

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
April 2010**

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
04/04/10	120	86.3
04/10/10	120	85.7
04/17/10	120	80.6
04/24/10	120	84.8

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 April 2010.

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
April 2010**

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
04/01/10	25	26
04/02/10	25	25
04/03/10	25	25
04/04/10	25	25
04/05/10	25	25
04/06/10	25	25
04/07/10	25	25
04/08/10	25	25
04/09/10	25	30
04/10/10	25	25
04/11/10	25	25

HALOGEN DOSING CURVE

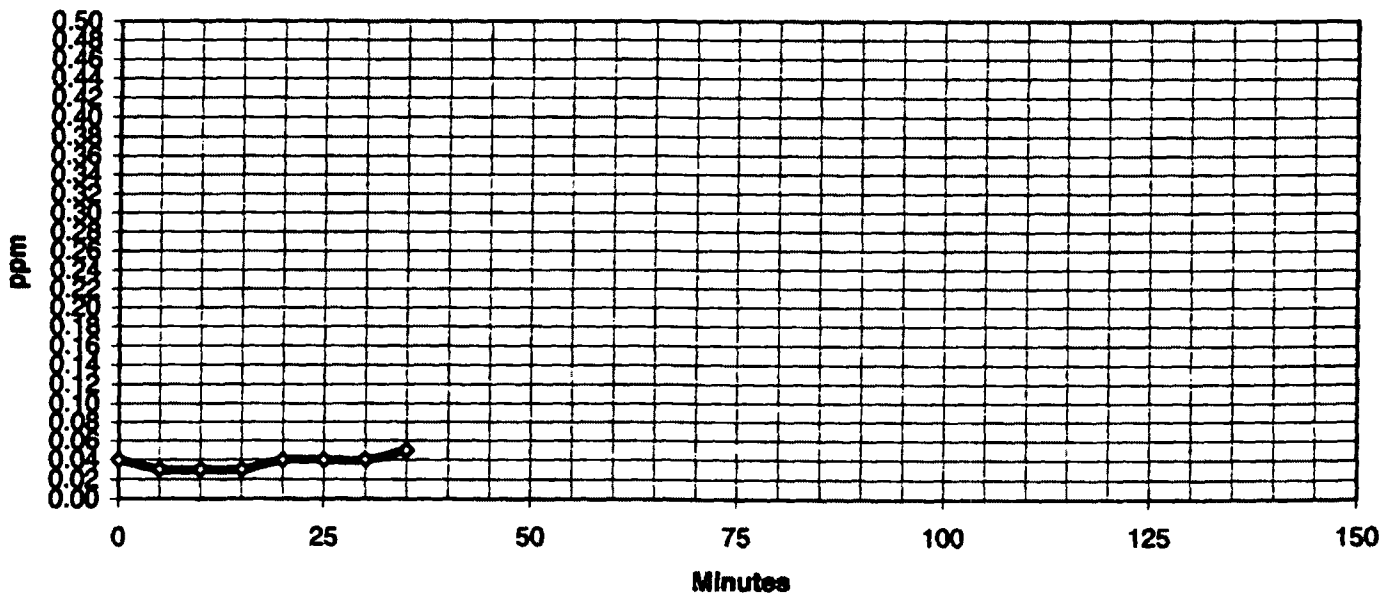
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/05/10
Time: 11:47

Analyzed by: S. S. C.
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
04/12/10	25	25
04/13/10	25	25
04/14/10	25	25
04/15/10	25	25
04/16/10	25	25
04/17/10	26	27
04/18/10	25	25

HALOGEN DOSING CURVE

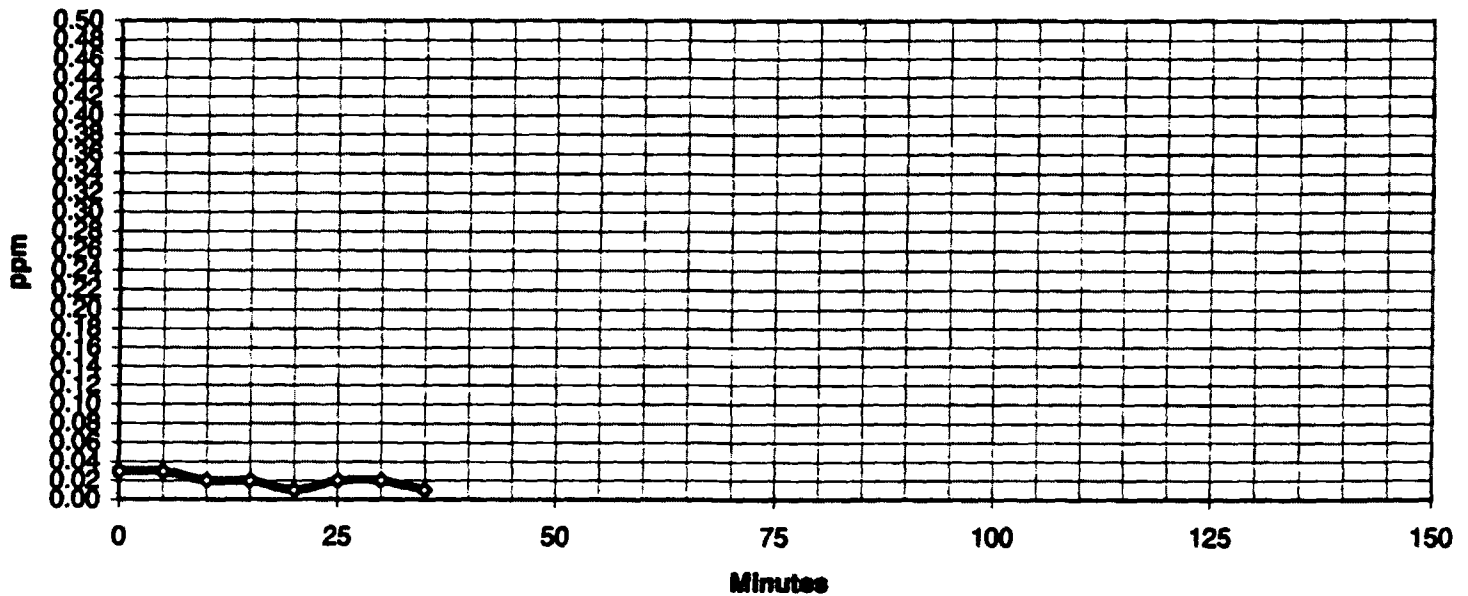
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/13/10
Time: 13:02

Analyzed by: D. B.
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
04/19/10	25	25
04/20/10	30	0
04/21/10	35	0
04/22/10	36	0
04/23/10	32	0
04/24/10	30	0
04/25/10	30	0

HALOGEN DOSING CURVE

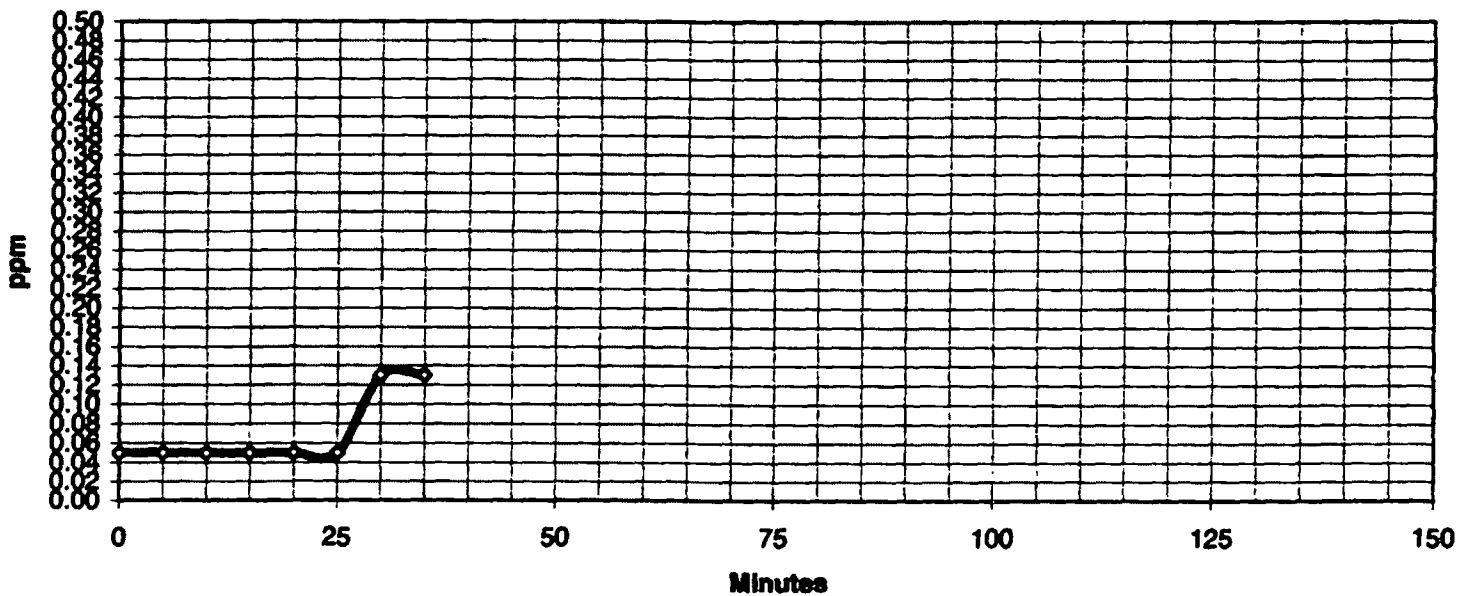
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/19/10
Time: 10:12

