

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

**BLOWDOWN TEMPERATURE MONITORING:**

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
08/07/10	120	89.5
08/14/10	120	93.6
08/21/10	120	92.0
08/28/10	120	88.5

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

**HYDRAZINE MONITORING:**

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of August 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  
August 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
08/01/10	35	35
08/02/10	35	35
08/03/10	35	35
08/04/10	40	40
08/05/10	40	40
08/06/10	38	40
08/07/10	40	38
08/08/10	38	39

HALOGEN DOSING CURVE

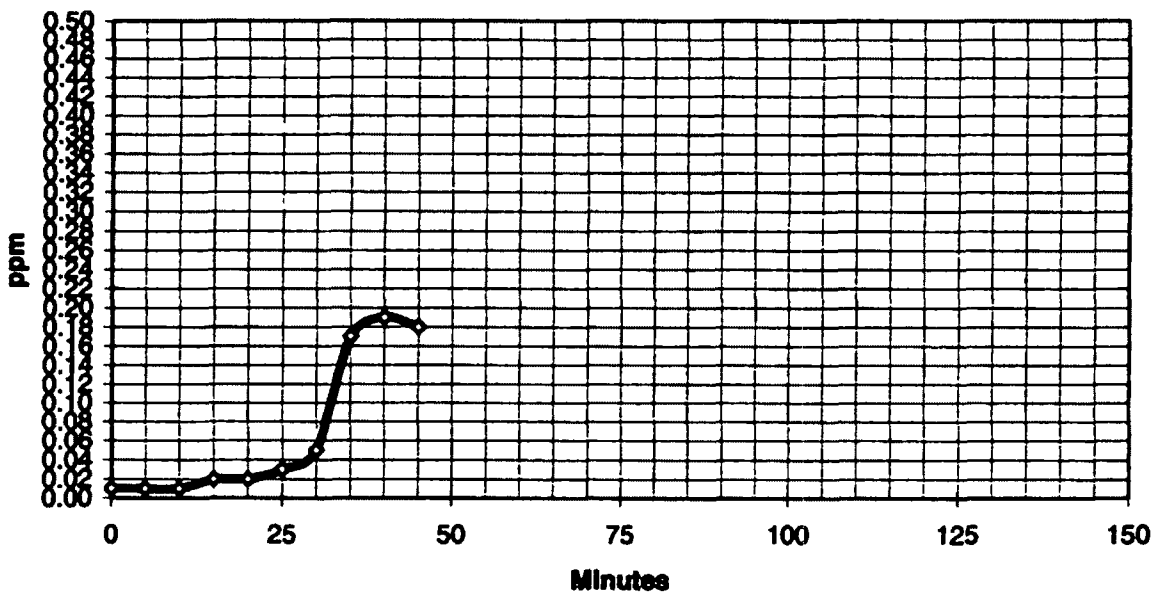
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 08/02/10  
Time: 11:23

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

Unit: 1

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



EXELON  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/09/10	40	39
08/10/10	37	38
08/11/10	38	40
08/12/10	38	40
08/13/10	40	40
08/14/10	40	41
08/15/10	39	37

HALOGEN DOSING CURVE

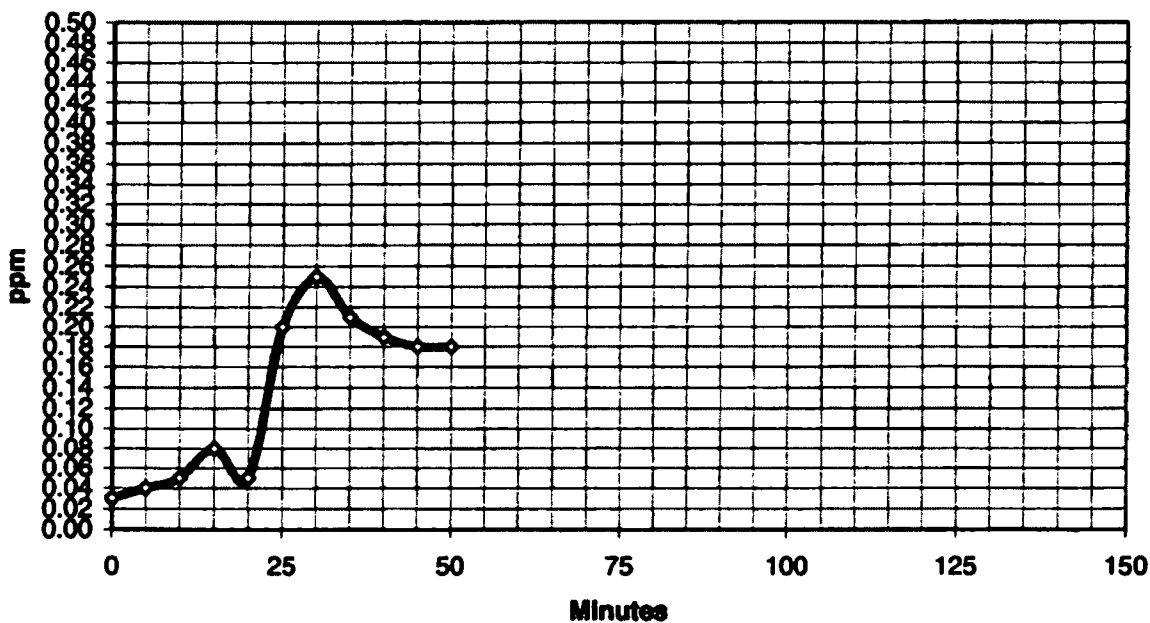
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 08/09/10  
Time: 11:27

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  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/16/10	30	30
08/17/10	40	40
08/18/10	40	40
08/19/10	40	40
08/20/10	40	40
08/21/10	40	40
08/22/10	40	40

HALOGEN DOSING CURVE

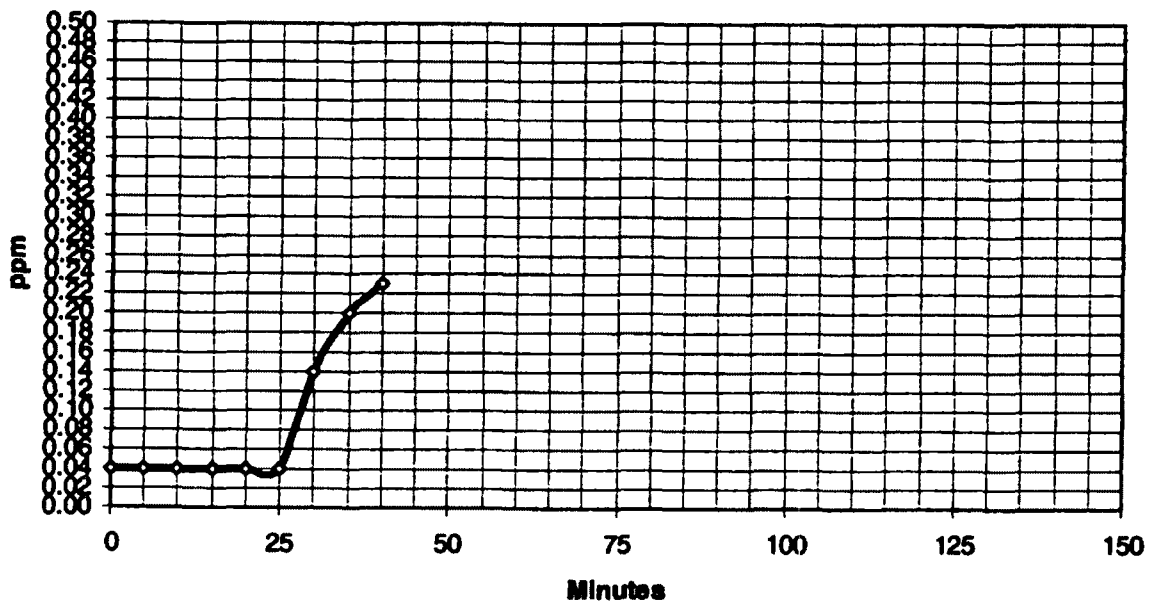
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 08/16/10  
Time: 10:49

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.



