

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

Zoe Cox
www.exeloncorp.com

ExelonSM
Nuclear

November 19, 2009

LTR: BYRON 2009-0129
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 October 1, 2009 through October 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/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

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		
From:	0	9	1	0	0	1	To:	0	9	1	0	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	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<9.0	<9.0	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-S
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	
01046 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.

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

TELEPHONE		DATE		
815	406-3700	09	11	19
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 27 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

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

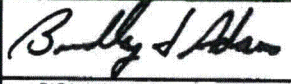
MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	9	1	0	0	1	From:	0	9	1
						To:	0	9	3

MAJOR (SUBR 01)
F - FINAL
DEMINEALIZER 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			
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	0.042	0.184	(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	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	11	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

EPA Form 3320-1 (Rev 3/90) SD PAGE 2 OF 2

**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

B01 0
DISCHARGE NUMBER

MONITORING PERIOD

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

MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 001B)
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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.40	0.64	(26)	—	4.8	7.0	(19)	0	280	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 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	—	7.38	—	7.80	(12)	0	280	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	0.37	0.59	(26)	—	4.5	6.4	(19)	0	280	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 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.008	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	408-3700	09	11	19	
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 31 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

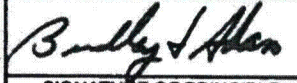
MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9 1 0 0 1	To: 0 9 1 0 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)	-----	<1.7	2.6	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
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) 01067 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	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	11	19
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 through this outfall 17 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
0 9 1 0 0 1			0 9 1 0 3 1		

From: To:

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
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			
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
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	3.7	7.1	(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 50050 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	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	11	19	
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

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		
0	9	1	0	0	1	0	9	1	0	3	1

From:

To:


MAJOR
(8UBR 01)

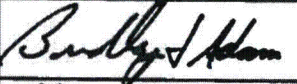
F - FINAL

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 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<0.5	<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 50050 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	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.		TELEPHONE		DATE		
			815	406-3700	09	11	19
			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. Flow existed through this outfall 11 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	MONTH	DAY
0	9	1	0	0	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			
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	
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	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	11	19
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 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	1	0	0	1	0	9	1	0	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			
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) 01062 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 03562 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 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.316	0.678	(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	11	19	
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

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

MONITORING PERIOD

From:			To:		
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	1	0	9	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	SAMPLE MEASUREMENT	-----	-----	---	8.38	-----	8.50	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.011	(19)	0	240	GR
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.027	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	18.07	26.18	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.11	0.46	(19)	0	240	GR
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
81313 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	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.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams						815 406-3700		09	11	19	
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

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		
0	9	1	0	0	1	0	9	1	0	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	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)			
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)			
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

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

DATE

09 11 19

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

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

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) 01092 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	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	11	19	
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
October 2009**

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
10/03/09	120	73.8
10/10/09	120	73.0
10/17/09	120	77.1
10/24/09	120	79.7
10/31/09	120	75.0

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 October 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
October 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
10/01/09	40	40
10/02/09	40	40
10/03/09	45	40
10/04/09	40	40
10/05/09	40	40
10/06/09	40	40
10/07/09	40	40
10/08/09	40	39
10/09/09	40	40
10/10/09	40	40
10/11/09	40	40

HALOGEN DOSING CURVE

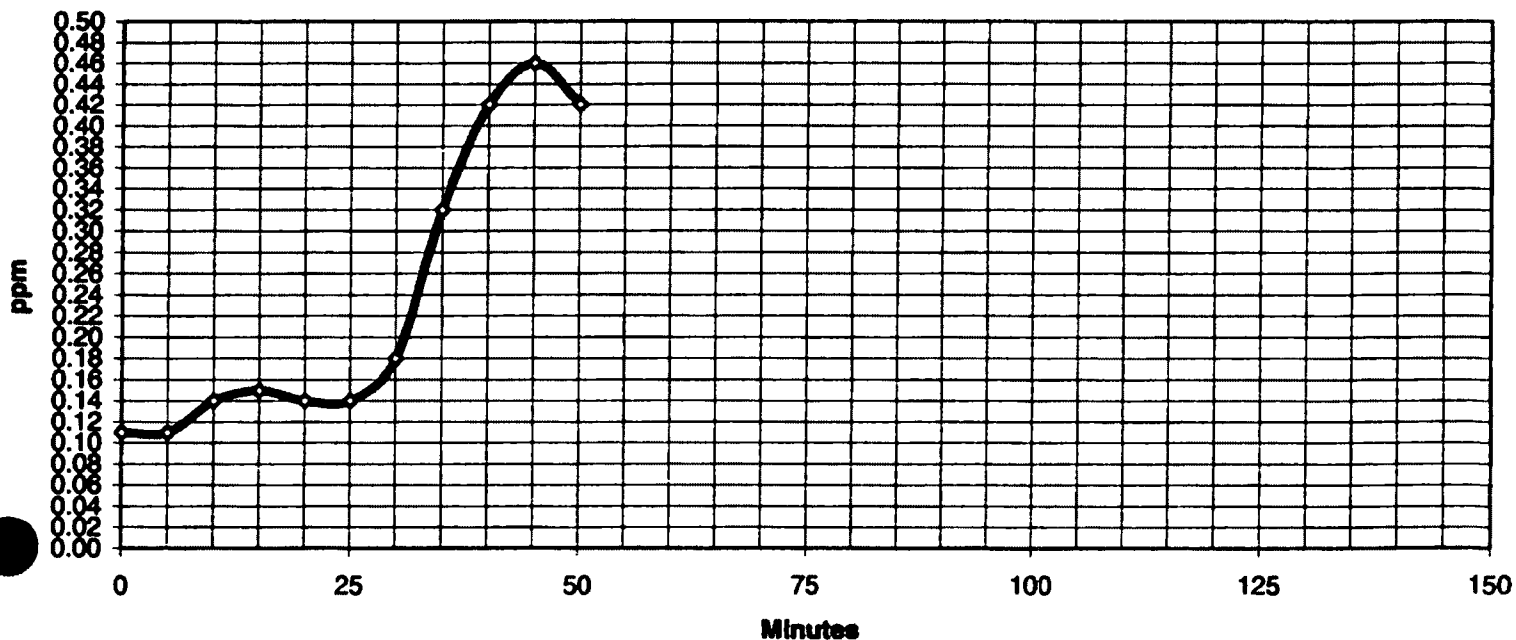
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/05/09
Time: 10:14