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
04/26/10	30	0
04/27/10	30	0
04/28/10	31	0
04/29/10	30	0
04/30/10	30	0

HALOGEN DOSING CURVE

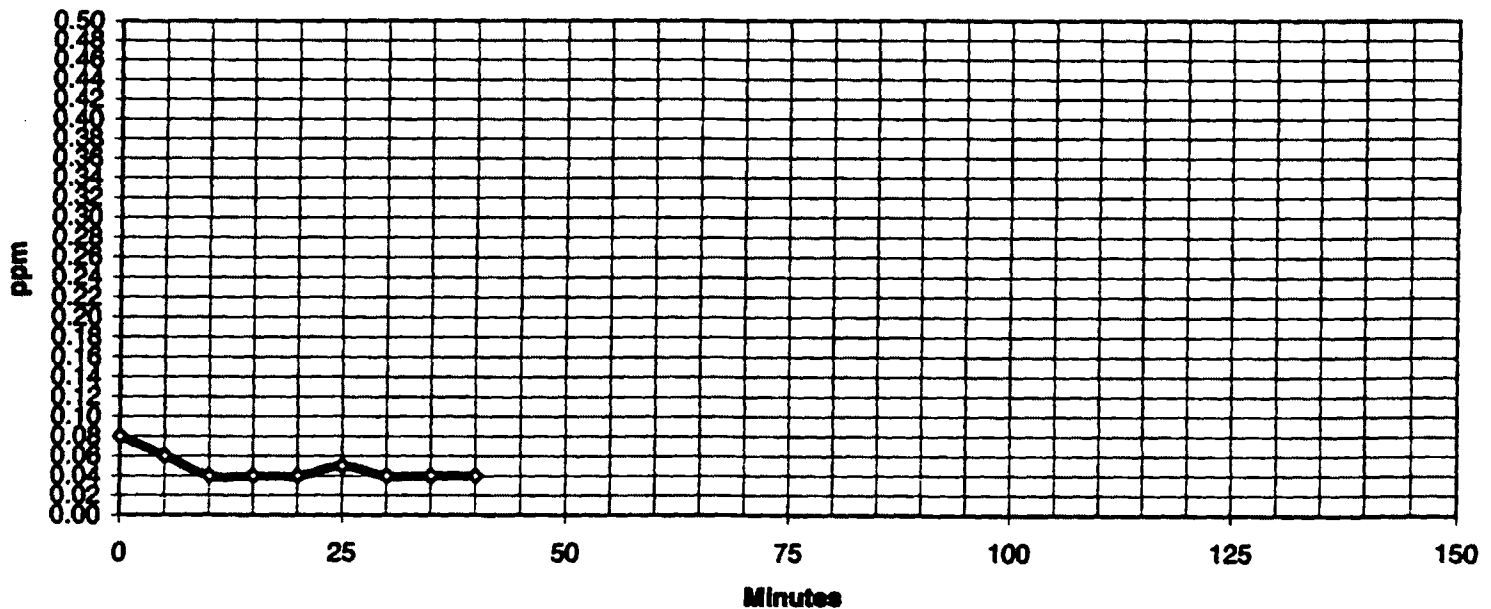
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/26/10
Time: 12:45

Analyzed by: M.H.
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.



B. Cox

ExelonSM

Nuclear

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

www.exeloncorp.com

June 22, 2010

LTR: BYRON 2010-0080
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 May 1, 2010 through May 31, 2010.

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

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

IL0046313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MONITORING PERIOD											
YEAR	MONTH	DAY	YEAR	MONTH	DAY						
From: 1	0	0	5	0	1	To: 1	0	0	5	3	1

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	< 1.1	< 1.1	(19)	0	286	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

815 406-3700

AREA CODE NUMBER

DATE

10 06 22
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 26 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


DEMINERALIZER REGENERATE (001A)

EFFLUENT

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	1	0	0	5	0	1			To:	1	0

*** NO DISCHARGE ☐ ***

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	
01002 1 0 0	PERMIT REQUIREMENT			LBS/DY	---	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.116	(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										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
PRINCIPAL EXECUTIVE OFFICER											
Bradley J. Adams											
Plant Manager											
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

FACILITY Byron Nuclear Power Station
LOCATION 4460 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
1 0	0 5	0 1	1 0	0 5	3 1

From: To:

MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 001B)
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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.92	1.7	(26)	—	12.3	22.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	29.5 DAILY MAX	LBS/DY	—	39.0 30 DAY AVG	69.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	—	7.85	—	7.85	(12)	0	290	GR
	PERMIT REQUIREMENT	—	—	—	6.0 MINIMUM	—	8.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.45	0.78	(26)	—	6.1	10.4	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	29.5 DAILY MAX	LBS/DY	—	39.0 30 DAY AVG	69.0 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	0.013	(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		10	06	22	
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 26 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

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 1 0 0 5 0 1	To: 1 0 0 5 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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	<1.2	2.1	(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) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams						515 408-3700		10 06 22			
Plant Manager											
TYPED OR PRINTED						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 20 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

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	1	0	0		1	0	0
	5	0	1		5	3	1

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

***NO DISCHARGE ☐ ***

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) 01002 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	5.0	(19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 80060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	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										
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		10	06	22	
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

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	1	0	0		1	0	0
	5	0	1		5	3	1

MAJOR
(SUBR 01)
F - FINAL
RADWASTE TREATMENT (FORMER 001D)
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---	< 0.5	< 0.5	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0	30.0	MGL		WEEKLY	COMPOS
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	---	---	(26)	---	< 1.4	1.6	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0	20.0	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.023	(03)	---	---	---	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	---	---	---	---		DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
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	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						615 406-3700		10	06	22	
Bradley J. Adams											
Plant Manager	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE					
TYPED OR PRINTED						NUMBER		YEAR	MONTH	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 10 of 31 days during the month.											

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

PERMITTEE NAME/ADDRESS

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

FACILITY Byron Nuclear Power Station

LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313

PERMIT NUMBER

E01 0

DISCHARGE NUMBER

OCR0501

MAJOR
(SUBR 01)

F - FINAL

**STORMWATER (FORMER 001E)
STORMWATER**

MONITORING PERIOD											
YEAR			MONTH			DAY			To:		
From:	1	0	0	5	0	1					
	1	0	0	5	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			
PH	SAMPLE MEASUREMENT	—	—	—	—	—	—	(12)		500	
00400 1 0 0	PERMIT REQUIREMENT	—	—	—	6.0 MINIMUM	—	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
SOLIDS, TOTAL SUSPENDED	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
00530 1 0 0	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
01032 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
CHROMIUM, TOTAL (AS CR)	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
01034 1 0 0	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		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	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
IRON, TOTAL (AS FE)	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
01046 1 0 0	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
01051 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	—	(18)		500	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(18)		500	
01051 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	—	(18)		500	

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	408-3700	10	06	22
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. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 10 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
(SUFR 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		
From:	1	0	0	5	0	1	To:	1	0	0	5

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	2.2	2.3	(19)	0	290	GRAB
	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	0.290	0.793	(03)	---	---	---	---	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Bradley J. Adams

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA CODE NUMBER

DATE

10 06 22

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 60556

IL0046313
PERMIT NUMBER

001 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
1 0 0 5 0 1			1 0 0 6 3 1		

From: To:

MAJOR
(BUBR 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	—	—	—	8.55	—	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)	—	—	0.018	(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)	—	—	0.044	(19)	0	240	GR
01082 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	—	—	0.65 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	16.98	26.27	(03)	—	—	—	—	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	—	—	—	—		DAILY	CONTIN
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	0.09	0.28	(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

Bradley J. Adams
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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

TELEPHONE
815 406-3700
AREA CODE NUMBER

DATE
10 06 22
YEAR MONTH DAY

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

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

SEE ATTACHED

EPA Form 3320-1 (Rev 3/99)

SD

1 OF 1

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	5	0	1

From: To:

YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	5	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			
PH	SAMPLE MEASUREMENT	---	---	---		---		(12)		500	
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)		500	
00630 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MGL		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	MGL		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	MGL		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	MGL		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	MGL		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
01061 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MGL		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams						815 406-3700		10	06	22	
Plant Manager											
TYPED OR PRINTED						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. Flow existed through this outfall 1 of 31 days during the month.											