EXELON  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/23/10	42	42
08/24/10	40	40
08/25/10	40	40
08/26/10	39	40
08/27/10	40	40
08/28/10	40	40
08/29/10	40	40

HALOGEN DOSING CURVE

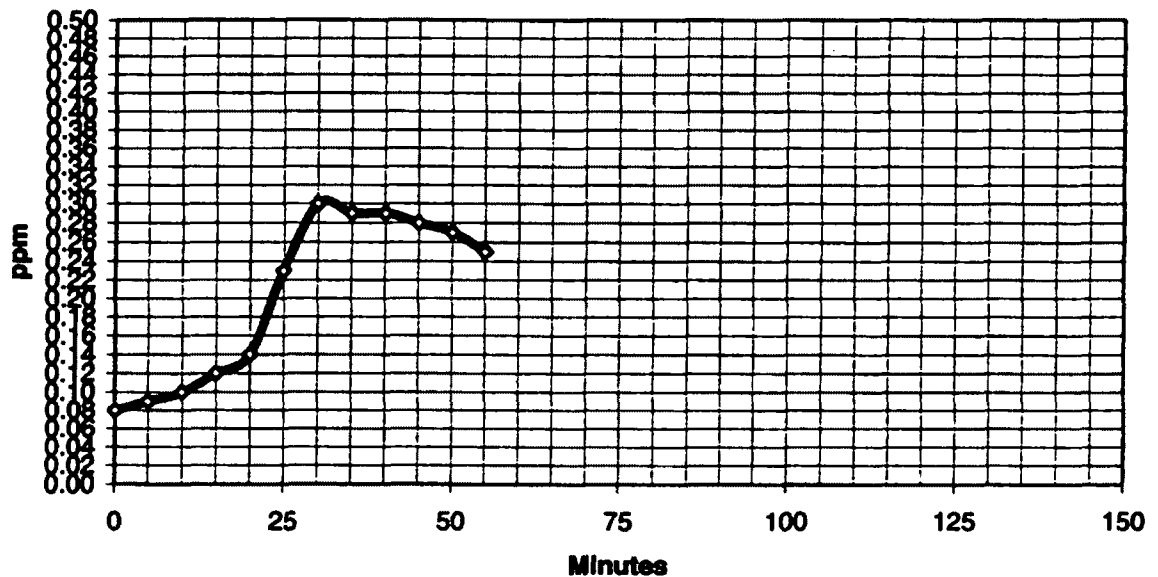
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 08/23/10  
Time: 12:23

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

Unit: 2

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



EXELON  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/30/10	40	37
08/31/10	30	40

HALOGEN DOSING CURVE

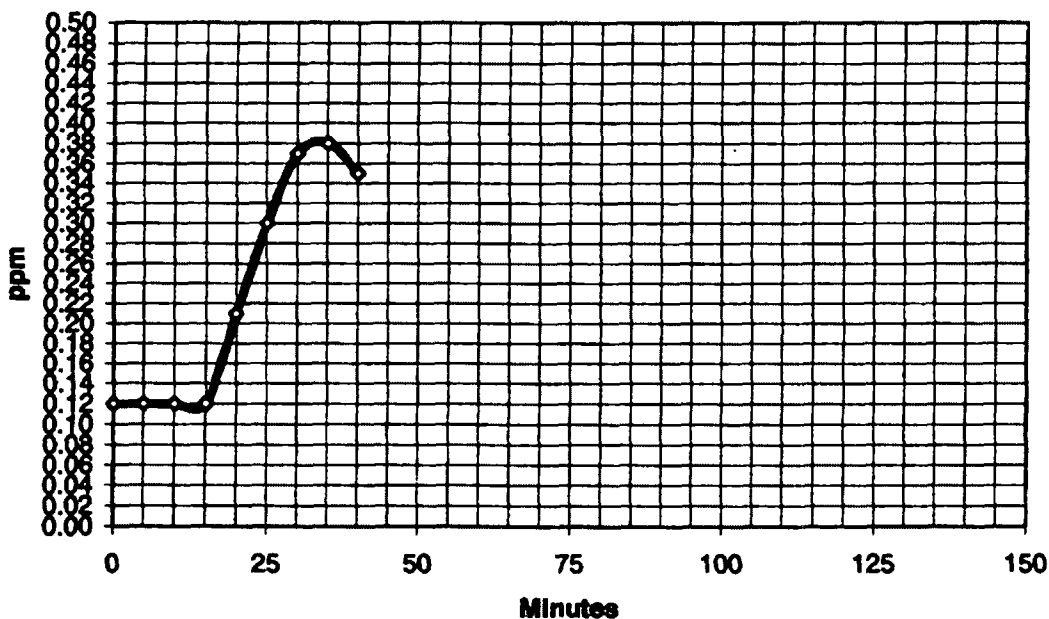
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 08/31/10  
Time: 10:32

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.



*Starke*

**Exelon<sup>SM</sup>**

**Nuclear**

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

www.exeloncorp.com

October 19, 2010

LTR: BYRON 2010-0126  
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 September 1, 2010 through September 30, 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 Generation Station

BJA\ZC\sdk

Attachments



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

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

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

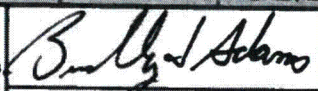
**MONITORING PERIOD**

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	1.2	1.4	( 19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		ONCE/MONTH	COMP-S
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1	0.2	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2	0.4	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	10	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

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

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

IL0048313  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

**MONITORING PERIOD**

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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	---	---	( 26)	---	---	---	( 19)		500	
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.011	0.064	( 03)	---	---	---	---	0	135	CN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	CONTIN
50050 1 0 0	SAMPLE MEASUREMENT										
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815 406-3700		10	10	19	
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)



**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

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

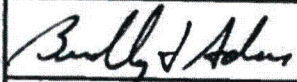
MONITORING PERIOD

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.36	0.57	( 26 )	-----	6.4	8.5	( 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	-----	-----	---	7.63	-----	7.77	( 12 )	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	<0.07	0.11	( 26 )	-----	<1.0	1.6	( 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
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.008	0.012	( 03 )	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 406-3700	10	10	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

- Flow existed through this outfall 26 of 30 days during the month.



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

OCR0501

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

IL0048313  
PERMIT NUMBER

C01 0  
DISCHARGE NUMBER

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

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

MONITORING PERIOD

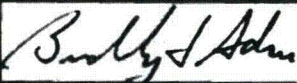
YEAR	MONTH	DAY	YEAR	MONTH	DAY
1 0 0 9 0 1			1 0 0 9 3 0		

From: To:

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	< 2.0	4.3	( 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) 01046 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) 01061 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			815 406-3700	10	10	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH DAY

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

- There was no discharge of processed steam generator chemical cleaning waste water during this month.
- Flow existed through this outfall 11 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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	-----	-----	( 19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	2.1	2.6	( 19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.024	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

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE

815 408-3700

AREA CODE NUMBER

DATE

10 10 19

YEAR MONTH DAY

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



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

OCR0501

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

IL0048313  
PERMIT NUMBER

D01 0  
DISCHARGE NUMBER

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

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
1	0	0	9	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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	< 0.4	< 0.5	( 19)	0	240	CP
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	< 1.8	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 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.023	( 03)	-----	-----	-----	-----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTR
	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	10	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED											

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

1. Flow existed through this outfall 7 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

IL0048513  
PERMIT NUMBER

E01 0  
DISCHARGE NUMBER

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

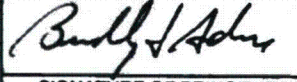
FACILITY Byron Nuclear Power Station  
LOCATION 4450 North German Church Road  
Byron, IL 61010

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		( 12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	5.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01046 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	10	10	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 4 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

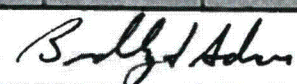
MAJOR  
(SUBR 01)  
F - FINAL  
STORMWATER (FORMER 001E)  
STORMWATER

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

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

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
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) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB	
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	2.6	2.8	( 19)	0	290	GRAB	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		TWICE/ MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.067	0.250	( 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.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Bradley J. Adams								815	406-3700	10	10	19
Plant Manager								AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED												
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)												



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

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

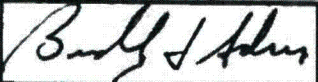
**MONITORING PERIOD**

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.54	-----	8.75	( 12)	0	240	GR
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	-----	0.017	( 19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	-----	0.039	( 19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MGL		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	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	21.96	30.96	( 03)	-----	-----	-----	---	0	135	CN
60060 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
EFFLUENT GROSS VALUE											
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	0.20	0.36	( 19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	-----	-----	( 19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MGL		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

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815 406-3700			10	10	19	
AREA CODE NUMBER			YEAR	MONTH	DAY	

**COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)**  
Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment

SEE ATTACHED  
EPA Form 3320-1 (Rev 3/99)



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

002 0  
DISCHARGE NUMBER

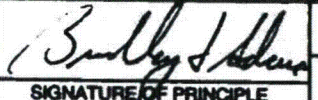
**MONITORING PERIOD**

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

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

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
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 )				
01046 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )				
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	10	19
Plant Manager								AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED												

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. 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

IL0048913  
PERMIT NUMBER

002 0  
DISCHARGE NUMBER

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

**MONITORING PERIOD**

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

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

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	-----	-----	( 19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	-----	-----	( 19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	-----	-----	( 19)			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

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 10 19  
YEAR MONTH DAY

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

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

**BLOWDOWN TEMPERATURE MONITORING:**

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
09/04/10	120	87.2
09/11/10	120	86.4
09/18/10	120	87.0
09/25/10	120	80.7

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

**HYDRAZINE MONITORING:**

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of September 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  
September 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 29 of 30 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
09/01/10	38	40	09/08/10	45	40
09/02/10	40	40	09/09/10	40	40
09/03/10	38	39	09/10/10	43	44
09/04/10	37	40	09/11/10	40	40
09/05/10	40	40	09/12/10	40	40
09/06/10	40	40			
09/07/10	40	40			