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.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
10/12/09	30	30
10/13/09	30	30
10/14/09	30	30
10/15/09	30	30
10/16/09	30	30
10/17/09	30	30
10/18/09	34	32

HALOGEN DOSING CURVE

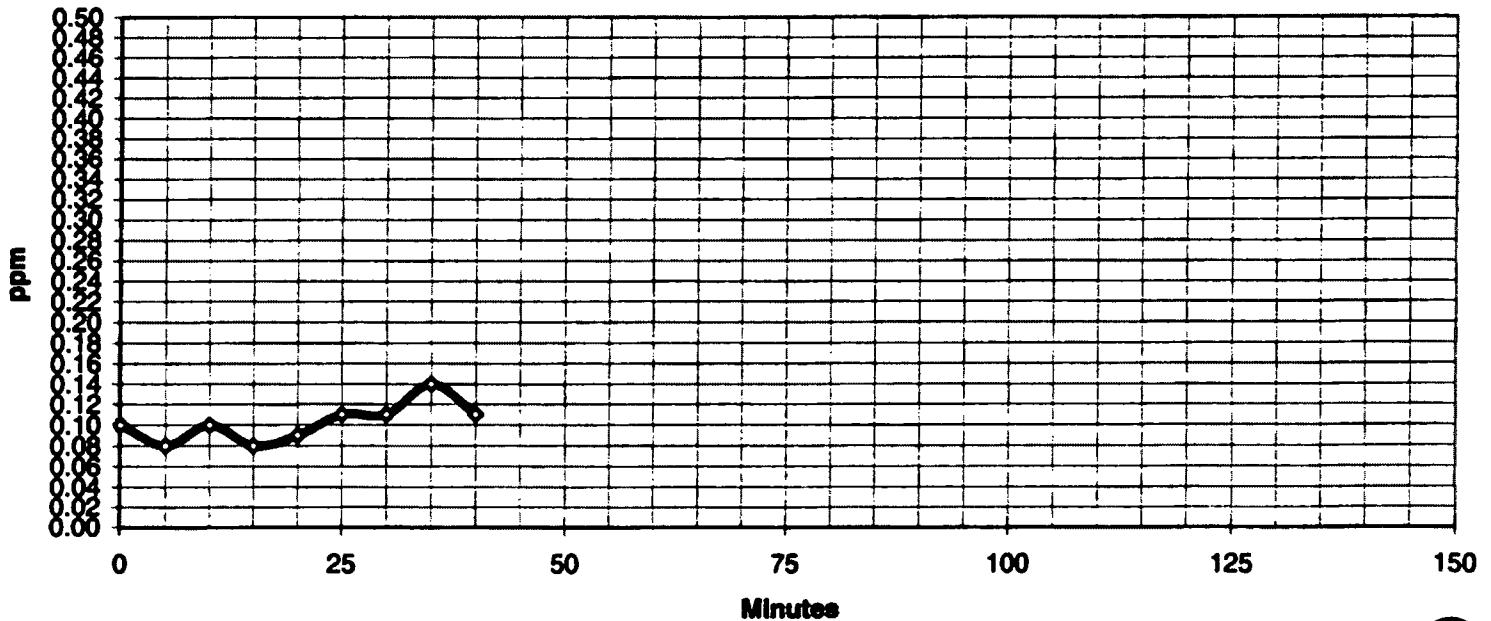
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/12/09
Time: 11:49

Analyzed by: J. D.
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
10/19/09	34	35
10/20/09	30	31
10/21/09	33	33
10/22/09	32	33
10/23/09	30	30
10/24/09	35	30
10/25/09	32	32

HALOGEN DOSING CURVE

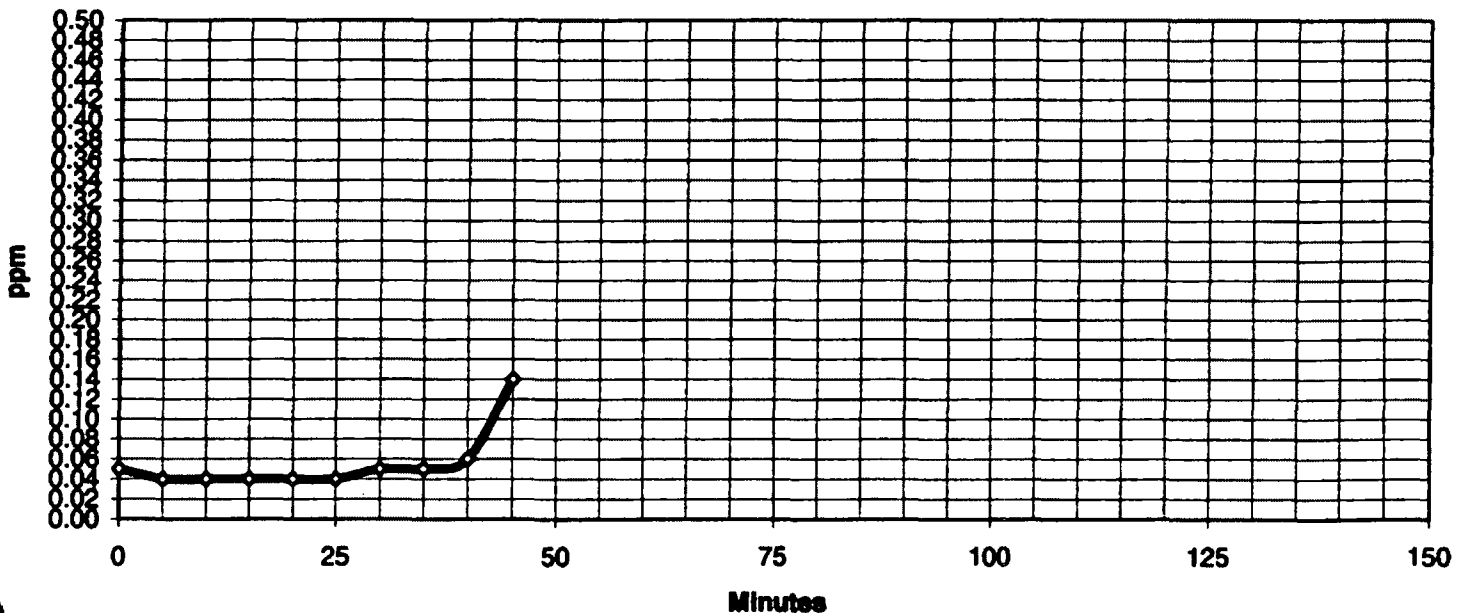
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/19/09
Time: 10:58