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

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	From:	YEAR	MONTH	DAY	To:
1	0	0	5	0	1	1	
1	0	0	5	3	1	1	

OCR0501

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)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		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	MGL		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	4.0	4.0	(19)	0	290	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.080	0.080	(03)	---	---	---	---	0	290	
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams						815 406-3700		10	06	22	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) 1. On 5/13/10 Outfall 002 had flow due to excessive rainfall. The flow is estimated by Operations to have lasted 2 hours from 03:00 - 05:00. Estimated flow is 60,000 gallons at 500 gpm). (2 hours)											

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
May 2010

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
05/01/10	120	86.3
05/08/10	120	76.1
05/15/10	120	84.0
05/22/10	120	91.9
05/29/10	120	94.9

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 May 2010.

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
May 2010**

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
05/01/10	30	0
05/02/10	30	0
05/03/10	35	0
05/04/10	0	0
05/05/10	0	0
05/06/10	0	0
05/07/10	36	40
05/08/10	30	30
05/09/10	30	30

HALOGEN DOSING CURVE

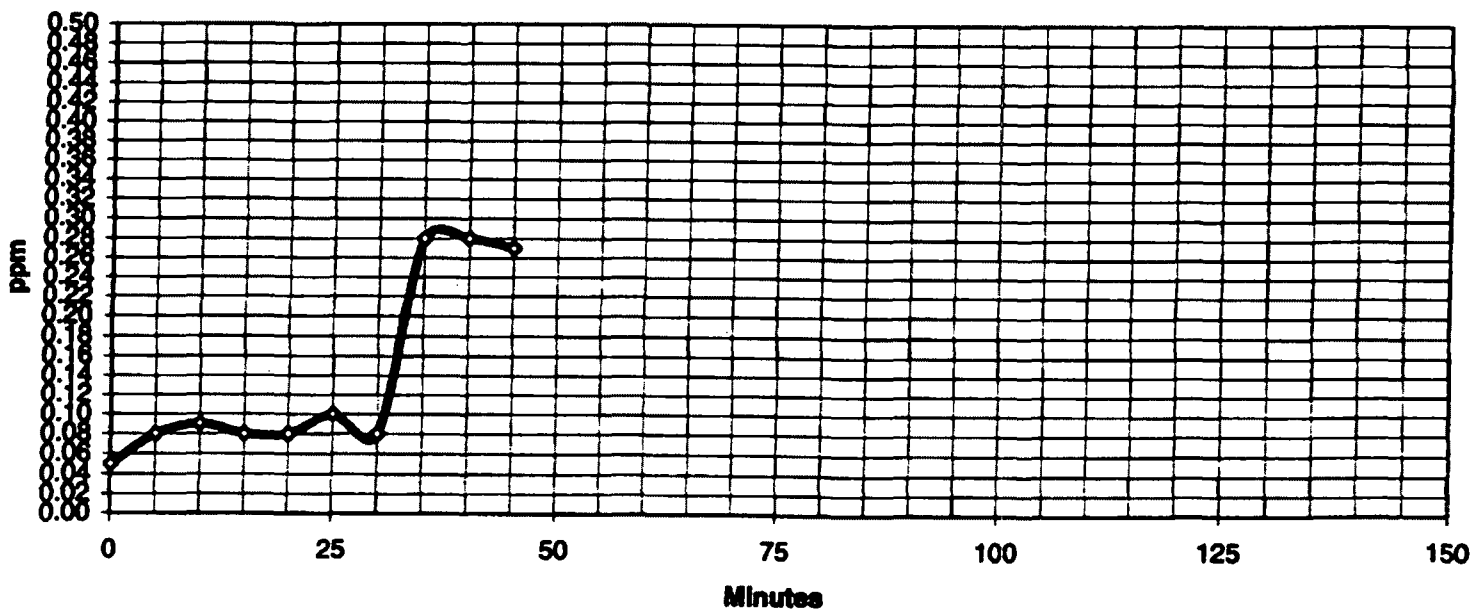
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/03/10
Time: 13:55

Analyzed by: D.C.A.
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
05/10/10	30	30
05/11/10	34	34
05/12/10	30	30
05/13/10	30	30
05/14/10	30	30
05/15/10	30	30
05/16/10	30	32

HALOGEN DOSING CURVE

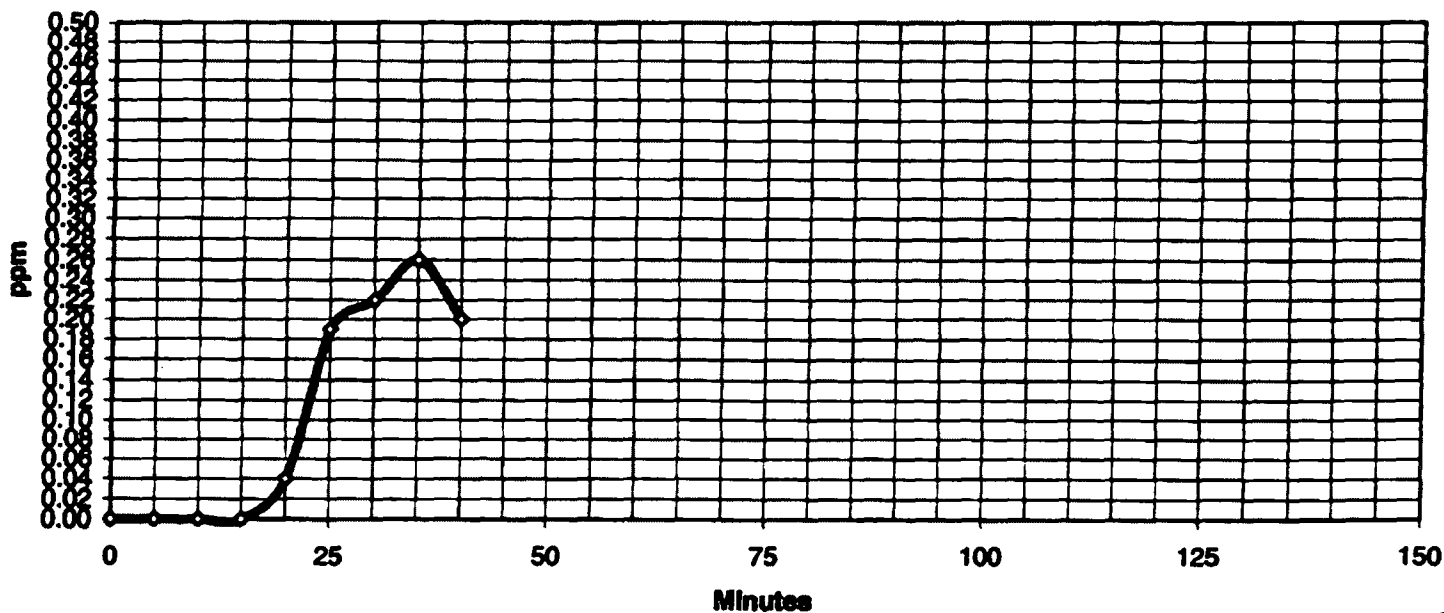
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/10/10
Time: 11:28

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
05/17/10	30	30
05/18/10	30	30
05/19/10	30	30
05/20/10	30	30
05/21/10	32	31
05/22/10	32	30
05/23/10	30	34