HALOGEN DOSING CURVE

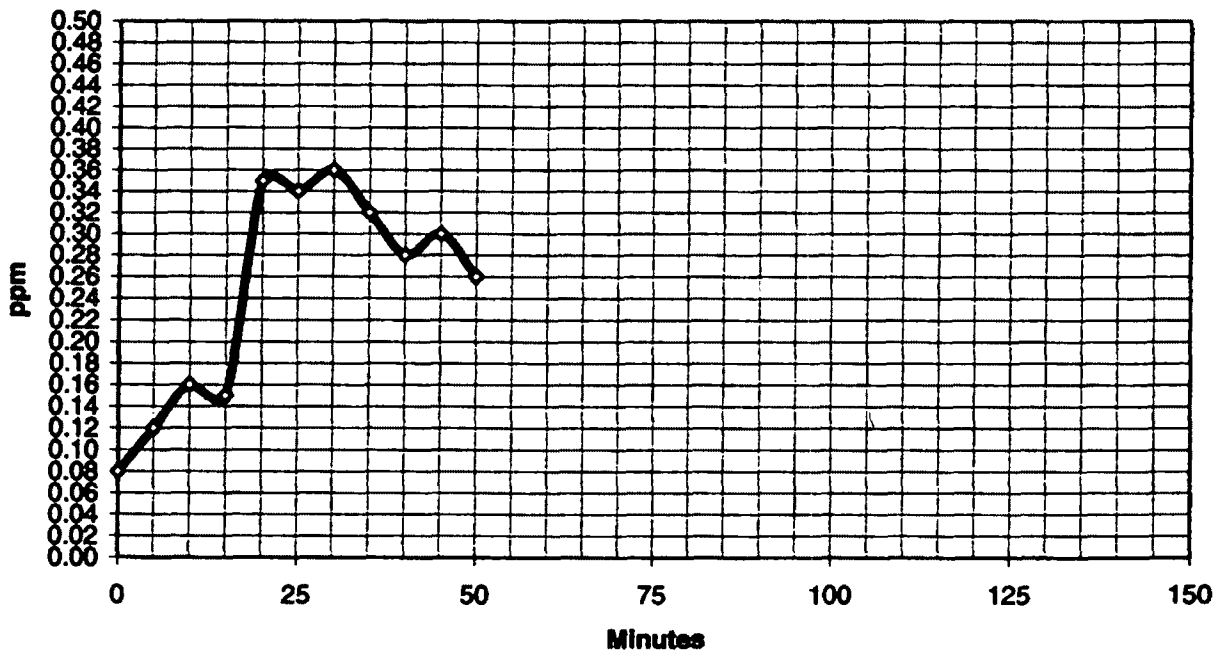
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 09/07/10  
Time: 11:00

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

Unit: 2

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



EXELON  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/13/10	30	30
09/14/10	30	30
09/15/10	31	30
09/16/10	30	31
09/17/10	38	40
09/18/10	30	30
09/19/10	30	30

HALOGEN DOSING CURVE

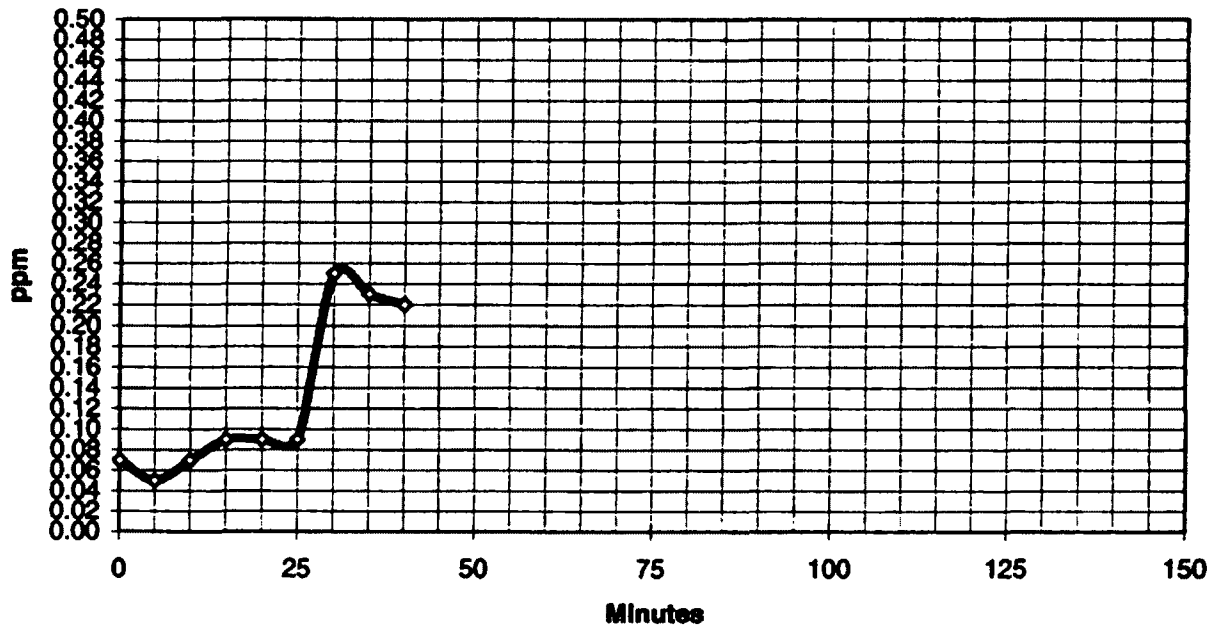
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 09/13/10  
Time: 11:57

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

Unit: 1

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



EXELON  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/20/10	34	33
09/21/10	32	32
09/22/10	35	32
09/23/10	34	35
09/24/10	32	32
09/25/10	32	33
09/26/10	35	35

HALOGEN DOSING CURVE

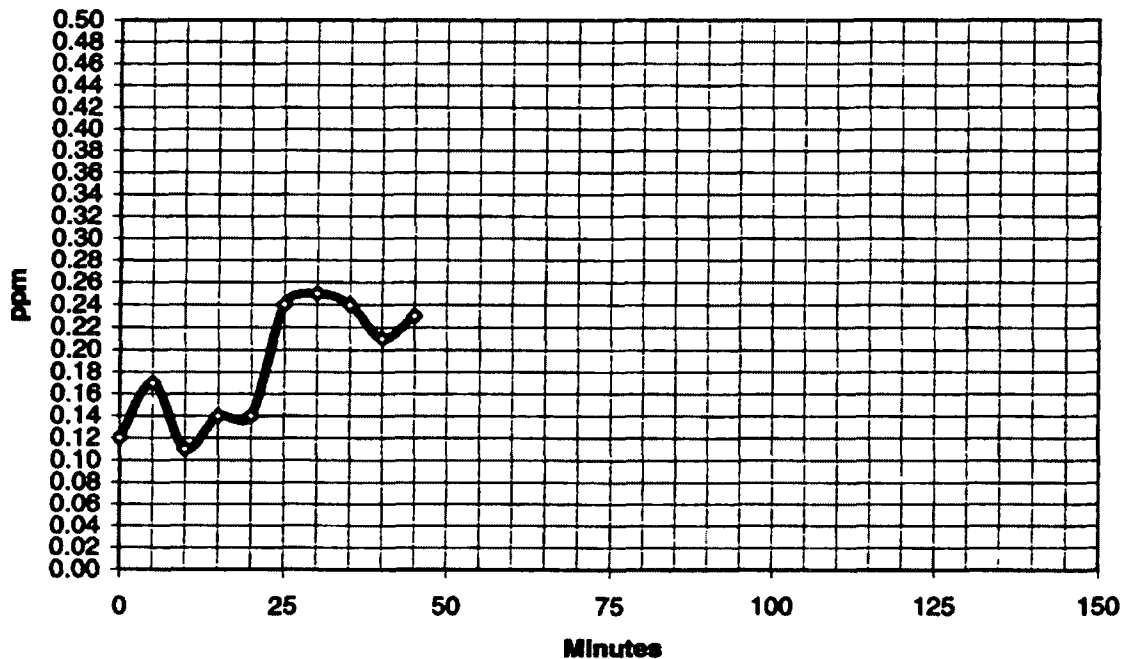
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 09/20/10  
Time: 12:58

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

Unit: 2

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



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

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
09/27/10	33	34
09/28/10	35	32
09/29/10	30	30
09/30/10	32	33

**HALOGEN DOSING CURVE**

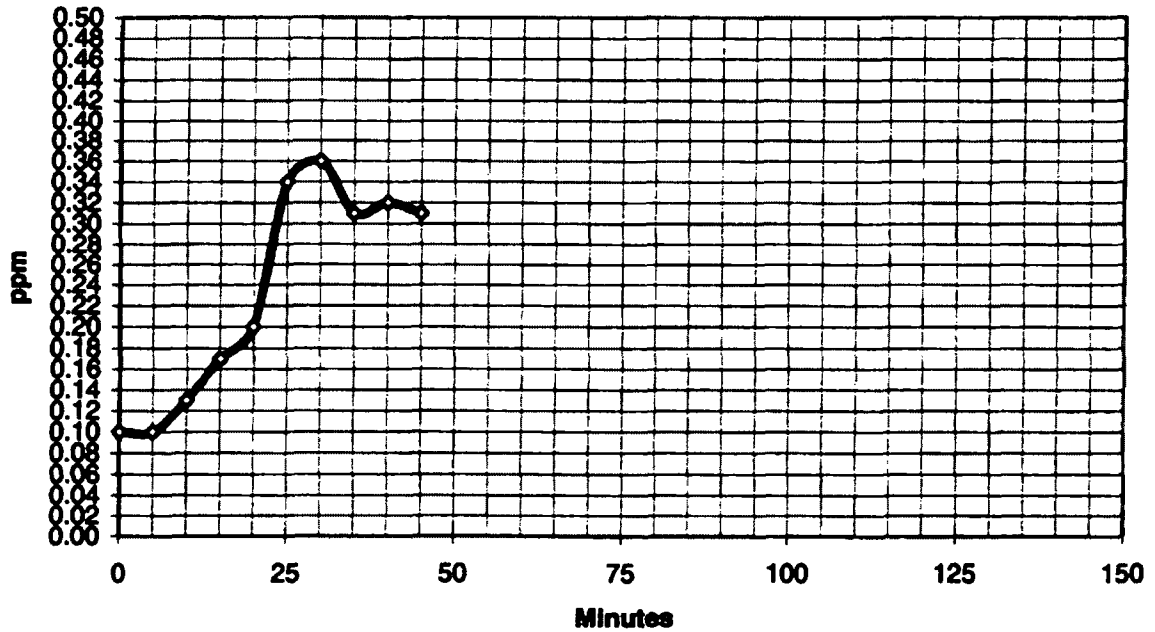
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 09/28/10  
Time: 11:57

