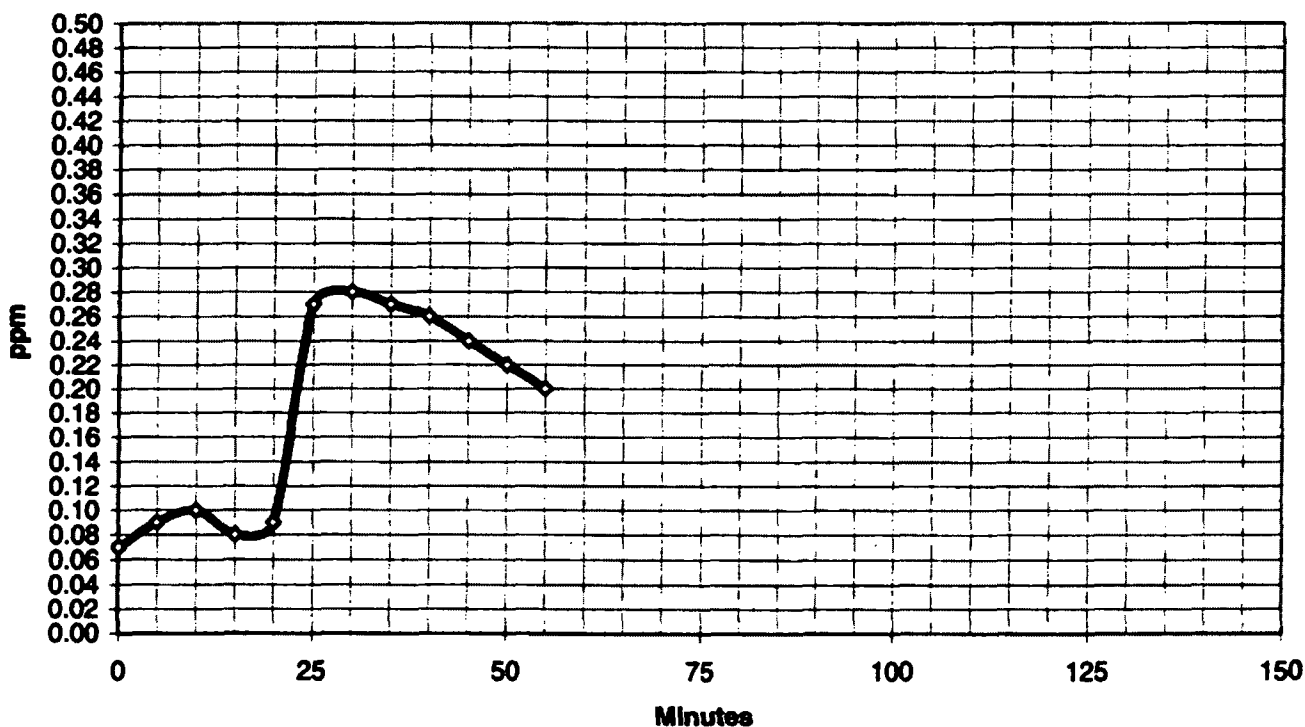
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/18/09
Time: 12:15

Analyzed by: J.P.
Reviewed by: D. M.

Unit: 1

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/24/09	50	50
08/25/09	45	45
08/26/09	47	46
08/27/09	40	41
08/28/09	40	40
08/29/09	40	40
08/30/09	46	40
08/31/09	38	39