HALOGEN DOSING CURVE

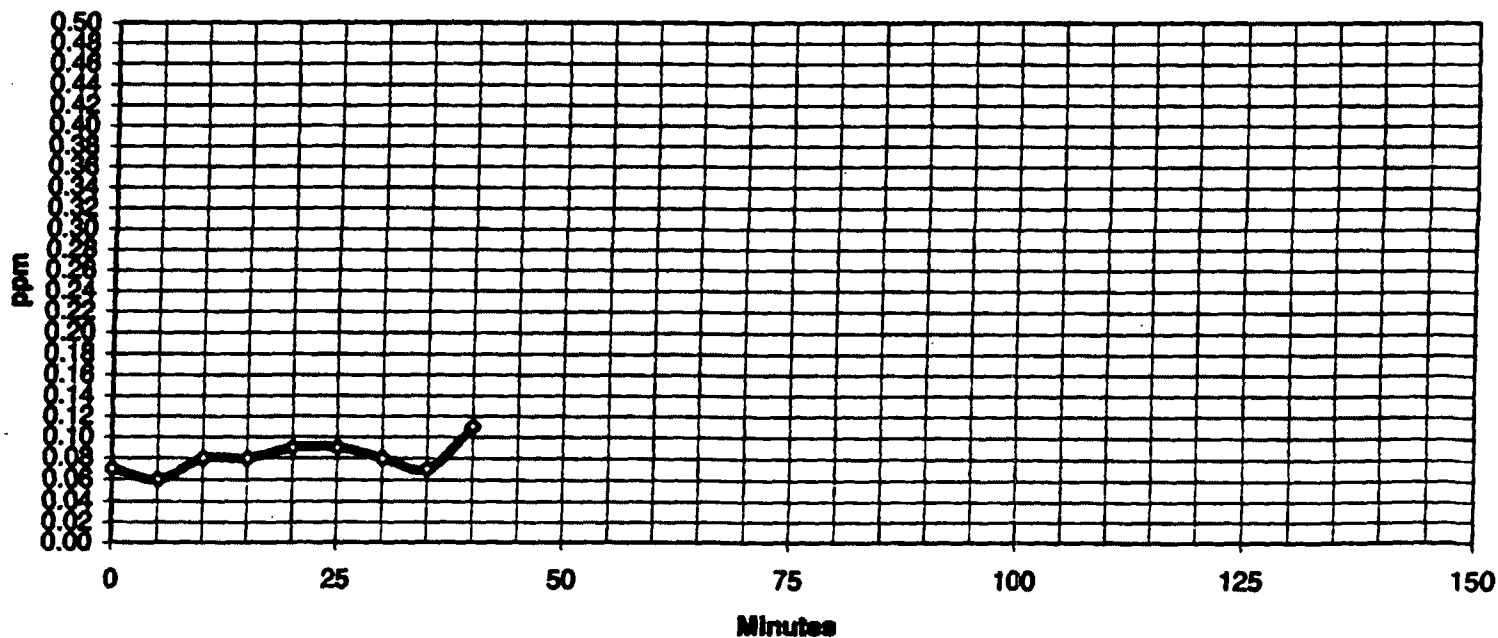
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/17/10
Time: 11:42

Analyzed by: J. J. 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.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
05/24/10	30	30
05/25/10	30	30
05/26/10	30	30
05/27/10	30	30
05/28/10	30	30
05/29/10	30	30
05/30/10	30	30
05/31/10	30	30

HALOGEN DOSING CURVE

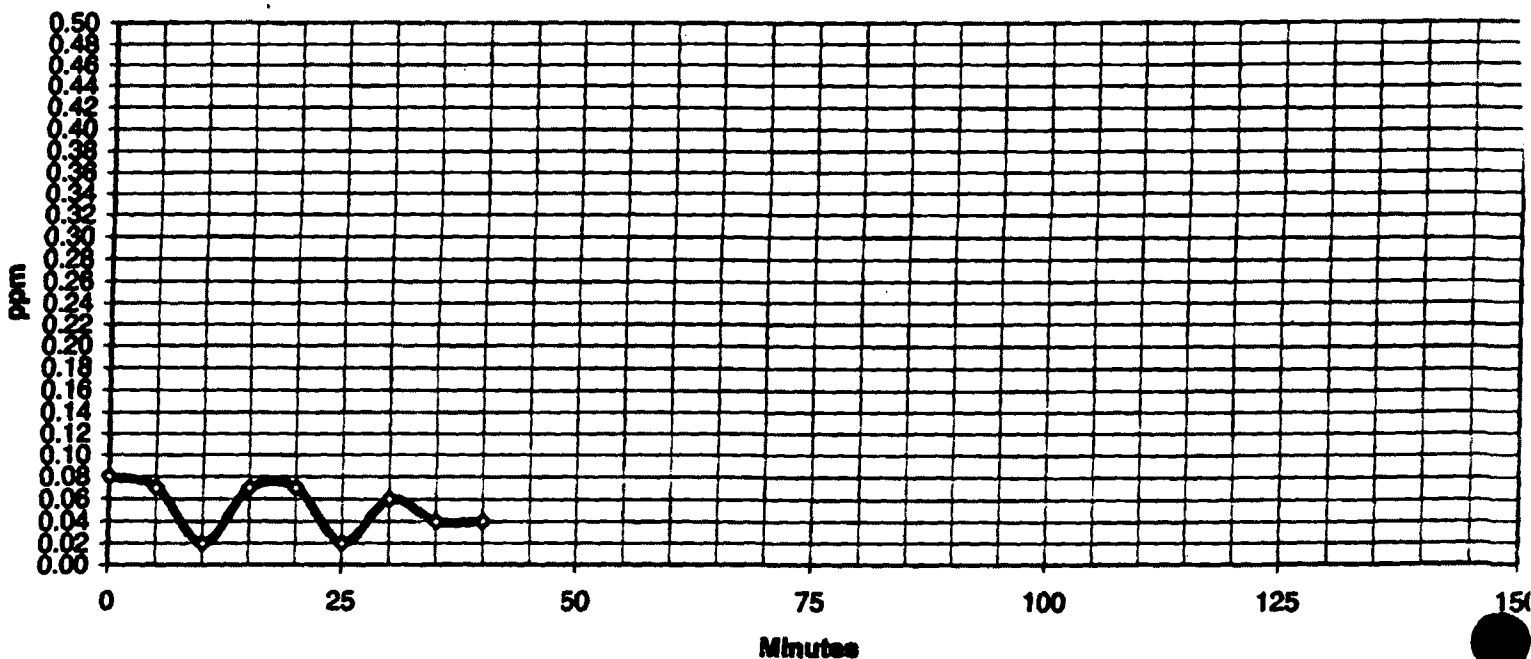
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/24/10
Time: 10:50

Analyzed by: T. M.
Reviewed by: M. H.

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

July 21, 2010

LTR: BYRON 2010-0075
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 June 1, 2010 through June 30, 2010.

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

Respectfully,



Bradley D. 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
DEMINEALIZER REGENERATE (001A)
EFFLUENT

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

MONITORING PERIOD

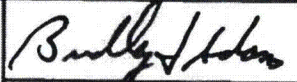
YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	1	0	0
0	8	0	1	0	3
0	1		0	6	0

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			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	7.5	9.3	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		ONCE/MONTH	COMP-6
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	
01046 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	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	10	07	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 24 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

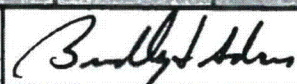
FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	6	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			
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 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.101	(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.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 815 406-3700 AREA NUMBER		DATE 10 07 21 YEAR MONTH DAY	
Bradley J. Adams											
Plant Manager											
TYPED OR PRINTED											
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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR
From: 1	0	0	6	0	1	To: 1	0	0	6

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE									
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS												
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.11	< 0.13	(28)	-----	< 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	-----	-----	---	7.39	-----	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 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.05	0.05	(28)	-----	< 0.9	1.2	(19)	0	290	DC									
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24									
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.006	0.011	(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	10	07	21										
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY										
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT																			
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																				
1. Flow existed through this outfall 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		
1	0	0	6	0	1	1	0	0	6	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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.1	2.2	(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) 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

815 406-3700
AREA CODE NUMBER

DATE

10 07 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 20 of 30 days during the month.

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

OCR0501

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

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

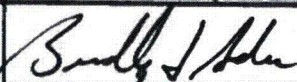
MONITORING PERIOD
From: YEAR MONTH DAY 1 0 6 0 1 To: YEAR MONTH DAY 1 0 0 6 3 0

MAJOR (S/BR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.8	2.3	(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	0.026	0.039	(03)	-----	-----	-----	----	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Bradley J. Adams Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			815 406-3700	10 07 21	AREA CODE	NUMBER	YEAR

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
1	0	0	6	0	1

From: To:

YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	6	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	-----	-----	(28)	-----	< 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	-----	-----	(28)	-----	< 2.4	3.6	(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	0.021	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.

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

TELEPHONE		DATE		
815	406-3700	10	07	21
AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. Flow existed through this outfall 8 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


YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	6	0	1
From:			To:		
1	0	0	6	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	39.0 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	
01061 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	10	07	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 13 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

STORMWATER (FORMER 001E)
STORMWATER

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 1 0 0 6 0 1	To: 1 0 0 6 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			
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) 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)	-----	2.4	3.2	(19)	0	290	GRAB
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.201	0.635	(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		10	07	21	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0601

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: 1	0	0	6	0	1	To: 1	0	0	6

*** 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	-----	-----	---	8.27	-----	8.76	(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)	-----	-----	0.016	(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)	-----	-----	0.015	(19)	0	240	GR
01082 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	20.10	28.21	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.09	0.26	(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	
61313 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
Bradley J. Adams
Plant Manager
TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE
815 406-3700
AREA CODE NUMBER

DATE
10 07 21
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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
1	0	0	6	0	1	1	0	0	6	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			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)		500	
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
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
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01051 1 0 0	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.