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

Unit: 1

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



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

www.exeloncorp.com

*Joe*  
**Exelon<sup>SM</sup>**  
Nuclear

November 15, 2010

LTR: BYRON 2010-0133  
File: 2.09.0411  
1.10.0101

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

**Subject: Byron Station Monthly Discharge Monitoring Report**

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

BJA/ZC/sdk

Attachments



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

**MAJOR**

(SUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)

EFFLUENT

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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	( 26)	---	5.1	5.8	( 19)	0	285	EC
00630 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	39.0 DAILY MAX	MGL		ONCE/MONTH	COMP-8
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
01032 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MGL		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	MGL		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	MGL		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	MGL		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	MGL		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	MGL		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		
Bradley J. Adams		815	406-3700	10	11	15
Plant Manager		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 28 of 31 days during this month.



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

MAJOR  
(SUBR 01)

F - FINAL

DEMINEALIZER REGENERATE (001A)  
EFFLUENT

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

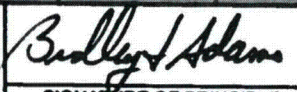
MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
1	0		1	0		0	1		1	0	

From: To:

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----			( 19)		500	
	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.012	0.073	( 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	DATE		
Bradley J. Adams			815 408-3700	10	11	15
Plant Manager			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)**

OCR0601

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

B01 0  
DISCHARGE NUMBER

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

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

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

\*\*\* 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	< 0.32	0.53	( 26)	—	< 8.0	16.0	( 19)	0	280	DC										
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	—	30.0 30 DAY AVG	60.0 DAILY MAX	MGL		TWICE/MONTH	COMP24										
PH	SAMPLE MEASUREMENT	—	—	—	7.51	—	7.52	( 12)	0	280	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	0.09	0.12	( 26)	—	1.9	2.4	( 19)	0	280	DC										
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	—	30.0 30 DAY AVG	60.0 DAILY MAX	MGL		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	11	15											
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**

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

... 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)	---	3.4	5.0	( 19)	0	240	DC
00630 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	39.0 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	
01046 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
01061 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
01067 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	10	11	15
Plant Manager			AREA	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED			CODE				

**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 11 of 31 days during the month.



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

OCR0601

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

C01 0  
DISCHARGE NUMBER

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

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 03682 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	2.8	4.1	( 19)	0	240	GR										
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB										
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.036	( 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						815 408-3700	10	11	15												
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY											
TYPED OR PRINTED																					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																					



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

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	1 0	0 1	1 0	1 0	3 1

From: To:

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	< 0.3	< 0.5	( 19)	0	240	CP
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	< 1.4	< 1.4	( 19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60080 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.023	( 03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE  
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams  
Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPLE  
EXECUTIVE OFFICER OR  
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA  
CODE

10

NUMBER

DATE

11

YEAR

15

MONTH

DAY

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

1. Flow existed through this outfall 4 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 4460 North German Church Road  
Byron, IL 61010

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

... 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	---	9.9 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )		500	
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	10	11	15
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY

*Bradley J. Adams*  
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 7 of 31 days during the month.



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

E01 0  
DISCHARGE NUMBER

MAJOR  
(SUBR 01)

F - FINAL

STORMWATER (FORMER 001E)  
STORMWATER

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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
EFFLUENT GROSS VALUE	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	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0	SAMPLE MEASUREMENT	---	---	( 26)	---	2.1	2.8	( 19)	0	290	GRAB
EFFLUENT GROSS VALUE	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	SAMPLE MEASUREMENT	0.183	0.600	( 03)	---	---	---	---	0	290	TM
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE  
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams  
Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPLE  
EXECUTIVE OFFICER OR  
AUTHORIZED AGENT

TELEPHONE  
815 408-3700

DATE  
10 11 15

AREA CODE NUMBER YEAR MONTH DAY

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



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

001 0  
DISCHARGE NUMBER

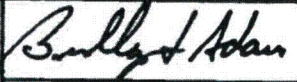
MAJOR  
(SUBR 01)  
F - FINAL  
COOLING SYSTEM BLOWDOWN  
EFFLUENT

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.53	-----	8.79	( 12 )	0	240	GR
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----	-----	0.009	( 19 )	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----	-----	0.012	( 19 )	0	240	GR
01082 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MGL		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	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	21.43	28.38	( 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 )	-----	0.12	0.32	( 19 )	0	240	GR
50080 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 20 DAY AVG	0.5 DAILY MAX	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----	-----	-----	( 19 )		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MGL		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	10	11	15
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

SEE ATTACHED

EPA Form 3320-1 (Rev 3/89)



**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

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 1 0 0 1			To: 1 0 1 0 3 1		

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	---	---	---	---	---	---	( 12 )			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	---	6.0 MINIMUM	---	9.0 MAXIMUM	8U		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	( 28 )	---	---	---	( 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	---	---	( 28 )	---	---	---	( 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	---	---	( 28 )	---	---	---	( 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	---	---	( 28 )	---	---	---	( 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	---	---	( 28 )	---	---	---	( 19 )			
01046 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	( 28 )	---	---	---	( 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 11 15  
YEAR MONTH DAY

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

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



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

**IL0048313**  
**PERMIT NUMBER**

**002 0**  
**DISCHARGE NUMBER**

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

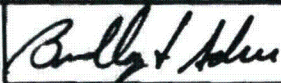
**MAJOR**  
(SUBR 01)  
**F - FINAL**  
**STORMWATER RUNOFF BASIN OVERFLOW**  
**STORMWATER**

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	---	---	( 19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	---	---	( 19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
OIL AND GREASE 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	MGL		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  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.	 <b>SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>	TELEPHONE		DATE		
			815	406-3700	10	11	15
			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

**BLOWDOWN TEMPERATURE MONITORING:**

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
10/02/10	120	79.0
10/09/10	120	90.8
10/16/10	120	81.3
10/23/10	120	81.0
10/30/10	120	77.0

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

**HYDRAZINE MONITORING:**

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of October 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  
October 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
10/01/10	33	32
10/02/10	35	33
10/03/10	35	33
10/04/10	30	30
10/05/10	30	30
10/06/10	30	30
10/07/10	30	30
10/08/10	33	31
10/09/10	30	30
10/10/10	30	30

HALOGEN DOSING CURVE

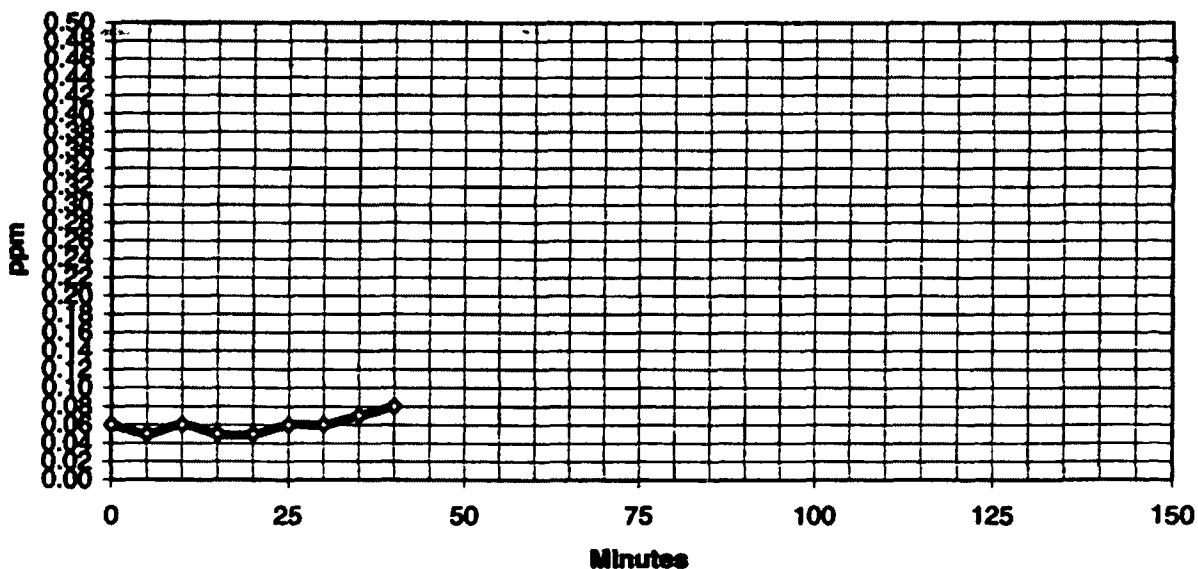
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