HALOGEN DOSING CURVE

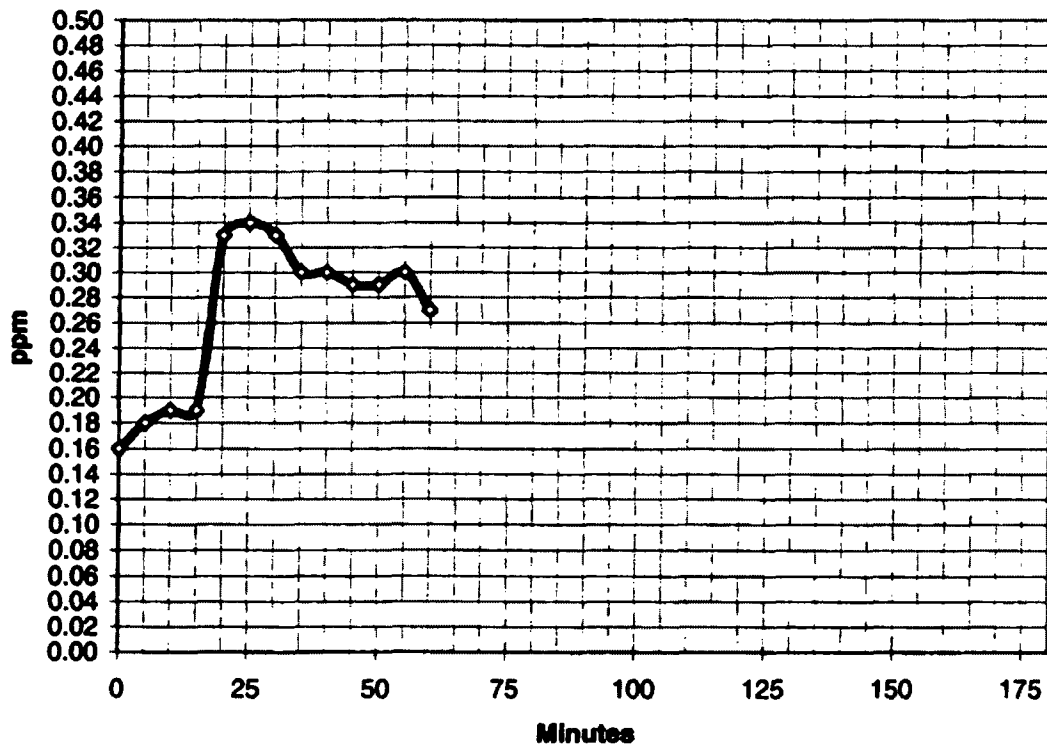
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/24/09
Time: 12:06

Analyzed by: D.L.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



Exelon Generation Company, LLC
Byron Station
4450 North German Church Road
Byron, IL 61010-9794

www.exeloncorp.com

3. Cox
ExelonSM
Nuclear

October 21, 2009

LTR: BYRON 2009-0115
File: 2.09.0411
1.10.0101

Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant Discharge Elimination System (NPDES) Permit Number IL0048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period of September 1, 2009 through September 30, 2009.

If there are any questions regarding this report, please contact Mr. Stanley Kerr, Chemistry Manager, at (815) 406-3200.

Respectfully,



Bradley J. Adams
Plant Manager
Byron Nuclear Generating Station

BJA/ZC/vb

Attachments

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station

LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9 0 9 0 1	To: 0 9 0 9 3 0				

MAJOR
(SUBR 01)

F - FINAL


DEMINERALIZER REGENERATE (001A)

EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<0.6	<0.6	(19)	0	285	EC
00630 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-6
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01061 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 406-3700	09	10	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 29 of 30 days during this month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR
(BUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)

EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

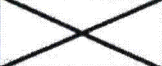
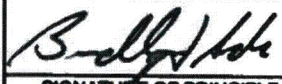
MONITORING PERIOD									
YEAR			MONTH			DAY			
0	9	0	9	0	1	0	9	3	0

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE					
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS								
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500						
	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB					
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.018	0.085	(03)	-----	-----	-----	---	0	135	CN					
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN					
	SAMPLE MEASUREMENT															
	PERMIT REQUIREMENT															
	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	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE						
Bradley J. Adams												815	406-3700	09	10	21
Plant Manager												AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED																

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

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 0018)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	3
	0	9	0		0	9	0

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.66	1.19	(26)	-----	8.0	13.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	38.0 30 DAY AVG	68.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH	SAMPLE MEASUREMENT	-----	-----	---	7.38	-----	7.87	(12)	0	290	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<0.39	0.76	(26)	-----	<4.4	8.3	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	38.0 30 DAY AVG	68.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.011	0.017	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams						815 408-3700		09	10	21	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 29 of 30 days during the month.											