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

TELEPHONE

815 406-3700

AREA
CODE

NUMBER

DATE

10

YEAR

07

MONTH

21

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)**

OCR0601

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 1 0 0 6 0 1	To: 1 0 0 6 3 0				

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	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)		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)	-----			(19)		290	
	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)	-----	-----	-----	----		290	
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams						815 406-3700		10	07	21	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED											

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
June 2010**

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
06/05/10	120	89.7
06/12/10	120	93.7
06/19/10	120	90.2
06/26/10	120	91.2

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 June 2010.

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
June 2010**

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
06/01/10	31	31
06/02/10	33	32
06/03/10	35	34
06/04/10	31	30
06/05/10	33	32
06/06/10	30	30

HALOGEN DOSING CURVE

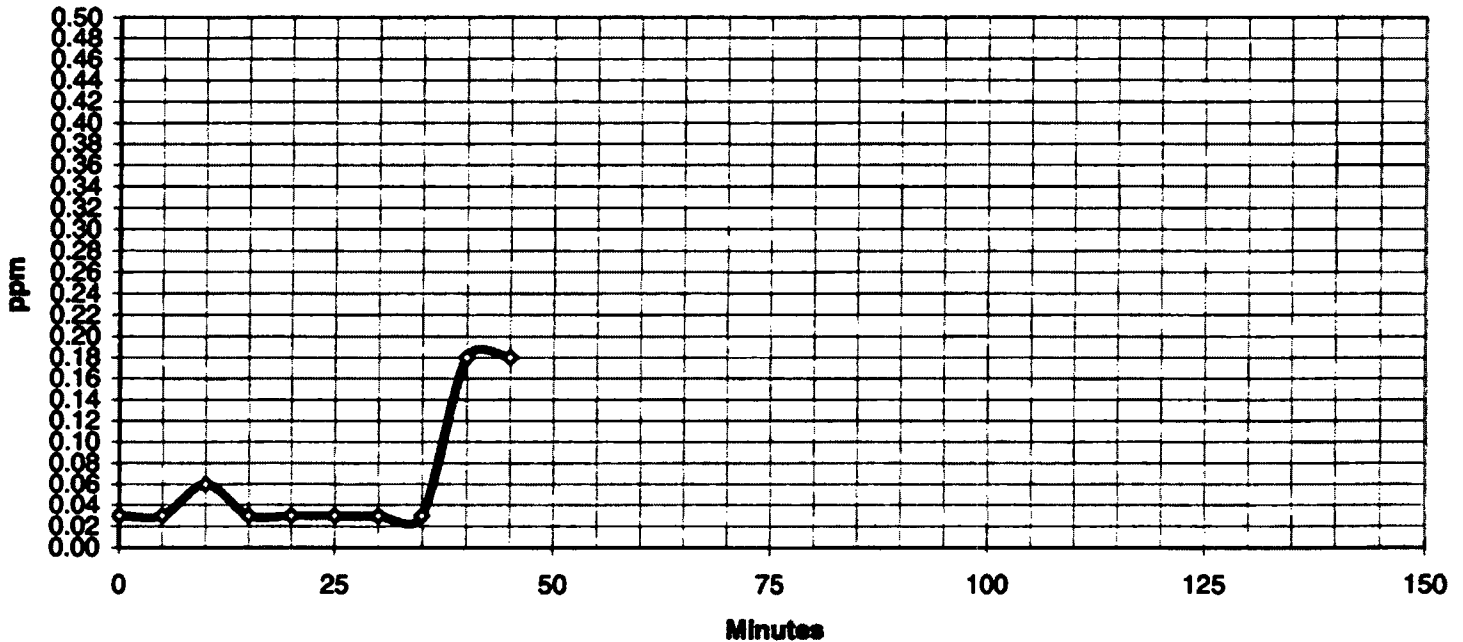
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/01/10
Time: 11:02

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
06/07/10	30	30
06/08/10	30	30
06/09/10	30	30
06/10/10	30	30
06/11/10	30	30
06/12/10	30	30
06/13/10	30	30

HALOGEN DOSING CURVE

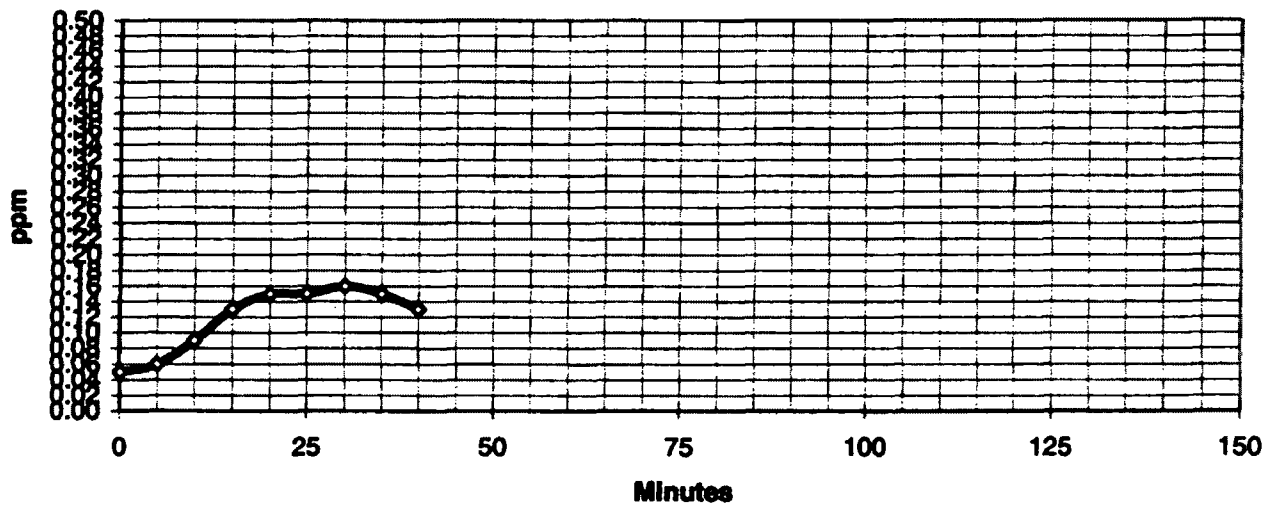
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/07/10
Time: 11:11

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

Unit: l

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
06/14/10	31	30
06/15/10	33	32
06/16/10	34	33
06/17/10	32	32
06/18/10	30	30
06/19/10	40	58
06/20/10	34	35

HALOGEN DOSING CURVE

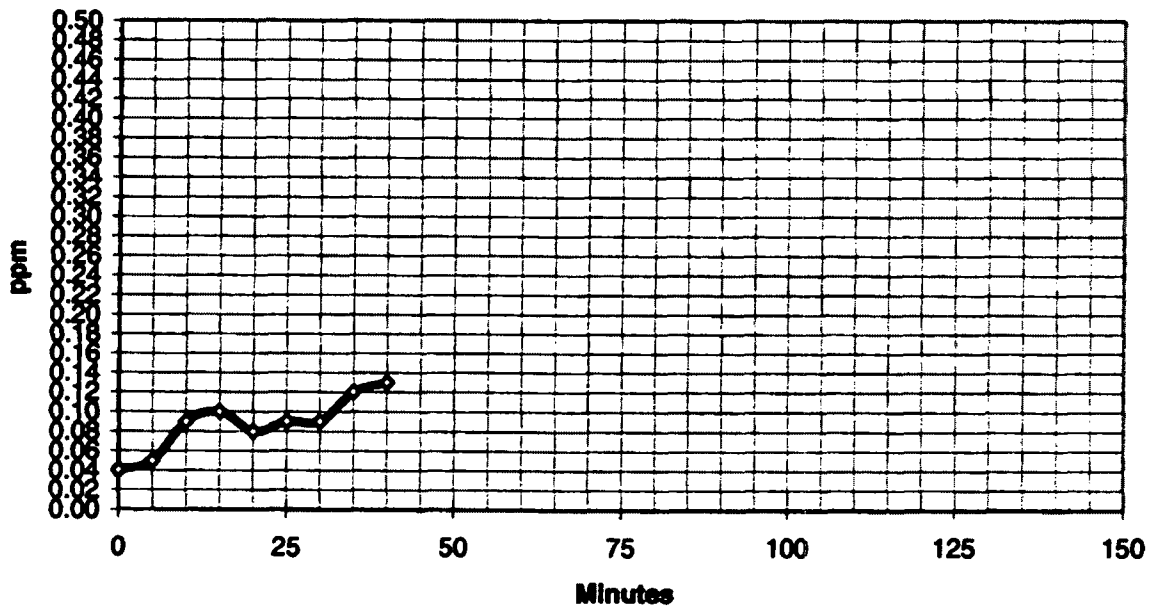
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/14/10
Time: 11:20