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

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
10/11/10	30	30
10/12/10	30	30
10/13/10	30	30
10/14/10	30	30
10/15/10	29	27
10/16/10	30	29
10/17/10	30	30

HALOGEN DOSING CURVE

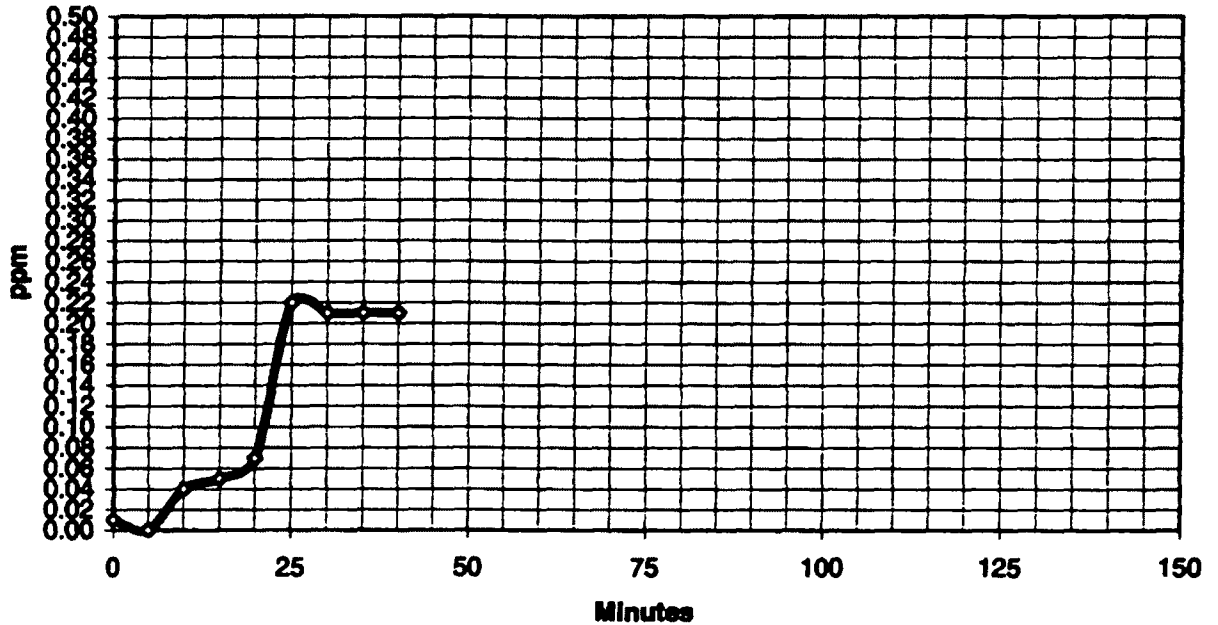
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 10/11/10  
Time: 12:08

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

Unit: 1

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



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

Date	Dosing Time (Minutes)	
	U-1	U-2
10/18/10	30	30
10/19/10	30	30
10/20/10	30	30
10/21/10	34	30
10/22/10	30	30
10/23/10	30	30
10/24/10	30	30

**HALOGEN DOSING CURVE**

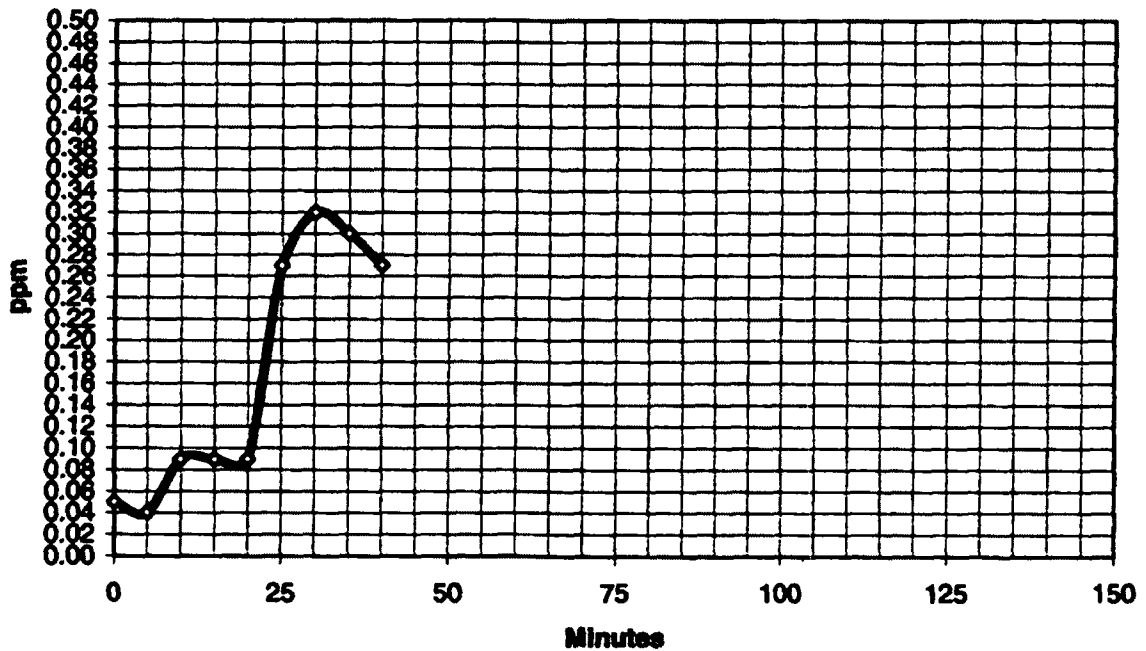
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 10/18/10  
Time: 13:51

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
10/25/10	25	25
10/26/10	25	25
10/27/10	25	25
10/28/10	25	25
10/29/10	25	25
10/30/10	25	25
10/31/10	25	25

HALOGEN DOSING CURVE

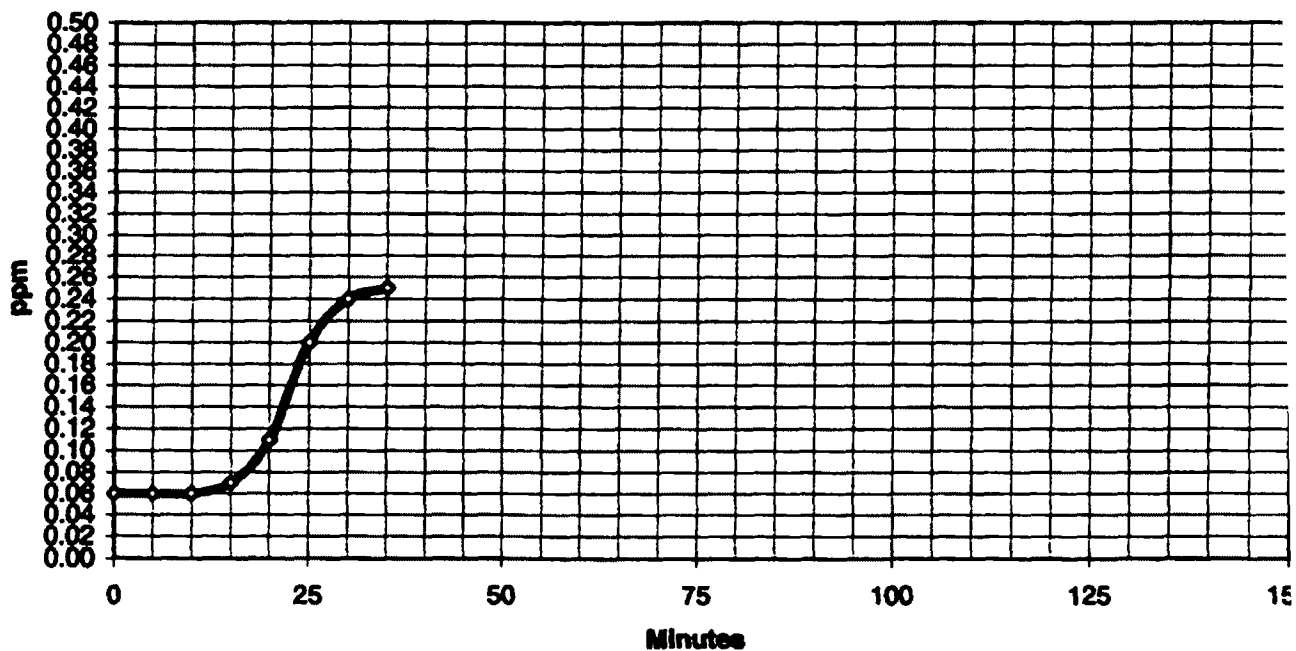
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 10/25/10  
Time: 12:05

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

Unit: 1

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



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

www.exeloncorp.com

December 13, 2010

LTR: BYRON 2010-0150  
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 ILO048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period of November 1, 2010 through November 30, 2010.

On 11/7/10 the Unit 1 Natural Draft Cooling Tower (NDCT) debris fence became blocked which caused a small overflow of cooling tower blowdown water to exit the NDCT basin and flow into the storm water ditch located on the east side of German Church Road. The water flowed North in the storm water ditch and entered Woodland Creek via stormwater Outfall 003, East Station Area Runoff. The estimated amount of cooling tower blowdown water that flowed through Outfall 003 was determined to be approximately 375 gallons. Analysis results of the overflow samples are summarized as follows:

pH  
8.82

Copper (mg/L)  
0.010

Zinc (mg/L)  
0.039

December 13, 2010  
Illinois Environmental Protection Agency  
Page 2

Byron Station Operators took immediate measures to lower the cooling tower blowdown water level in the basin of the NDCT to stop the overflow condition and additional actions were taken to remove the cause of the debris fence blockage.