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

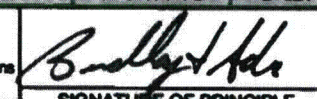
MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9 0 9 0 1	To: 0 9 0 9 3 0				

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<3.9	8.4	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MGL		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MGL		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MGL		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01057 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	09	10	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 15 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	3

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	5.5	12.1	(19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.028	0.040	(03)	---	---	---	---	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	TOTALIZ
	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	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.					TELEPHONE		DATE			
Bradley J. Adams						815	408-3700	09	10	21	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0046313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

RADWASTE TREATMENT (FORMER 001D)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 9	0 9	0 1	0 9	0 9	3 0

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	<0.4	<0.5	(19)	0	240	CP
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	<1.4	<1.4	(19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.046	(03)	---	---	---	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	10	21	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 12 of 30 days during the month.											

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

OCR0601

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MONITORING PERIOD

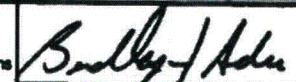
From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
			1				3
							0

MAJOR (SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01046 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	09	10	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 9 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

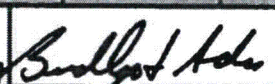
MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9	0 9	0 1	To: 0 9	0 9	3 0

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	<1.7	1.9	(19)	0	290	GR	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.370	0.882	(03)	---	---	---	---	0	290	TM	
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALZ	
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 815 408-3700		DATE 09 10 21		
Bradley J. Adams												
Plant Manager												
TYPED OR PRINTED												

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

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60656

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

MONITORING PERIOD

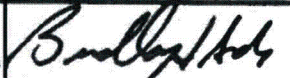
From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	3

MAJOR
(SUBR 01)
F - FINAL
COOLING SYSTEM BLOWDOWN
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.54	-----	8.89	(12)	0	240	GR
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.019	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.041	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	17.98	28.04	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.18	0.34	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.		TELEPHONE		DATE			
Bradley J. Adams			815	408-3700	09	10	21	
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT							

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

Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment

SEE ATTACHED

EPA Form 3320-1 (Rev 3/99)

SD

PAGE 1 OF 1

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60655

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

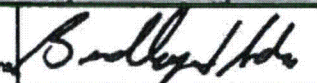
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	0	9	3

From: To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	----		-----		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)			
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 406-3700	09	10	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. This discharge point was not used this month.

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD
From: YEAR MONTH DAY 0 9 0 9 0 1 To: YEAR MONTH DAY 0 9 0 9 3 0

MAJOR (SUBR 01)
F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	---	---	---	---			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.					TELEPHONE		DATE			
Bradley J. Adams						815 408-3700		09	10	21	
Plant Manager						AREA NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
September 2009**

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
09/05/09	120	87.2
09/12/09	120	87.7
09/19/09	120	83.6
09/26/09	120	80.6

Note: Station procedures derive the *Calculated Maximum Allowable Blowdown Temperature* based on existing Rock River temperature and a calculated maximum river temperature increase. When the arithmetic sum of these values exceeds 120 degrees Fahrenheit, the *Calculated Maximum Allowable Temperature* limit defaults to 120 degrees Fahrenheit.

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of September 2009.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
September 2009**

COMMENTS:

1. **The weekly halogen concentration curves and daily halogen dosing time reports are attached.**
2. **Bromine was not used this month.**
3. **There was no discharge of steam generator chemical cleaning wastewater containing hydrazine in this month.**
4. **Flow existed through this outfall 30 of 30 days.**

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/01/09	38	39
09/02/09	39	40
09/03/09	46	45
09/04/09	49	45
09/05/09	45	45
09/06/09	54	45