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
06/21/10	34	32
06/22/10	34	35
06/23/10	30	30
06/24/10	30	30
06/25/10	33	32
06/26/10	30	31
06/27/10	30	30

HALOGEN DOSING CURVE

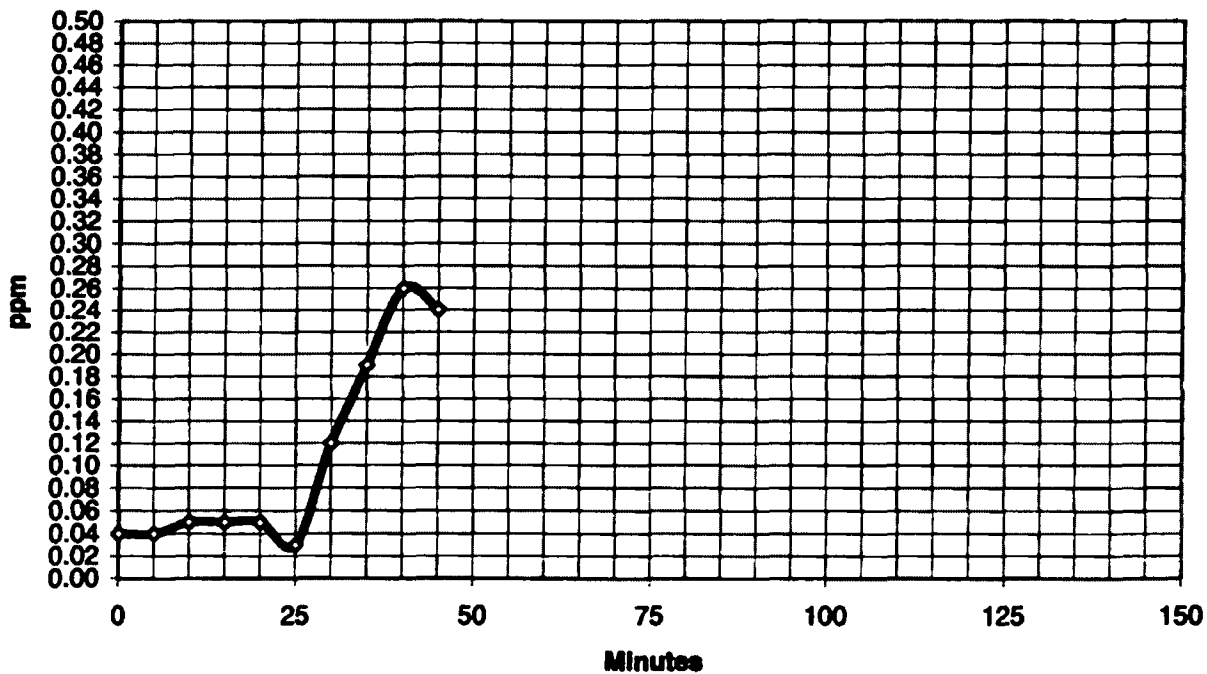
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/21/10
Time: 11:18

Analyzed by: J. W.
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
06/28/10	35	35
06/29/10	35	35
06/30/10	35	35

HALOGEN DOSING CURVE

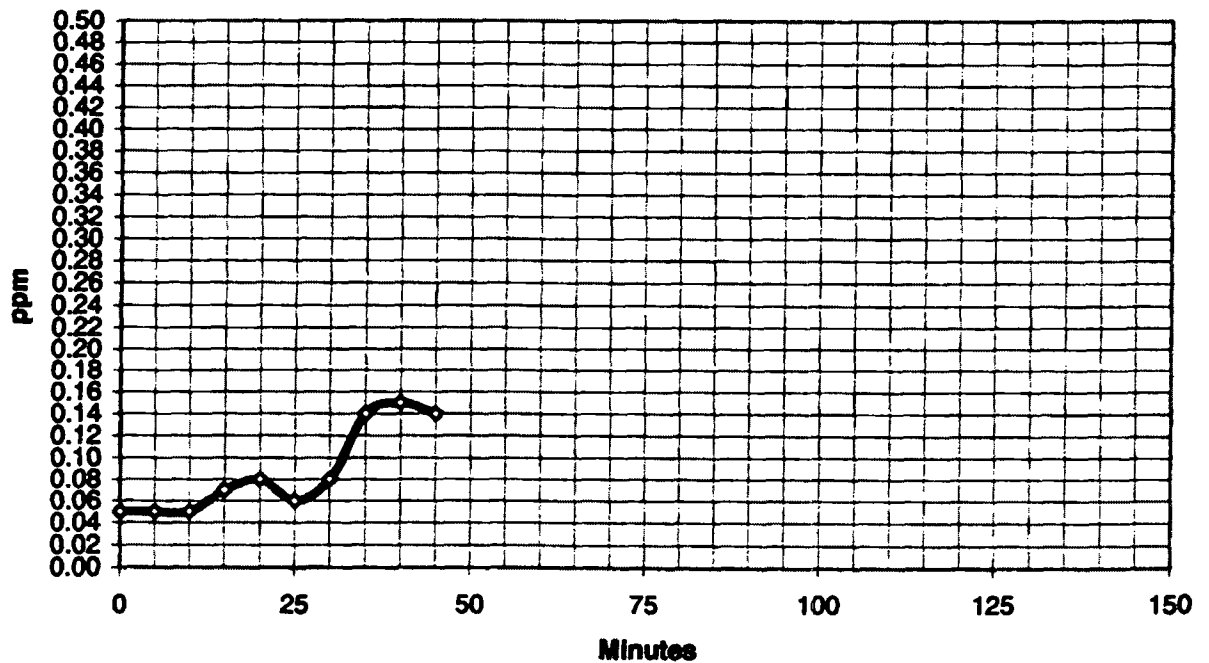
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/28/10
Time: 11:24

Analyzed by: J. 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.





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

www.exeloncorp.com

Joe
Exelon
Nuclear

August 19, 2010

LTR: BYRON 2010-0084
File: 2.09.0411
1.10.0101

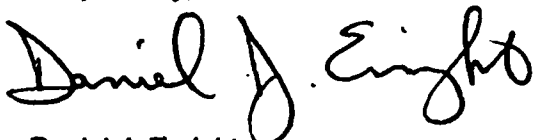
Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant Elimination System (NPDES) Permit Number IL0048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period of July 1, 2010 through July 31, 2010.

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 Generation Station

DJEZC\sdk

Attachments

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

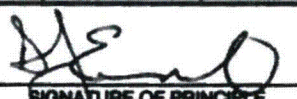
MONITORING PERIOD

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(28)	---	< 1.5	< 1.6	(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-8
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	(28)	---			(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	---	---	(28)	---			(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	---	---	(28)	---			(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	---	---	(28)	---			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(28)	---			(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	---	---	(28)	---			(19)		500	
01057 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Daniel J. Enright			815 408-3800	10	08	19
Site Vice President			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 31 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
1	0	0	7	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			
ZINC, TOTAL (AS ZN) 01082 1 0 0	SAMPLE MEASUREMENT	—	—	(28)	—	—	—	(19)		500	
EFFLUENT GROSS VALUE	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	SAMPLE MEASUREMENT	0.028	0.098	(03)	—	—	—	—	0	135	CN
EFFLUENT GROSS VALUE	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 815 408-3600 AREA NUMBER		DATE 10 08 19 YEAR MONTH DAY	
Daniel J. Enright											
Site Vice President											
TYPED OR PRINTED											

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.18	0.29	(26)	—	< 3.9	5.8	(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	—	—	—	7.41	—	7.42	(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	0.09	(26)	—	< 1.5	2.7	(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	0.007	0.013	(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										

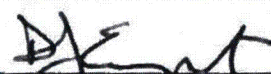
NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

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

815 406-3800

AREA
CODE

NUMBER

DATE

10 08 19

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)**

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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


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

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

*** 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	_____	_____	(25)	_____	< 1.3	2.5	(19)	0	240	DC
00530 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	15.0	30.0	MGL		WEEKLY	COMP24
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	_____	_____	(25)	_____			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.1	0.2	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	_____	_____	(25)	_____			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0	2.0	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	_____	_____	(25)	_____			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.5	1.0	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	_____	_____	(25)	_____			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0	1.0	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	_____	_____	(25)	_____			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.2	0.4	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	_____	_____	(25)	_____			(9)		500	
01057 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0	2.0	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Daniel J. Enright			815	408-3800	10	08	19
Site Vice President			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 20 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