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

Respectfully,



Bradley J. Adams  
Plant Manager  
Byron Nuclear Generating Station

BJA/ZC/sdk

Attachments

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

OCR0601

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

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

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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	6.8	6.8	( 19)	0	285	EC
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-8
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---			( 19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 12 13			
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 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

IL0048913  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

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

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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 28)	-----	-----	-----	( 18)		500	
	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.013	0.079	( 03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams						815 406-3700		10	12	13	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											



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

OCR0501

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

IL0048313  
PERMIT NUMBER

B01 0  
DISCHARGE NUMBER

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

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

**MONITORING PERIOD**

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	1	0	1		1	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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.08	< 0.1	( 26 )	-----	< 2.0	< 2.0	( 19 )	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	39.0 30 DAY AVG	69.0 DAILY MAX	MGL		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.23	-----	7.36	( 12 )	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	8.0 MAXIMUM	8U		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.03	0.04	( 26 )	-----	< 0.6	0.7	( 19 )	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	39.0 30 DAY AVG	69.0 DAILY MAX	MGL		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.004	0.009	( 03 )	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 408-3700		10	12	13	
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 27 of 30 days during the month.



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

C01 0  
DISCHARGE NUMBER

**MONITORING PERIOD**

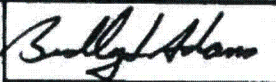
From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	1	0	1		1	0	1

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	( 25 )	---	2.0	4.4	( 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	---	---	( 25 )	---			( 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	---	---	( 25 )	---			( 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	---	---	( 25 )	---			( 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	---	---	( 25 )	---			( 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	---	---	( 25 )	---			( 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	---	---	( 25 )	---			( 19 )		500	
01067 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

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Bradley J. Adams			815	406-3700	10	12	13
Plant Manager			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 6 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			To:			
From:	1	0	1	1	0	1	1	0	1	1	3	0

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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)	---	4.0	4.7	( 19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.036	( 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 12 13			
Plant Manager								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

IL0046313  
PERMIT NUMBER

D01 0  
DISCHARGE NUMBER

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

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

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

\*\*\*NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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-DAY AVG	30.0 DAILY MAX	MGL		WEEKLY	COMPOS
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	---	---	( 26 )	---	< 1.4	< 1.4	( 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	0.023	0.023	( 03 )	---	---	---	---	0	135	CN
50060 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										
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	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	12	13	
Bradley J. Adams											
Plant Manager	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 4 of 30 days during the month.											



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

OCR0601

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

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

IL0048313  
PERMIT NUMBER

E01 0  
DISCHARGE NUMBER

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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

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

SIGNATURE OF PRINCIPLE  
EXECUTIVE OFFICER OR  
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA CODE

DATE

10 12 13

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 3 of 30 days during the month.



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

OCR0601

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

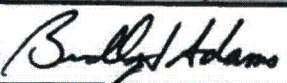
E01 0  
DISCHARGE NUMBER

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

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
NICKEL, TOTAL (AS NI) 01087 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)	---	2.0	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	0.002	0.200	( 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.				 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE				
Bradley J. Adams							815	406-3700	10	12	13		
Plant Manager							AREA CODE	NUMBER	YEAR	MONTH	DAY		
TYPED OR PRINTED													
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)													



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

001 0  
DISCHARGE NUMBER

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

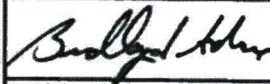
**MONITORING PERIOD**

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

MAJOR  
(SUFR 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	---	---	---	8.60	---	8.78	( 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 )	---	---	0.014	( 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 )	---	---	0.011	( 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	22.34	31.18	( 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 )	---	0.09	0.23	( 19 )	0	240	GR	
50060 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB	
HYDRAZINE	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )		500		
81313 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	---	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Bradley J. Adams								815	406-3700	10	12	13
Plant Manager								AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED												

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

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

SEE ATTACHED

EPA Form 3320-1 (Rev 3/99)



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

002 0  
DISCHARGE NUMBER

MAJOR  
(SUBR 01)  
F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW  
STORMWATER

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

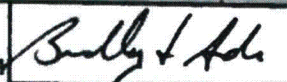
**MONITORING PERIOD**

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

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	---	---	---	---	---	---	( 12 )			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	---	6.0 MINIMUM	---	8.0 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	39.0 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	1.8 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )			
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 406-3700	10	12	13
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH

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

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



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

002 0  
DISCHARGE NUMBER

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 1 1 0 1	To: 1 0 1 1 3 0				

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	---	---	( 19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	---	---	( 19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	---	---	( 19)			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	12	13	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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



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

**BLOWDOWN TEMPERATURE MONITORING:**

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
11/06/10	120	66.3
11/13/10	120	75.9
11/20/10	120	68.7
11/27/10	120	64.4

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

**HYDRAZINE MONITORING:**

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of November 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  
November 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 29 of 30 days.



EXELON  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
11/01/10	25	25
11/02/10	25	25
11/03/10	25	25
11/04/10	25	25
11/05/10	25	25
11/06/10	25	25
11/07/10	0	0

HALOGEN DOSING CURVE

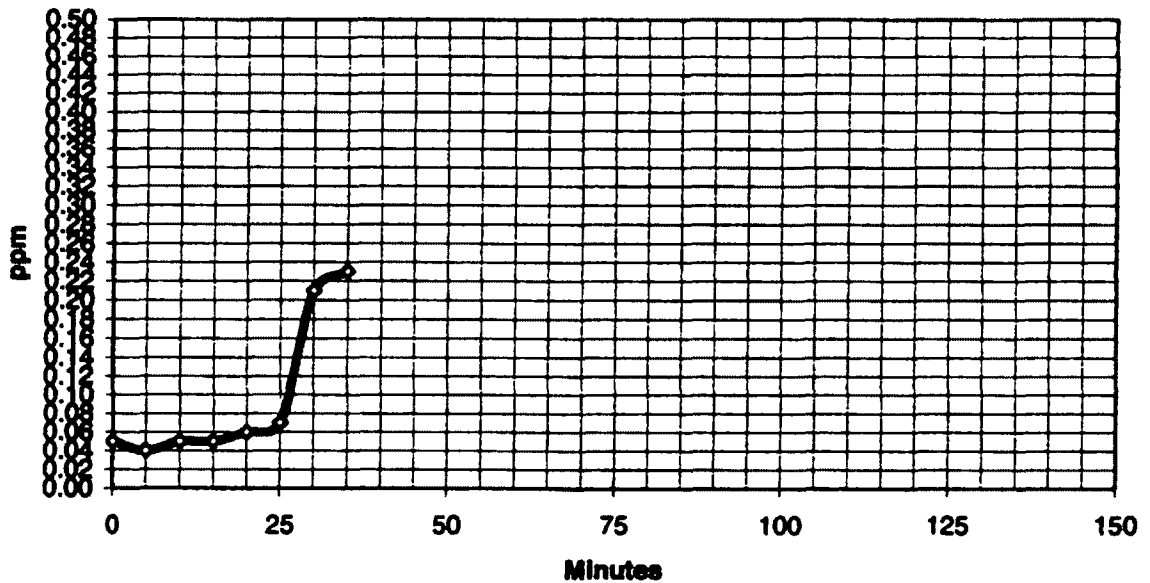
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 11/02/10  
Time: 12:27

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
11/08/10	25	25
11/09/10	25	25
11/10/10	25	25
11/11/10	25	25
11/12/10	26	26
11/13/10	25	25
11/14/10	25	25

HALOGEN DOSING CURVE

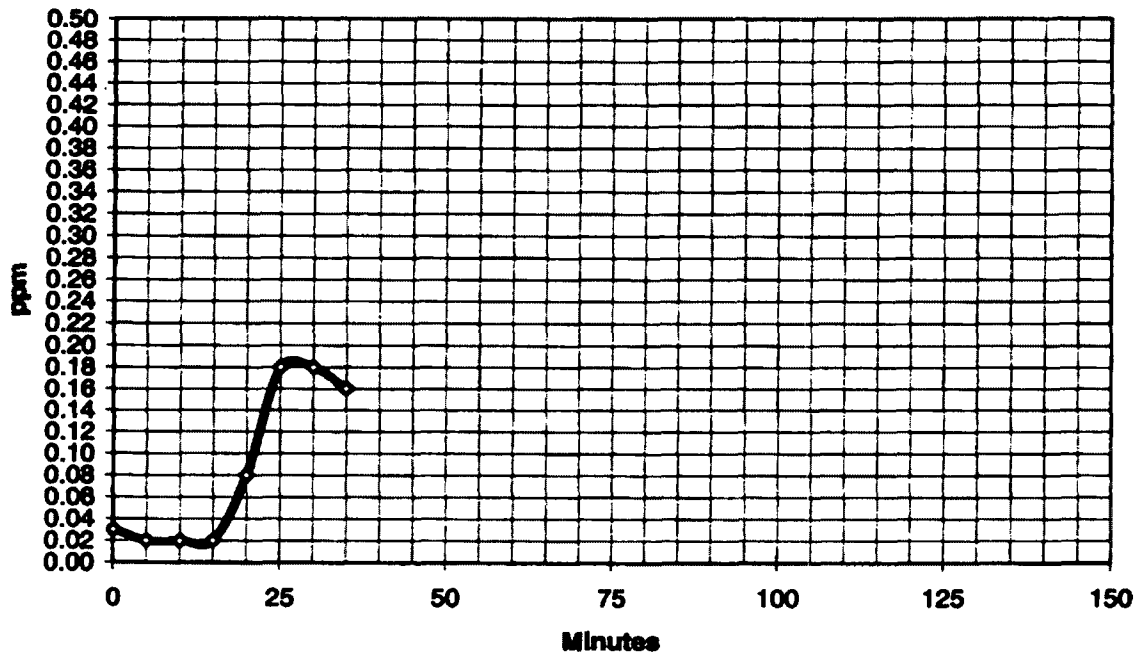
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 11/08/10  
Time: 11:14