HALOGEN DOSING CURVE

Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/02/09

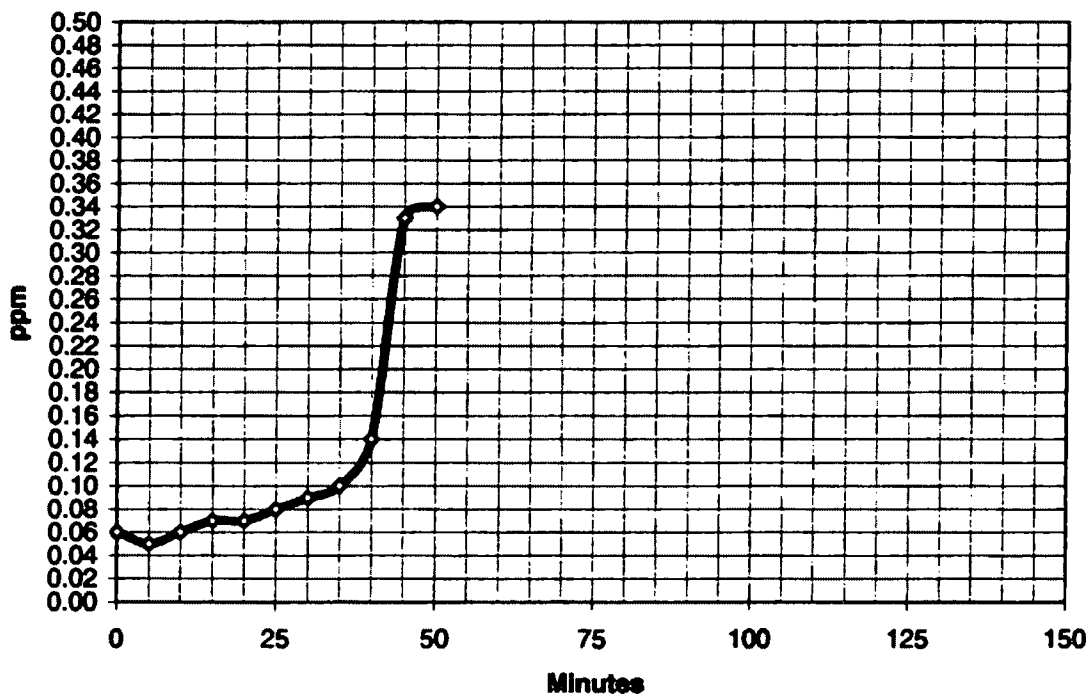
Analyzed by: J.W.

Unit: 1

Time: 11:29

Reviewed by: D. M.

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/07/09	45	45
09/08/09	40	41
09/09/09	40	40
09/10/09	40	40
09/11/09	38	40
09/12/09	40	39
09/13/09	39	40

HALOGEN DOSING CURVE

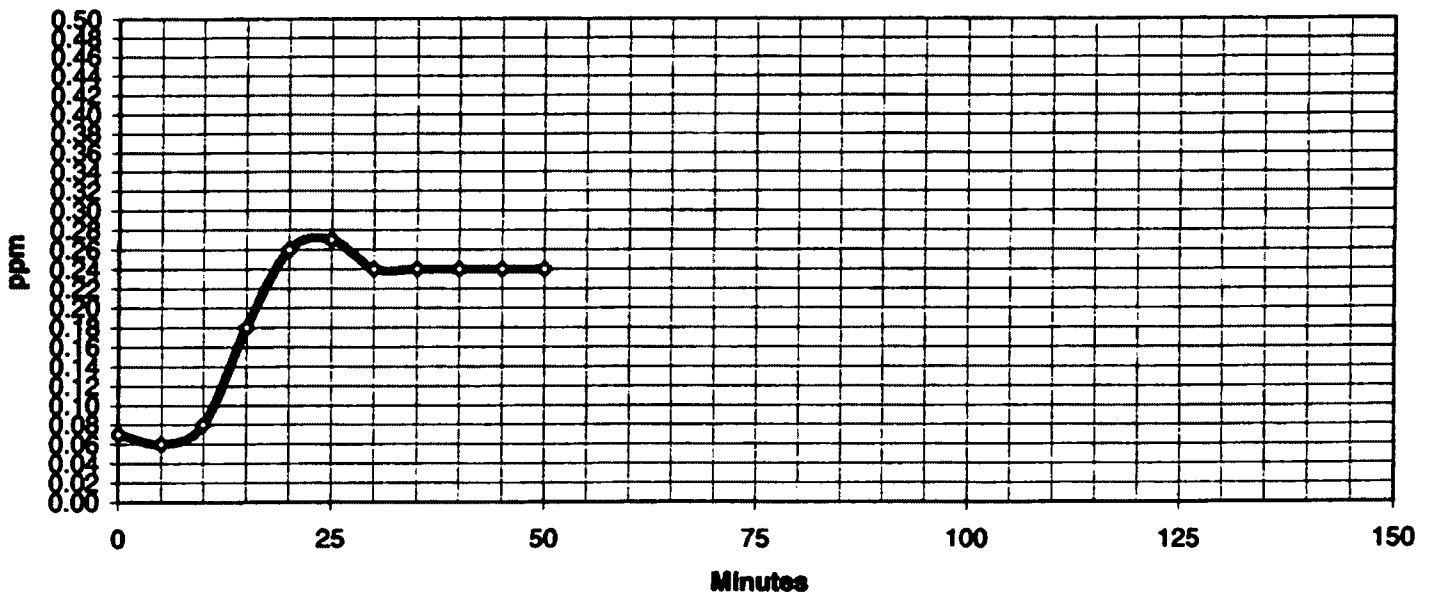
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/08/09
Time: 11:13