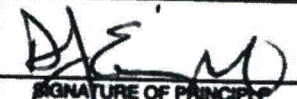
MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

MONITORING PERIOD									
From:			To:						
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
1	0	0	7	0	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) 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	3.9	(19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	28.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.041	(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	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Daniel J. Enright			815 408-3800	10	08	19
Site Vice President			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(28)	---	< 0.4	< 0.5	(19)	0	240	CP
00630 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0	30.0	MGL		WEEKLY	COMPOS
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	---	---	(28)	---	< 1.4	< 1.4	(19)	0	240	GR
03682 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0	20.0	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.023	(03)	---	---	---	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	CONTIN
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815 406-3800		10	08	19	
Daniel J. Enright											
Site Vice President	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Daniel J. Enright			815 408-3600	10	08	19
Site Vice President			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

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

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

OCR0501

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

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
1 0 0 7 0 1			1 0 0 7 3 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			
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) 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)	---	2.4	3.0	(19)	0	290	GRAB
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.853	2.393	(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			
Daniel J. Enright						815 406-3600		10	08	19	
Site Vice President						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	—	—	—	8.27	—	8.65	(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)	—	—	0.012	(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)	—	—	0.012	(19)	0	240	GR
01082 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	22.58	29.65	(03)	—	—	—	—	0	135	CN
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	—	—	—	—		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	0.10	0.24	(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	
61313 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.					TELEPHONE		DATE			
Daniel J. Enright						815 406-3800		10	08	19	
Site Vice President						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment											
SEE ATTACHED											
EPA Form 3320-1 (Rev 3/99)											

SD

PAGE 1 OF 1

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

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

*** 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	—	8.0 MAXIMUM	SU	—	SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)	—	500	—
00530 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L	—	SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)	—	500	—
01032 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L	—	DAILY	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)	—	500	—
01034 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L	—	DAILY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)	—	500	—
01042 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L	—	DAILY	GRAB
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)	—	500	—
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											

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		
Daniel J. Enright		815	406-3600	10	08	19
Site Vice President		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. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 2 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

002 0
DISCHARGE NUMBER

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

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	1	0	0		1	0	0
	7	0	1		3	1	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)		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)	---	< 1.6	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 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.009	0.018	(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			
Daniel J. Enright						815 406-3800		10	08	19	
Site Vice President						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

- On 7/23/10 and 7/24/10 Outfall 002 had flow due to excessive rainfall. The flow is estimated by Operations to have lasted 25 minutes on 7/23/10 and 353 minutes on 7/24/10. Estimated flow is 1,250 gallons for 7/23/10 and 17, 650 gallons for 7/24/10 at 50 gpm flowrate for both days.

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
July 2010**

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
07/03/10	120	86.3
07/10/10	120	92.1
07/17/10	120	93.4
07/24/10	120	92.7
07/31/10	120	87.9

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

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of July 2010.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
July 2010**

COMMENTS:

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

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
07/01/10	35	35	07/08/10	35	35
07/02/10	31	34	07/09/10	35	35
07/03/10	36	34	07/10/10	35	35
07/04/10	35	33	07/11/10	35	35
07/05/10	35	39			
07/06/10	35	35			
07/07/10	35	35			

HALOGEN DOSING CURVE

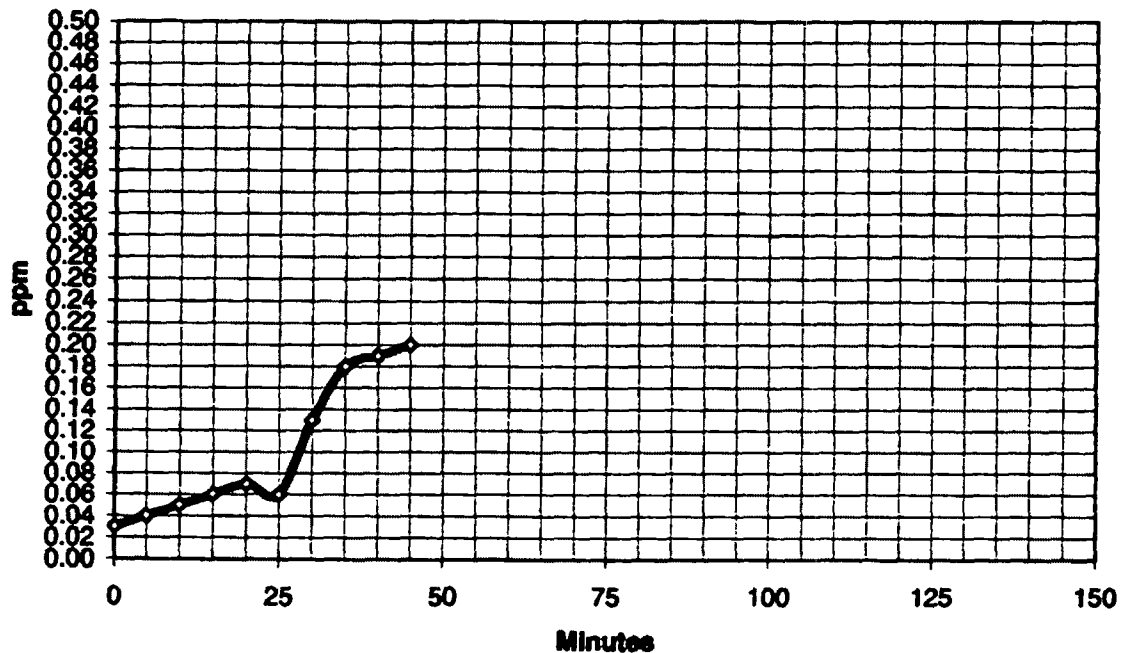
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/06/10
Time: 10:24

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
07/12/10	35	35
07/13/10	36	35
07/14/10	36	36
07/15/10	37	37
07/16/10	35	35
07/17/10	40	35
07/18/10	35	35

HALOGEN DOSING CURVE

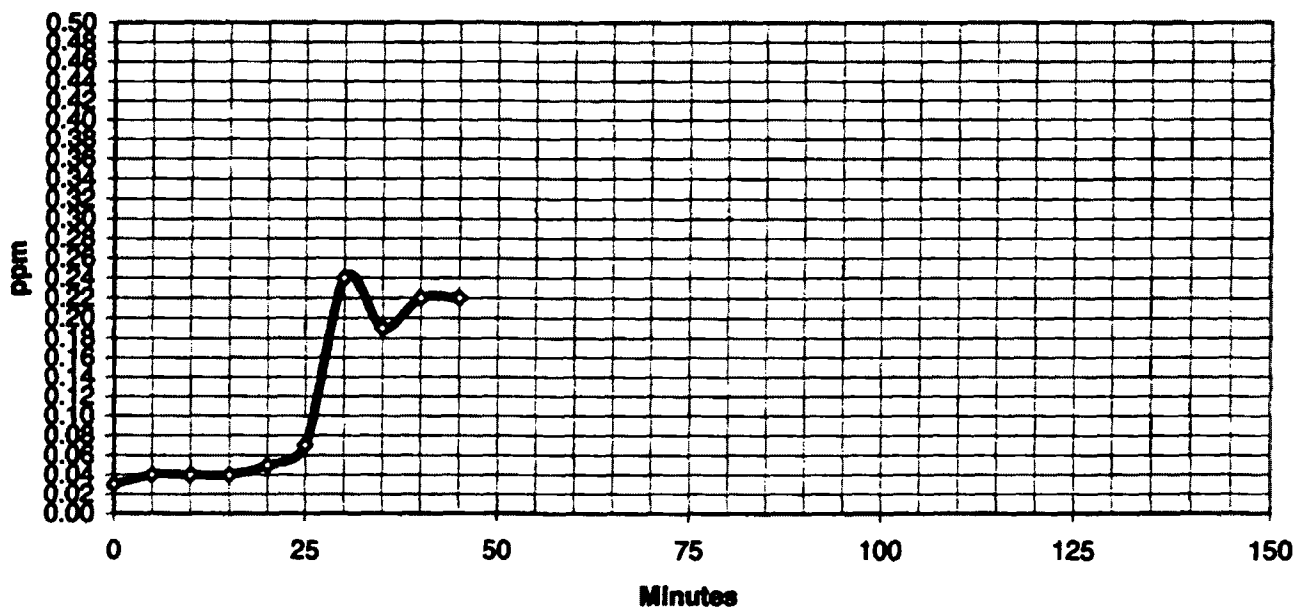
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/12/10
Time: 11:57