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**

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
11/15/10	19	23
11/16/10	19	19
11/17/10	21	22
11/18/10	20	20
11/19/10	22	19
11/20/10	20	17
11/21/10	19	20

**HALOGEN DOSING CURVE**

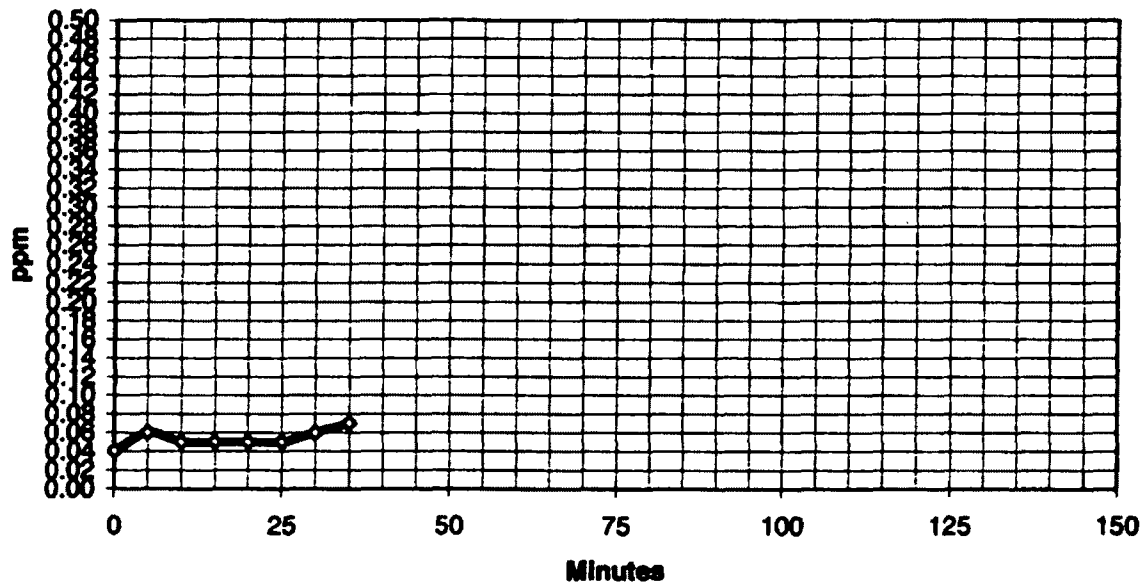
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 11/17/10  
Time: 12:17

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

Unit: 2

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



EXELON  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
11/22/10	20	20
11/23/10	20	21
11/24/10	21	20
11/25/10	21	20
11/26/10	21	20
11/27/10	20	20
11/28/10	20	19

HALOGEN DOSING CURVE

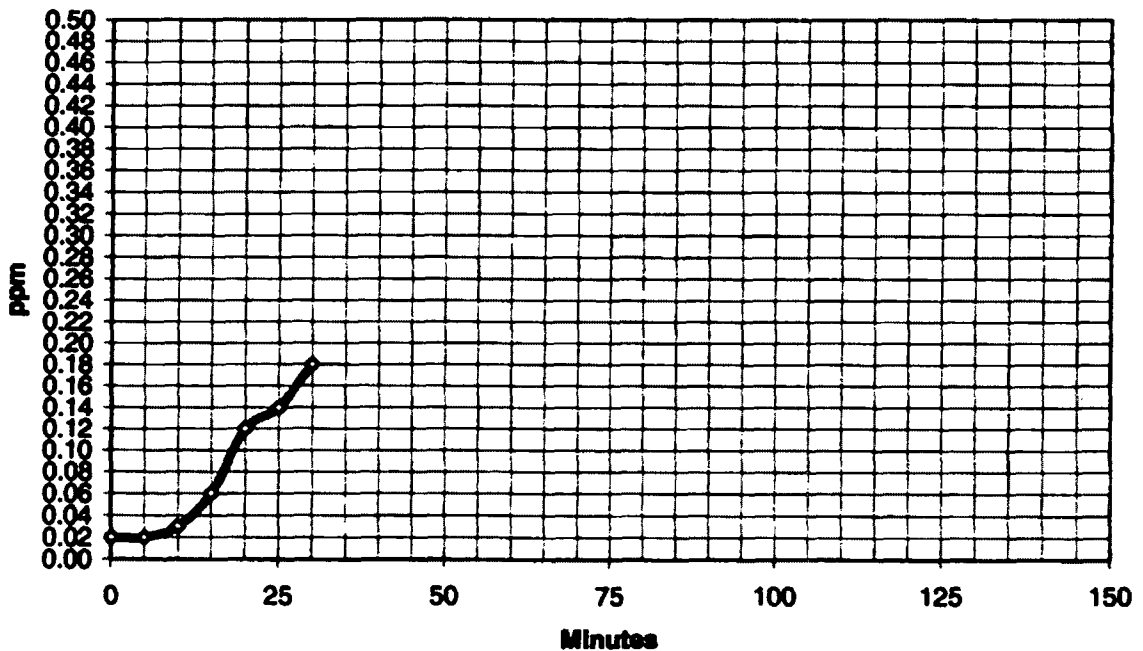
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 11/22/10  
Time: 11:34

Analyzed by: D. B.  
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
11/29/10	19	19
11/30/10	18	18

HALOGEN DOSING CURVE

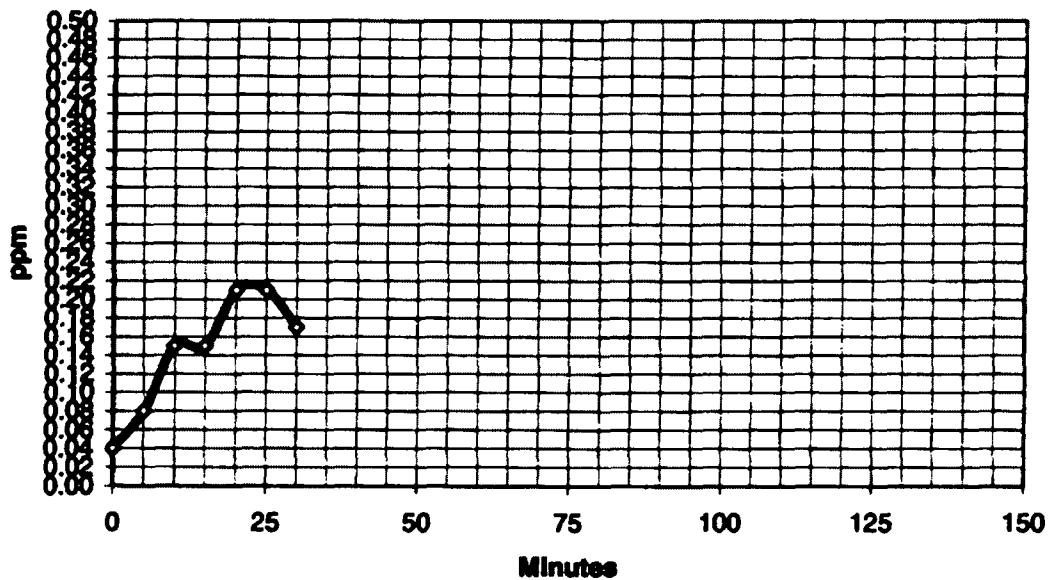
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 11/29/10  
Time: 11:12

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

Unit: 2

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



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

www.exeloncorp.com

*Joe*  
**Exelon**<sup>SM</sup>  
Nuclear

January 14, 2011

LTR: BYRON 2011-0009  
File: 2.09.0411  
1.10.0101

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

**Subject: Byron Station Monthly Discharge Monitoring Report**

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

Special Condition 5 of the NPDES permit requires the station to weigh the copper anodes at the end of the zebra mussel control season and to include the total mass of copper used in the discharge monitoring report. The zebra mussel copper ion skids were shutdown on December 1, 2010. The anodes of the 0A copper ion skid were removed and weighed on December 27, 2010. The anodes of the 0B copper ion skid were removed and weighed on December 27, 2010. The total mass of copper used for zebra mussel control was 221 pounds.

On December 1, 2010 the Unit 1 Natural Draft Cooling Tower (NDCT) debris fence became blocked which caused an overflow of cooling tower blowdown water to exit the NDCT basin and flow into the storm water ditch located on the east side of German Church Road. The water flowed North in the storm water ditch and entered Woodland Creek via storm water Outfall 003, East Station Area Runoff. The estimated amount of cooling tower blowdown water that flowed through Outfall 003 was determined to be approximately 25,000 gallons.