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
10/26/09	30	35
10/27/09	30	30
10/28/09	30	30
10/29/09	30	30
10/30/09	32	32
10/31/09	32	33

HALOGEN DOSING CURVE

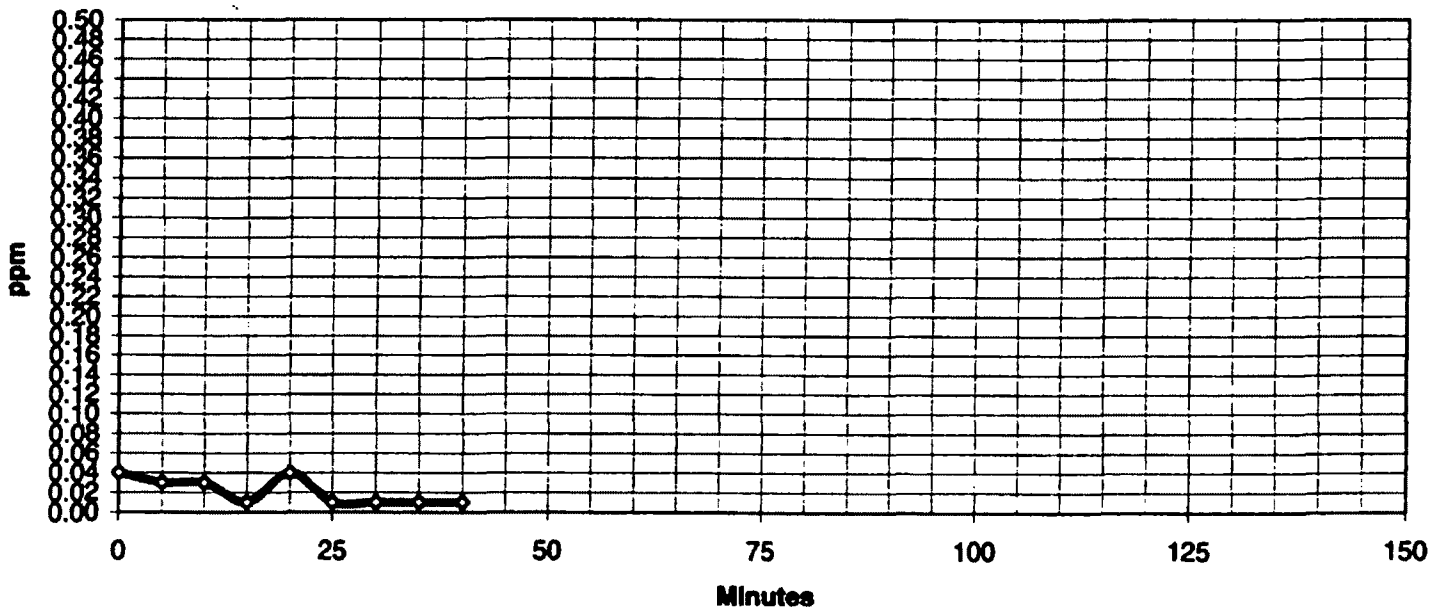
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/26/09
Time: 10:45

Analyzed by: J. W.
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 Generation Company, LLC
Byron Station
4450 North German Church Road
Byron, IL 61010-9794

www.exeloncorp.com

December 17, 2009

LTR: BYRON 2009-0133
File: 2.09.0411
1.10.0101

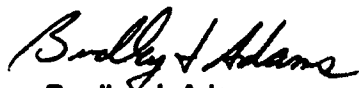
Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

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 November 1, 2009 through November 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/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

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	1 1	0 1	To: 0 9	1 1	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)	—	0.6	0.6	(19)	0	285	EC
	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-8
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

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
815 408-3700
AREA CODE NUMBER
DATE
09 12 17
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 28 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
(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	MONTH	DAY
0 9	1 1	0 1	0 9	1 1	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 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.106	(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										
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	12	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)											
EPA Form 3320-1 (Rev 3/99)											

SD

PAGE 2 OF 2

**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

B01 0
DISCHARGE NUMBER

MONITORING PERIOD

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

MAJOR (SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 001B)
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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.12	< 0.12	(26)	-----	< 2.0	< 2.0	(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	-----	-----	---	7.35	-----	7.48	(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	< 0.047	0.084	(26)	-----	< 0.8	1.1	(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
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.008	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						815 406-3700		09	12	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 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 1 1 0 1	To: 0 9 1 1 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 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	_____	_____	(26)	_____	< 2.0	2.8	(19)	0	240	DC
	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	15.0 30 DAY AVG	30.0 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) 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	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	12	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 through this outfall 18 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

IL0046313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	1		0	9	1
			1				3
			0				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) 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
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	3.2	4.7	(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	0.023	0.041	(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.

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

TELEPHONE		DATE		
815	408-3700	09	12	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

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
0	9	1	0	9	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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	<0.5	<0.5	(19)	0	240	CP
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	39.0 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 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	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.

Bradley J. Adams

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 408-3700

AREA NUMBER

DATE

09 12 17

YEAR MONTH DAY

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

1. Flow existed through this outfall 3 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

E01 0
DISCHARGE NUMBER

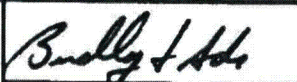
MONITORING PERIOD
From: YEAR MONTH DAY 0 9 1 1 0 1 To: YEAR MONTH DAY 0 9 1 1 3 0

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	
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	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	12	17
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 3 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
09	11	01	09	11	30

*** 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 03682 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.5	1.6	(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	0.103	0.154	(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

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

TELEPHONE		DATE		
815	406-3700	09	12	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

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

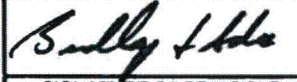
MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9 1 1 0 1	To: 0 9 1 1 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			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.60	-----	8.73	(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)	-----	-----	0.015	(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)	-----	-----	0.101	(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	18.65	24.23	(03)	-----	-----	-----	---	0	135	CN
50060 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.10	0.27	(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			815 406-3700	09	12	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)
Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment

SEE ATTACHED

**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

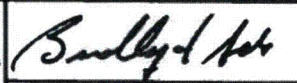
MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	1		0	9	1
	1	1	0		1	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			
PH	SAMPLE MEASUREMENT	—	—	—	—	—	—	(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	—	8.0 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		
			815	406-3700	09	12	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