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
07/19/10	35	35
07/20/10	35	35
07/21/10	35	35
07/22/10	35	33
07/23/10	35	36
07/24/10	35	35
07/25/10	36	36

HALOGEN DOSING CURVE

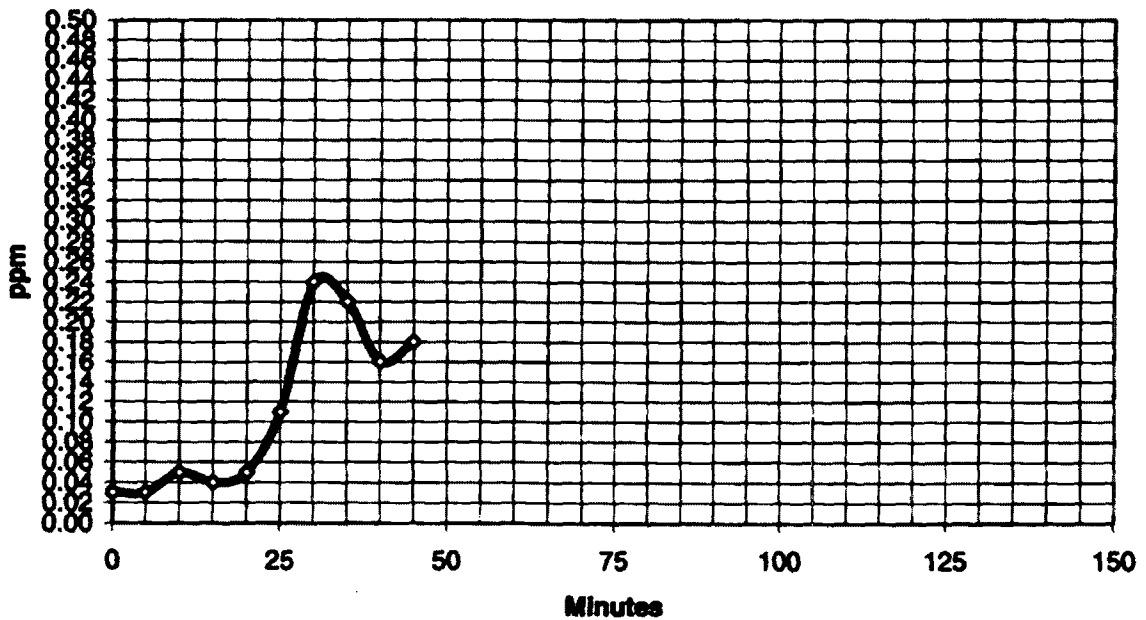
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/19/10
Time: 12:15

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
07/26/10	35	35
07/27/10	35	35
07/28/10	35	35
07/29/10	35	35
07/30/10	35	35
07/31/10	35	35

HALOGEN DOSING CURVE

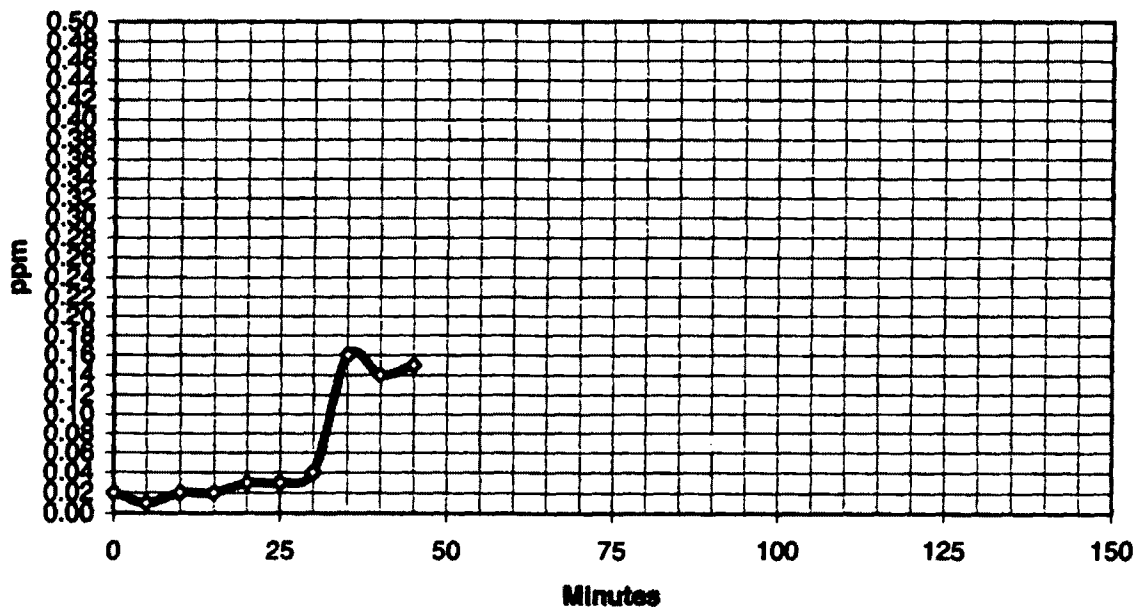
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/26/10
Time: 12:32

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

www.exeloncorp.com

Zoe Cox

ExelonSM
Nuclear

September 17, 2010

LTR: BYRON 2010-0104
File: 2.09.0411
1.10.0101

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

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant Elimination System (NPDES) Permit Number IL0048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period of August 1, 2010 through August 31, 2010.

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 Generation Station

BJA\ZC\sdk

Attachments

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

OCR0501

PERMITTEE NAME/ADDRESS

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

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	8	0	1

From: To:

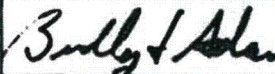
YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	8	3	1

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			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---	1.4	1.5	(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-6
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
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	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	10	09	17
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 29 of 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
(BUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)

EFFLUENT

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

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

From: To:

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY	---	1.0 20 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0	SAMPLE MEASUREMENT	0.027	0.095	(03)	---	---	---	---	0	135	CN
EFFLUENT GROSS VALUE	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										
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	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	10	09	17		
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

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

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
	1	0	0		1	0	0
	8	0	1		8	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	< 0.31	0.42	(26)	-----	< 3.8	5.6	(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	-----	-----	---	7.44	-----	7.46	(12)	0	290	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.23	0.40	(26)	-----	< 2.8	5.3	(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	0.006	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	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	10	09	17	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 29 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						
1	0	0	8	0	1	From:	1	0	0	8	To: 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)	-----	2.1	3.2	(19)	0	240	DC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
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

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	10	09	17
AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 13 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
1 0 0 8 0 1	1 0 0 8 3 1				

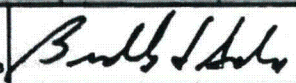
From: To:

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 2.5	3.9	(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	0.025	0.039	(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.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	10	09	17
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

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

OCR0501

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

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
1 0 0 8	0 1		1 0 0 8	3 1	

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.6	1.2	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MGL		WEEKLY	COMPOS
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.5	2.1	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.022	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815 406-3700		10	09	17	
Bradley J. Adams						AREA CODE NUMBER		YEAR	MONTH	DAY	
Plant Manager	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 9 of 31 days during the month.

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

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

OCR0501

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	PERMIT REQUIREMENT	---	---	---	---	---	---	---	---	---	---
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	---	6.0 MINIMUM	---	9.0 MAXIMUM	SU	---	500	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)	---	500	---
00630 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L	---	SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)	---	500	---
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L	---	DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)	---	500	---
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L	---	DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)	---	500	---
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L	---	DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)	---	500	---
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L	---	DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)	---	500	---
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L	---	DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		10	09	17	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

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		
From:	1	0	0	8	0	1	To:	1	0	0	8

*** 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)	-----	< 1.5	1.7	(19)	0	290	GRAB
	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	0.257	0.548	(03)	-----	-----	-----	----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

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

TELEPHONE

815 408-3700

AREA
CODE

DATE

10

09

17

YEAR

MONTH

DAY

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	—	—	—	8.45	—	8.61	(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)	—	—	0.019	(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	22.86	32.30	(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)	—	0.14	0.38	(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

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815

408-3700

AREA
CODE

NUMBER

10

YEAR

DATE

09

MONTH

17

DAY

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

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

SEE ATTACHED

EPA Form 3320-1 (Rev 3/99)

SD

PAGE 1 OF 1

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

MONITORING PERIOD											
YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	8	0	1	1	0	0	8	3	1

From:

To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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)			
01061 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.

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

TELEPHONE
815 406-3700
AREA CODE NUMBER
DATE
10 09 17
YEAR MONTH DAY

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

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

FACILITY Byron Nuclear Power Station
LOCATION 4460 North German Church Road
Byron, IL 61010

MONITORING PERIOD

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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 03682 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	---			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		10	09	17	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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