Analyzed by: T. M.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/14/09	40	40
09/15/09	B1R16	40
09/16/09	B1R16	40
09/17/09	B1R16	40
09/18/09	B1R16	40
09/19/09	B1R16	40
09/20/09	B1R16	40

HALOGEN DOSING CURVE

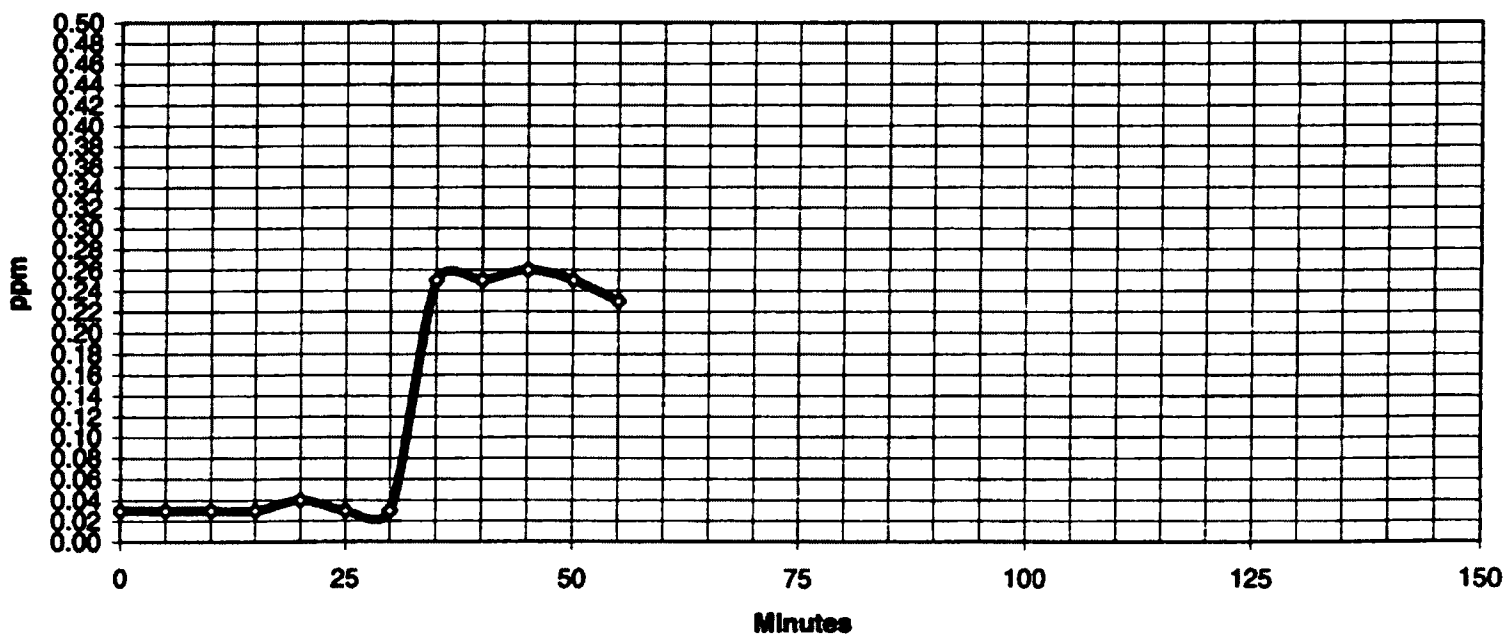
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/15/09
Time: 13:00