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	1 1	0 1	0 9	1 1	3 0

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			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(28)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(28)	---	---	---	(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	---	---	(28)	---	---	---	(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	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	12	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)											

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

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
11/07/09	120	85.4
11/14/09	120	80.9
11/21/09	120	76.7
11/28/09	120	77.6

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 November 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
November 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
11/01/09	30	30
11/02/09	30	32
11/03/09	30	30
11/04/09	31	31
11/05/09	32	31
11/06/09	30	30
11/07/09	30	30
11/08/09	30	30

HALOGEN DOSING CURVE

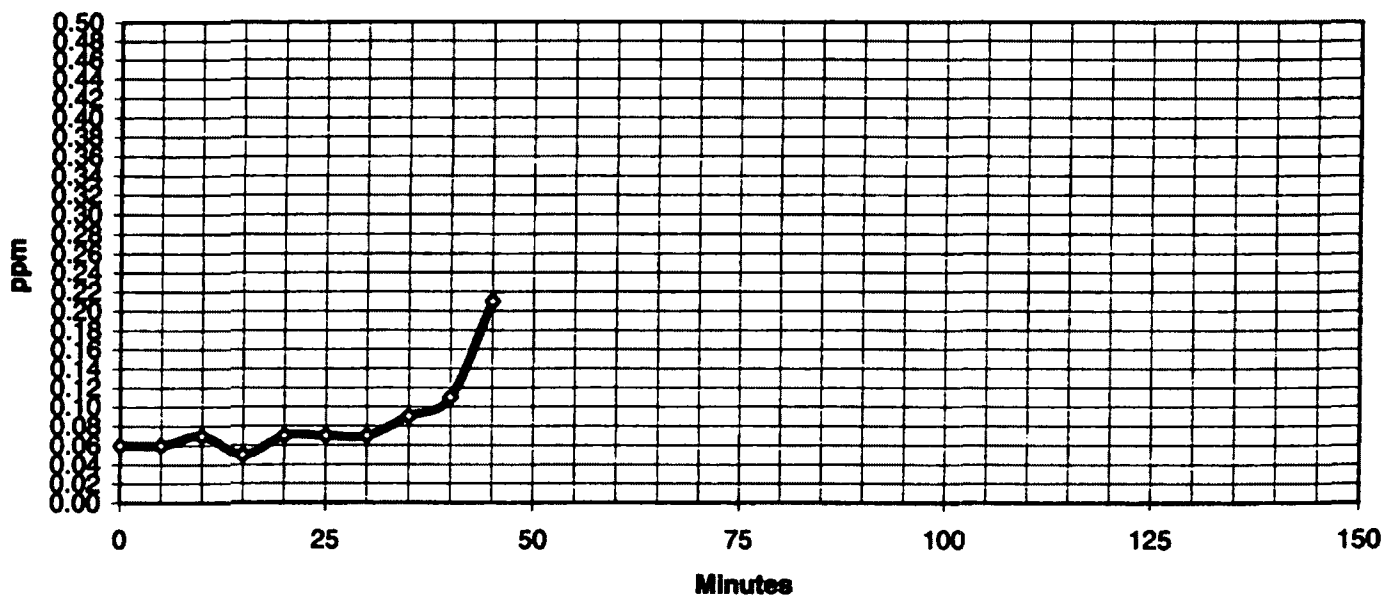
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/02/09
Time: 11:13

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
11/09/09	30	30
11/10/09	30	30
11/11/09	30	30
11/12/09	31	30
11/13/09	33	31
11/14/09	28	29
11/15/09	30	22

HALOGEN DOSING CURVE

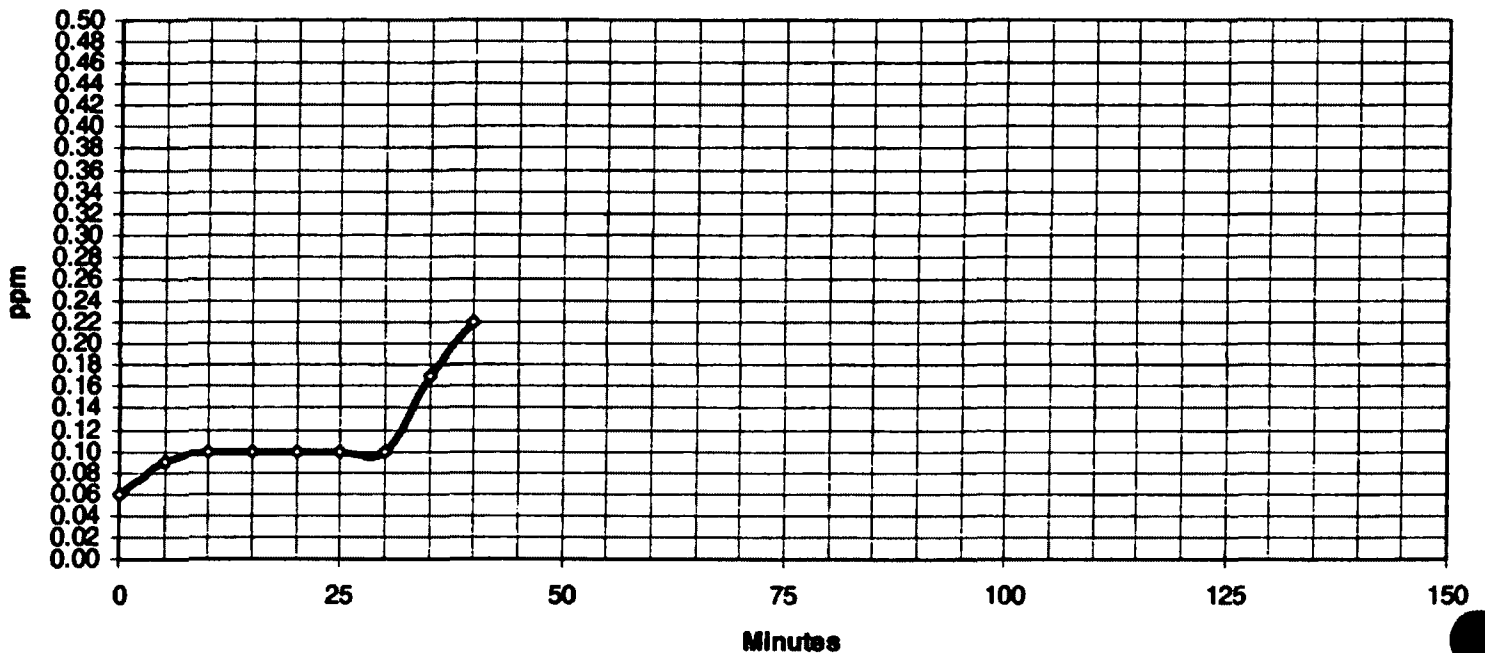
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/09/09
Time: 12:20

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
11/16/09	25	25
11/17/09	25	25
11/18/09	21	17
11/19/09	18	18
11/20/09	18	18
11/21/09	18	18
11/22/09	20	19

HALOGEN DOSING CURVE

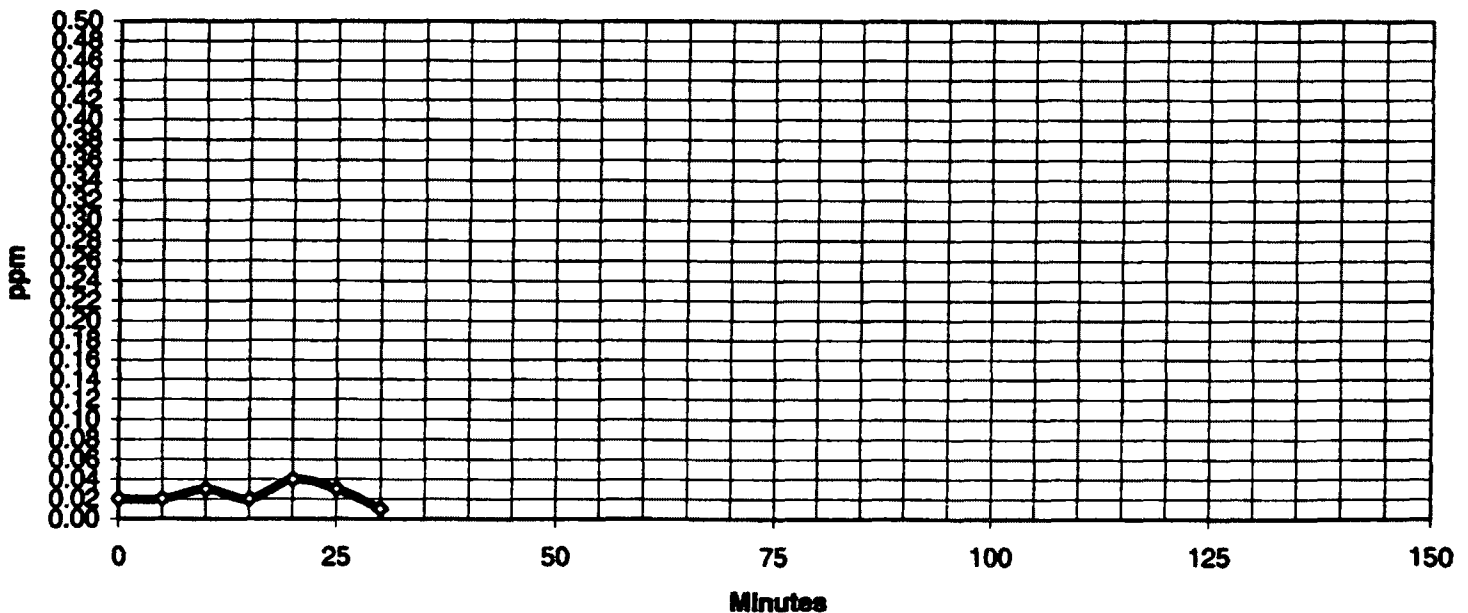
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/18/09
Time: 10:28

Analyzed by: J.W.
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
11/23/09	28	25
11/24/09	27	24
11/25/09	17	17
11/26/09	16	16
11/27/09	17	17
11/28/09	25	25
11/29/09	25	25
11/30/09	20	20

HALOGEN DOSING CURVE

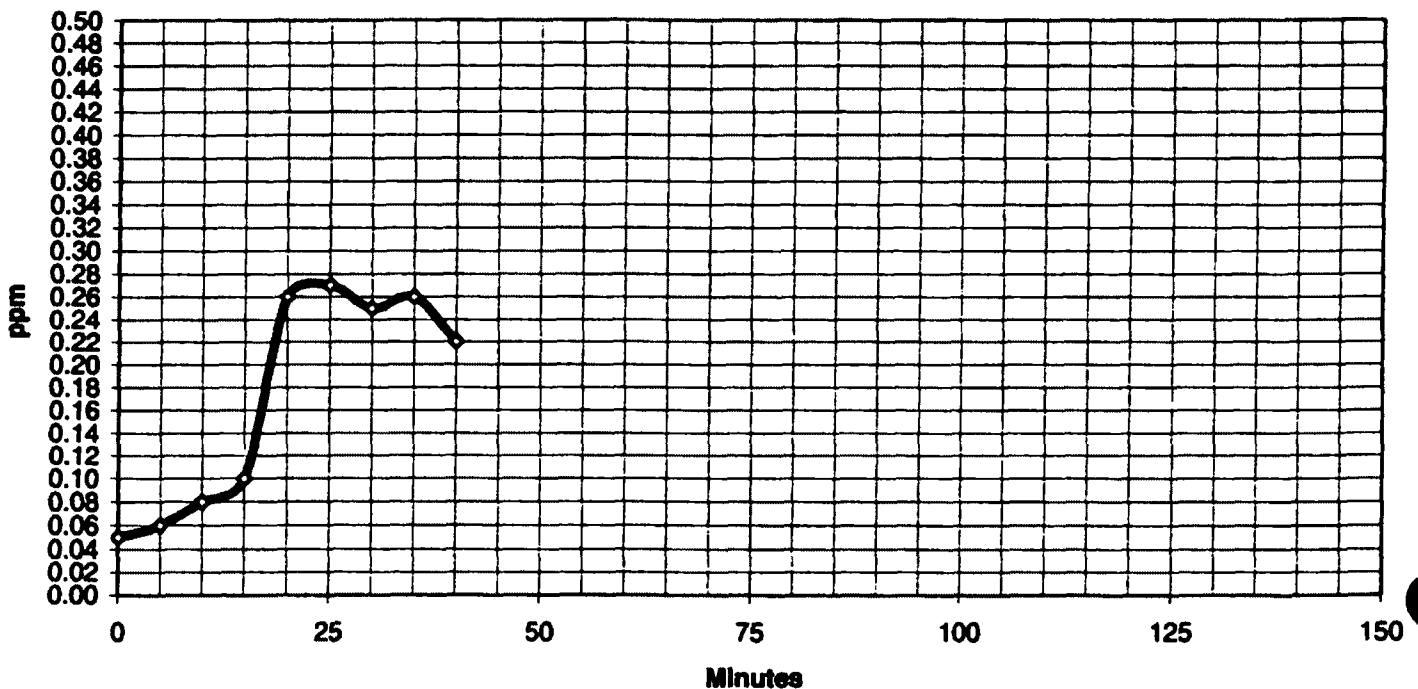
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/23/09
Time: 11:11

Analyzed by: M. K.
Reviewed by: D. M.