Analyzed by: M. H.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



**EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION**

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
09/21/09	BIR16	40
09/22/09	BIR16	40
09/23/09	BIR16	39
09/24/09	BIR16	35
09/25/09	BIR16	40
09/26/09	BIR16	40
09/27/09	BIR16	40

HALOGEN DOSING CURVE

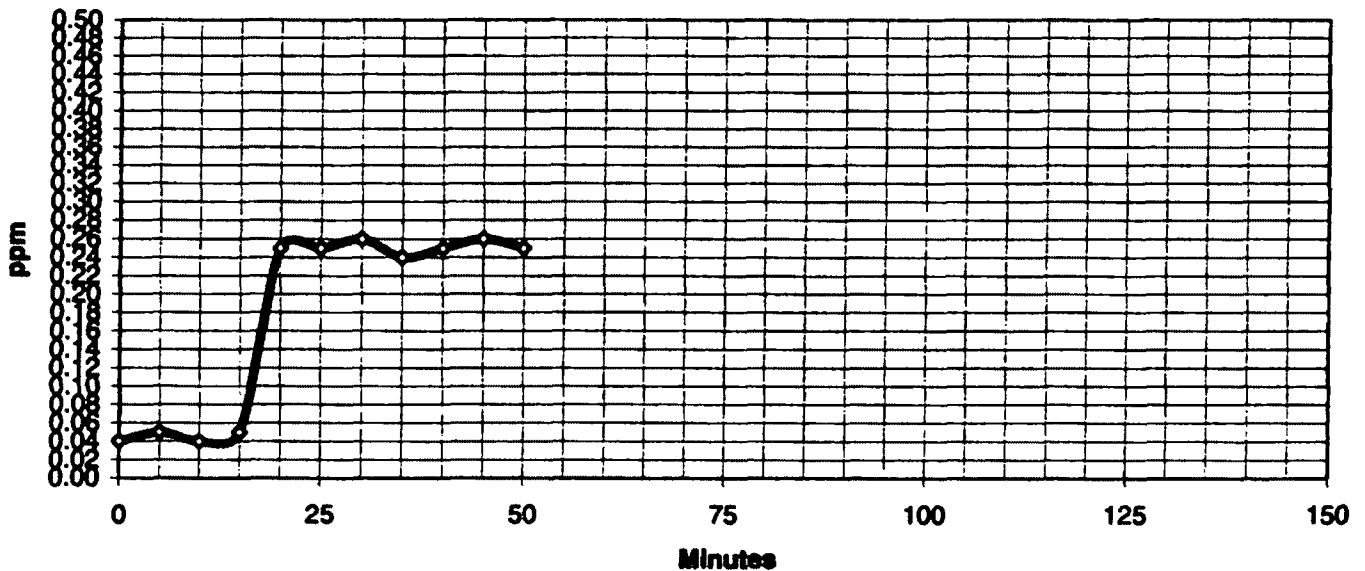
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/21/09
Time: 12:42

Analyzed by: D. L.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/28/09	B1R16	35
09/29/09	B1R16	35
09/30/09	B1R16	40

HALOGEN DOSING CURVE

Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/28/09
Time: 12:15

Analyzed by: J. D.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.