Unit: I

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

January 21, 2010

LTR: BYRON 2010-0011
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 December 1, 2009 through December 31, 2009.

Special Condition 5 of the NPDES permit requires the station to weigh the copper anodes at the end of the zebra mussel control season and to include the total mass of copper used in the discharge monitoring report. The zebra mussel copper ion skids were shutdown on December 2, 2009. The anodes of the OA copper ion skid were removed and weighed on January 8, 2010. The anodes of the OB copper ion skid were removed and weighed on January 8, 2010. The total mass of copper used for zebra mussel control was 214 pounds.

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

Respectfully,



Daniel J. Enright
Site Vice President
Byron Nuclear Generating Station

DJE/ZC/sdk

Attachments

**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

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	1 2	0 1	To: 0 9	1 2	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	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.5	< 0.5	(19)	0	285	EC
00630 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		ONCE/MONTH	COMP-8
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	
01067 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

Daniel J. Enright
Site Vice President

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]
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3800
AREA CODE NUMBER

DATE

10 01 21
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			YEAR			MONTH			DAY		
From:	0	9	1	2	0	1	To:	0	9	1	2	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			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
01082 1 0 0	PERMIT REQUIREMENT			LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.106	(03)	---	---	---	---	0	135	CN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	CONTIN
50060 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.					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815 406-3600		10	01	21	
Daniel J. Enright						AREA CODE NUMBER		YEAR	MONTH	DAY	
Site Vice President	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
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

IL0048913
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							
From:	0	9	1	2	0	1	To:	0	9	1	2	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	< 0.14	< 0.17	(26)	-----	< 2.0	< 2.0	(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 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.37	-----	7.68	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.08	0.11	(26)	-----	< 1.3	2.1	(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
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	0.010	(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

Daniel J. Enright
Site Vice President
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	406-3600	10	01	21
AREA CODE	NUMBER	YEAR	MONTH	DAY

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)**

OCR0601

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		
0	9	1	2	0	1	0	9	1	2	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)	-----	2.5	3.6	(19)	0	240	DC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP-24
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	
01046 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	
01051 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

Daniel J. Enright
Site Vice President

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]
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3600

AREA
CODE

DATE

10 01 21

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 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

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
0 9 1 2 0 1	0 9 1 2 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			
ZINC, TOTAL (AS ZN) 01082 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
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 2.6	3.8	(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 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.021	0.037	(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

Daniel J. Enright
Site Vice President

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]
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 408-3800

AREA
CODE

NUMBER

10

YEAR

DATE

01

MONTH

21

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

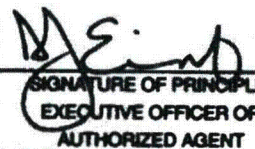
MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	9	1	2	0	1	0	9	1	2	3	1

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)	---	< 0.4	< 0.5	(19)	0	240	CP										
00630 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS										
OIL AND GREASE	SAMPLE MEASUREMENT	---	---	(26)	---	< 1.4	1.5	(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										
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.023	(03)	---	---	---	---	0	135	CN										
60060 1 0 0	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	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	406-3600	10	01	21											
Daniel J. Enright						AREA CODE	NUMBER	YEAR	MONTH	DAY											
Site Vice President	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT																				
TYPED OR PRINTED																					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																					
1. Flow existed through this outfall 3 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

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	1		0	9	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)		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)	---	0.10	0.27	(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

Daniel J. Enright
Site Vice President
TYPED OR PRINTED

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DEnt
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE
815 406-3600
AREA CODE NUMBER
DATE
10 01 21
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. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 1 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		1	2		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	< 1.4	(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	0.005	0.005	(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

Daniel J. Enright
Site Vice President

TYPED OR PRINTED

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[Signature]
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3600

AREA CODE NUMBER

DATE

10 01 21

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			YEAR		
From:	0	9	1	2	0	1	To:	0	9	1	2

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	-----	-----	---	8.71	-----	8.76	(12)	0	240	GR
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
COPPER, TOTAL (AS CU)	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
01042 1 0 0	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.03	(19)	0	240	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)	0	135	CN
OXIDANTS, TOTAL RESIDUAL	PERMIT REQUIREMENT	-----	-----	MGD	-----	-----	-----	---		DAILY	CONTIN
34044 1 0 0	SAMPLE MEASUREMENT	20.20	26.10	(03)	-----	-----	-----	---		240	GR
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L	WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.06	0.20	(19)	0	240	GR
50050 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
CHLORINE, TOTAL RESIDUAL	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
50060 1 0 0	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	-----	(19)		500	
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	-----	(19)		500	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	-----	(19)		500	

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER
Daniel J. Enright
Site Vice President
TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
815 406-3600
DATE
10 01 21
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 3/90)

80

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

IL0046313
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		
0	9		1	2		0	1		0	9	

From:

To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

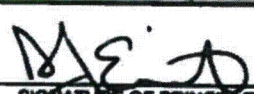
PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 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

Daniel J. Enright
Site Vice President

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	406-3600	10	01	21
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

From:			To:		
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	1	2	0	1

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

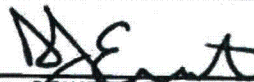
PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01087 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 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	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Daniel J. Enright
Site Vice President

TYPED OR PRINTED

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SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE		DATE		
815	406-3800	10	01	21
AREA CODE	NUMBER	YEAR	MONTH	DAY

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
December 2009

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
12/05/09	120	68.4
12/13/09	120	70.5
12/19/09	120	67.2
12/26/09	120	64.0

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 December 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
December 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
12/01/09	18	18
12/02/09	18	18
12/03/09	20	20
12/04/09	18	18
12/05/09	18	18
12/06/09	18	18

HALOGEN DOSING CURVE

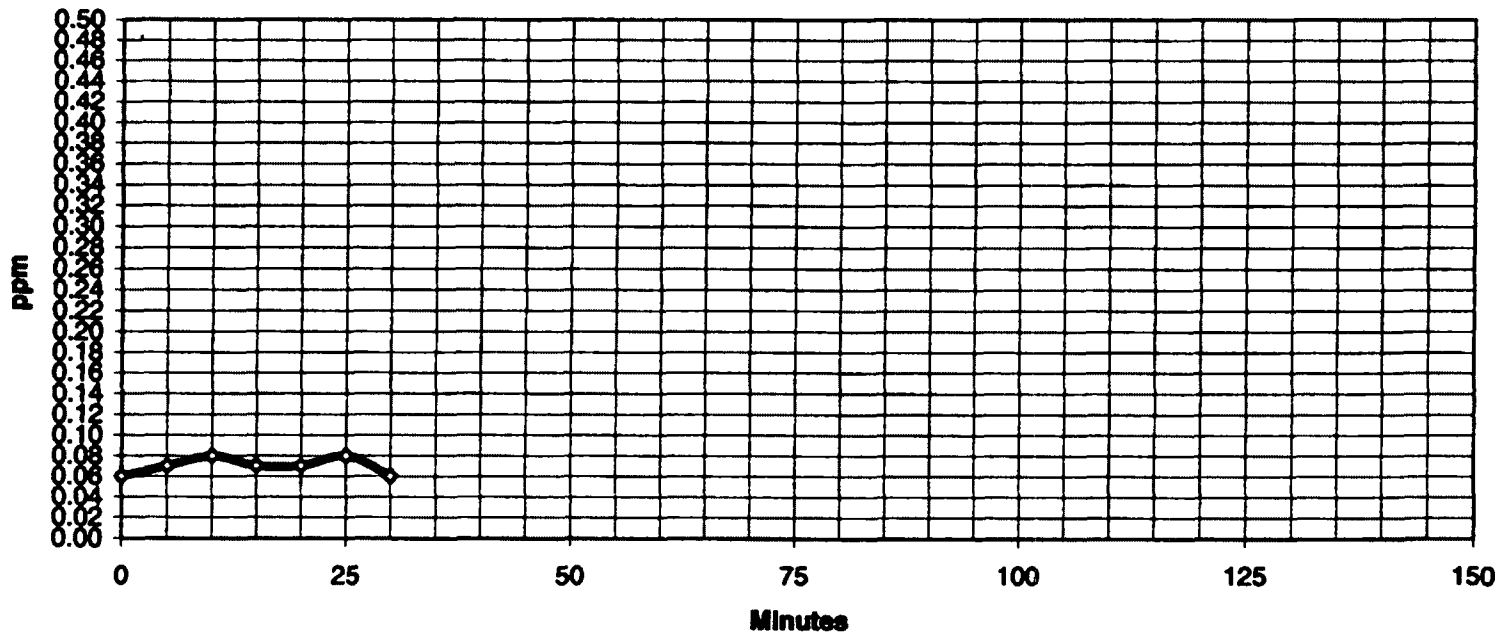
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/02/09
Time: 11:20

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
12/07/09	20	20
12/08/09	20	20
12/09/09	20	20
12/10/09	20	20
12/11/09	0	0
12/12/09	0	0
12/13/09	0	0

HALOGEN DOSING CURVE

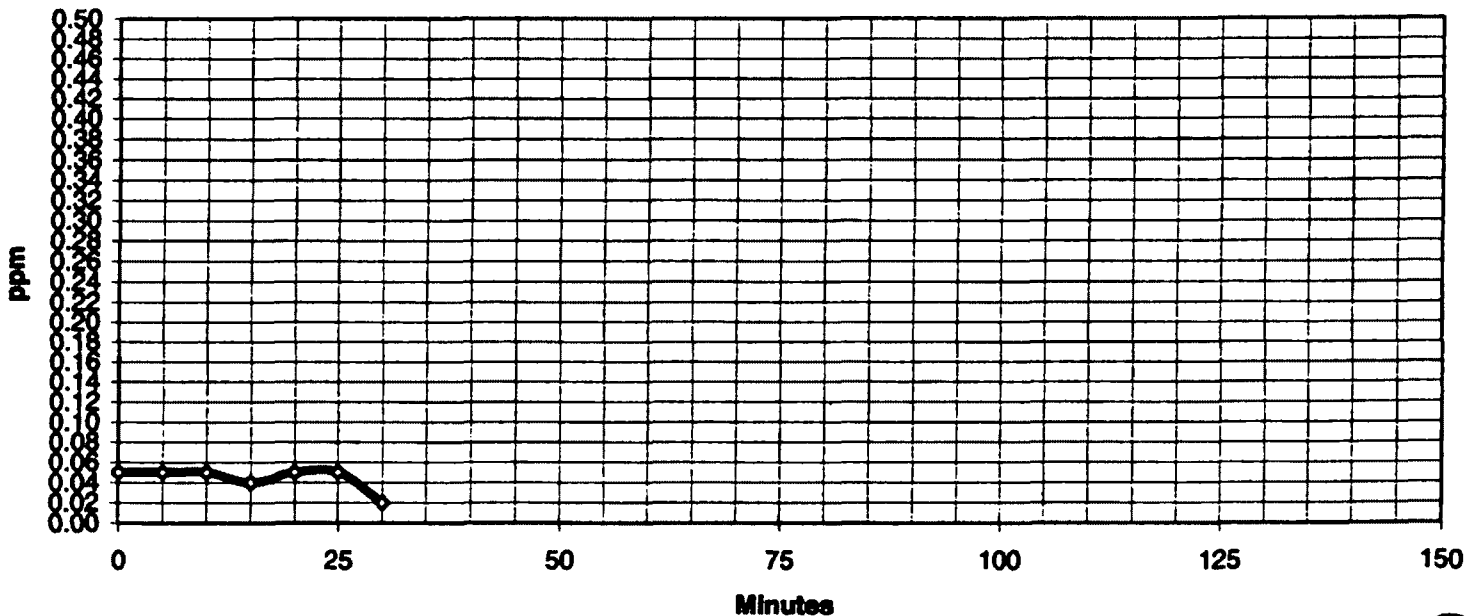
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/07/09
Time: 12:40

Analyzed by: G.S.
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
12/14/09	20	20
12/15/09	16	20
12/16/09	20	20
12/17/09	20	20
12/18/09	20	20
12/19/09	18	18
12/20/09	18	19

HALOGEN DOSING CURVE

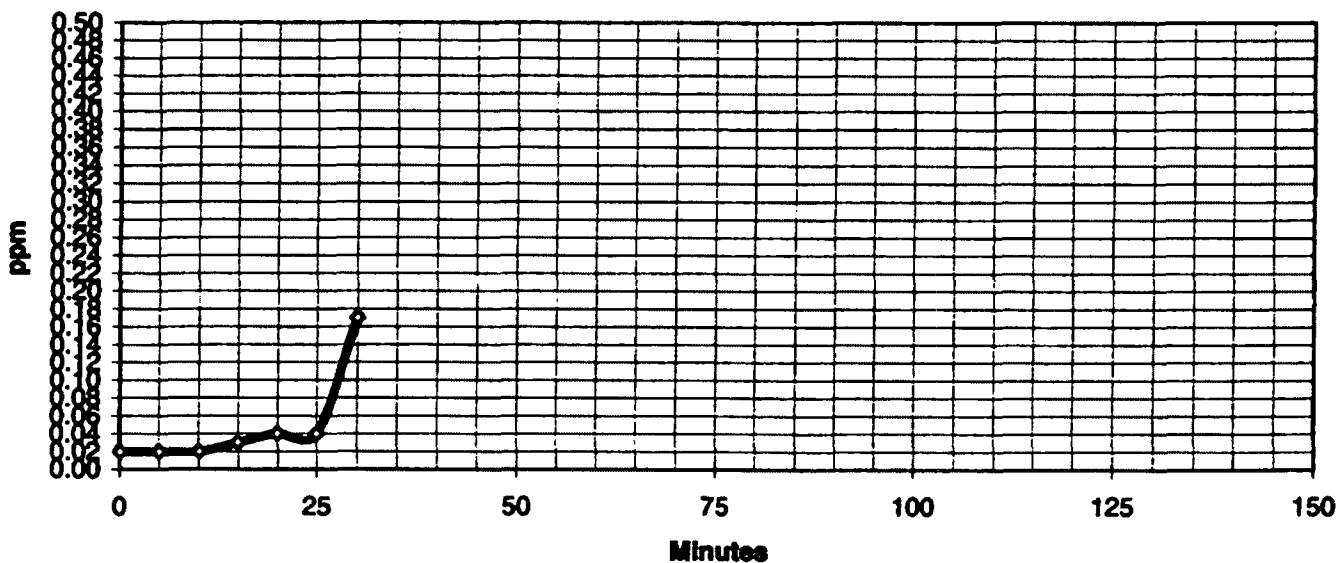
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/14/09
Time: 11:45

Analyzed by: E. G.
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
12/21/09	18	19
12/22/09	19	19
12/23/09	18	17
12/24/09	18	18
12/25/09	20	20
12/26/09	20	20
12/27/09	20	20

HALOGEN DOSING CURVE

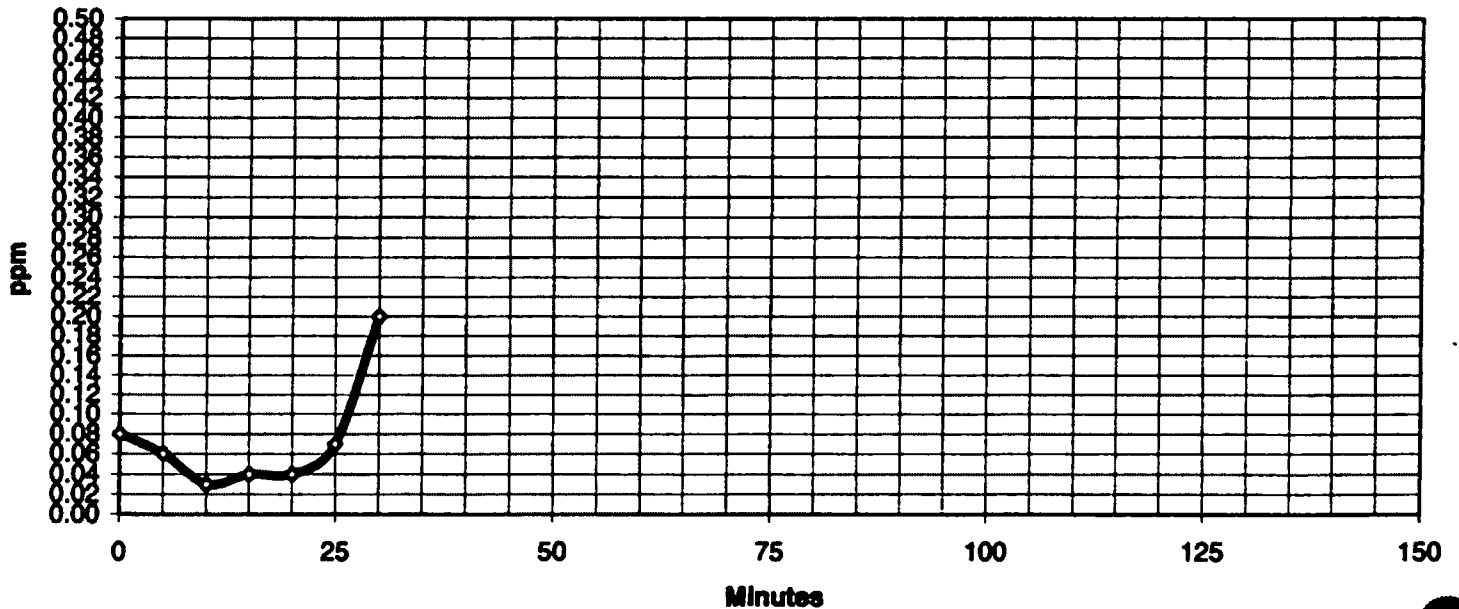
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/21/09
Time: 13:36

Analyzed by: J.W.
Reviewed by: M. H.

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
12/28/09	17	16
12/29/09	17	17
12/30/09	20	18
12/31/09	17	18

HALOGEN DOSING CURVE

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

Date: 12/28/09
Time: 13:03

Analyzed by: M.P.
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.