On December 12, 2010 Unit 1 NDCT debris fence blockage coupled with high winds blowing from the East caused an overflow of the cooling tower blowdown water following the same flow path to Woodland Creek as described above. The estimated amount of cooling tower blowdown water that flowed through Outfall 003 was determined to be approximately 80,000 gallons. Analysis of the overflow sample determined a zinc concentration of 0.0283 mg/L.

During both events, Byron Station Operators took immediate measures to lower the cooling tower blowdown water level in the basin of the NDCT to stop the overflow condition and additional actions were taken to remove the cause of the debris fence blockage. To prevent future debris fence blockage Byron Station has a repair plan scheduled for March 2011. If there are any questions regarding this report, please contact Mr. Stanley Kerr, Chemistry Manager, at (815) 406-3200.

Respectfully,



Bradley J. Adams  
Plant Manager  
Byron Nuclear Generating Station

BJA/ZC/sdk

Attachments

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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

MAJOR  
(SUBR 01)

F - FINAL

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	1	2	0	1	To:	1	0	1	2	3	1				

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	—	—	( 26 )	—	< 1.7	< 2.0	( 19 )	0	285	EC
00630 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0 30 DAY AVG	30.0 DAILY MAX	MGL		ONCE/MONTH	COMP-6
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
CHROMIUM, HEXAVALENT (AS CR)	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.1 30 DAY AVG	0.2 DAILY MAX	MGL		DAILY	GRAB
01032 1 0 0	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
01034 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.5 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
COPPER, TOTAL (AS CU)	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB
01042 1 0 0	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.2 30 DAY AVG	0.4 DAILY MAX	MGL		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
01046 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
LEAD, TOTAL (AS PB)	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.2 30 DAY AVG	0.4 DAILY MAX	MGL		DAILY	GRAB
01051 1 0 0	SAMPLE MEASUREMENT	—	—	( 26 )	—			( 19 )		500	
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		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	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.		TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	11	01	14
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 27 of 31 days during this month.



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

IL0048313  
PERMIT NUMBER

A01 0  
DISCHARGE NUMBER

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

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	1	2	0	1	To:	1	0	1	2	3	1				

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26)	---	---	---	( 19)		500	
	PERMIT REQUIREMENT			LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.010	0.074	( 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		DATE	
Bradley J. Adams						815 406-3700		11	01	14	
Plant Manager											
TYPED OR PRINTED						AREA CODE	NUMBER	YEAR	MONTH	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

**IL0048313**  
**PERMIT NUMBER**

**B01 0**  
**DISCHARGE NUMBER**

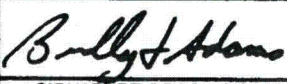
**MAJOR**  
(SUBR 01)  
**F - FINAL**  
**STP EFFLUENT (FORMER 001B)**  
**EFFLUENT**

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	1	0	1	2	0	1	To:	1	0	1	2

\*\*\* 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	< 0.48	0.88	( 26)	-----	< 8.5	15.0	( 19)	0	280	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	26.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MGL		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.52	-----	7.54	( 12)	0	280	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	8U		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.03	0.02	( 26)	-----	< 0.5	0.5	( 19)	0	280	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	26.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MGL		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.005	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										
<b>NAME/TITLE</b> 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.					 <b>SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT</b>		<b>TELEPHONE</b> 815 406-3700 <b>AREA CODE NUMBER</b>		<b>DATE</b> 11 01 14 <b>YEAR MONTH DAY</b>	
Bradley J. Adams											
Plant Manager											
TYPED OR PRINTED											

**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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
1	0	1	2	0	1	1	0	1	2	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			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----	4.2	6.5	( 19 )	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	36.0 DAILY MAX	MGL		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----			( 19 )		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MGL		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----			( 19 )		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----			( 19 )		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB
IRON, TOTAL (AS FE) 01046 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----			( 19 )		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26 )	-----			( 19 )		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MGL		DAILY	GRAB
NICKEL, TOTAL (AS NI) 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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams						
Plant Manager		815	406-3700	11	01	14
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 8 of 31 days during the month.



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

**IL0046313**  
**PERMIT NUMBER**

**C01 0**  
**DISCHARGE NUMBER**

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

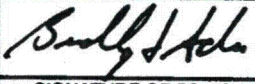
**FACILITY** Byron Nuclear Power Station  
**LOCATION** 4450 North German Church Road  
Byron, IL 61010

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	1	0	1	2	0	1	To:	1	0	1	2

... 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	---	---	( 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)	---	< 3.9	7.0	( 19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.021	0.038	( 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										

<b>NAME/TITLE</b> 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	<b>TELEPHONE</b> 815 406-3700		<b>DATE</b> 11 01 14		
			<b>AREA CODE</b>	<b>NUMBER</b>	<b>YEAR</b>	<b>MONTH</b>	<b>DAY</b>

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

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 1	0	1	2	0	1	To: 1	0	1	2	3	1

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	< 0.4	0.8	( 19)	0	240	CP
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MGL		WEEKLY	COMPOS
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	( 26)	-----	< 1.4	< 1.4	( 19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.023	( 03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE  
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams  
Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE

815 406-3700  
AREA CODE NUMBER

DATE

11 01 14  
YEAR MONTH DAY

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

1. Flow existed through this outfall 5 of 31 days during the month.



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

E01 0  
DISCHARGE NUMBER

MONITORING PERIOD													
YEAR			MONTH			DAY							
From:	1	0	1	2	0	1	To:	1	0	1	2	3	1

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	---	---	---		---		( 12 )		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	---	6.0 MINIMUM	---	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	( 26 )	---			( 19 )		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	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	
01051 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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		11	01	14	
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 4 of 31 days during the month.



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

E01 0  
DISCHARGE NUMBER

MONITORING PERIOD													
YEAR		MONTH		DAY			YEAR		MONTH		DAY		
From:	1	0	1	2	0		1	To:	1	0	1	2	3

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			
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)	—	1.9	2.1	( 19)	0	280	GRAB
	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	0.088	0.347	( 03)	—	—	—	—	0	280	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	—	—	—	—		TWICE/MONTH	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE  
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams  
Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPLE  
EXECUTIVE OFFICER OR  
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA  
CODE

DATE

11 01 14

YEAR MONTH DAY

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



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

001 0  
DISCHARGE NUMBER

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 1	0	1	2	0	1	To: 1	0	1	2	3	1

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

\*\*\* NO DISCHARGE ☐ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH					8.62		8.67	( 12 )	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE					6.0 MINIMUM		9.0 MAXIMUM	8U		WEEKLY	GRAB
COPPER, TOTAL (AS CU)				( 26 )				( 19 )		500	
01042 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			0.071 DAILY MAX	MG/L		WEEKLY	GRAB
ZINC, TOTAL (AS ZN)				( 26 )			0.01	( 19 )	0	240	GR
01082 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL				( 26 )				( 19 )		500	
34044 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT		22.61	31.11	( 03 )					0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE		REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL				( 26 )		0.09	0.30	( 19 )	0	240	GR
50060 1 0 0 EFFLUENT GROSS VALUE				LBS/DY		0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
HYDRAZINE				( 26 )				( 19 )		500	
81313 1 0 0 EFFLUENT GROSS VALUE				LBS/DY			0.051 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	11	01	14	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment											
SEE ATTACHED											
EPA Form 3320-1 (Rev 3/90)											



**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

002 0  
DISCHARGE NUMBER

**MONITORING PERIOD**

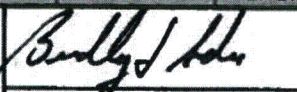
YEAR	MONTH	DAY	YEAR	MONTH	DAY
1 0	1 2	0 1	To: 1 0	1 2	3 1

From:

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

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	---	---	---	---	---	---	( 12 )			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	---	8.0 MINIMUM	---	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	( 26 )	---	---	---	( 19 )			
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 )			
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 )			
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 )			
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 )			
01046 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 )			
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 815 406-3700		DATE 11 01 14	
Bradley J. Adams 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. This discharge point was not used this month.											



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

OCR0501

**PERMITTEE NAME/ADDRESS**

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

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

IL0048313  
PERMIT NUMBER

002 0  
DISCHARGE NUMBER

**MONITORING PERIOD**

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 1 0	1 2	0 1	To: 1 0	1 2	3 1

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

\*\*\* NO DISCHARGE ☒ \*\*\*

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	( 26 )	---			( 18 )			
	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 )	---			( 18 )			
	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 )	---			( 18 )			GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MGL		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			( 03 )	---	---	---	---			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 NUMBER

DATE

11 01 14

YEAR MONTH DAY

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



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

**BLOWDOWN TEMPERATURE MONITORING:**

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
12/04/10	120	65.9
12/11/10	120	70.1
12/18/10	120	70.5
12/25/10	120	68.3

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

**HYDRAZINE MONITORING:**

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of December 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  
December 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
12/01/10	20	20	12/08/10	20	20
12/02/10	22	21	12/09/10	20	20
12/03/10	20	20	12/10/10	20	20
12/04/10	20	20	12/11/10	20	20
12/05/10	20	20	12/12/10	20	20
12/06/10	18	17			
12/07/10	18	18			

**HALOGEN DOSING CURVE**

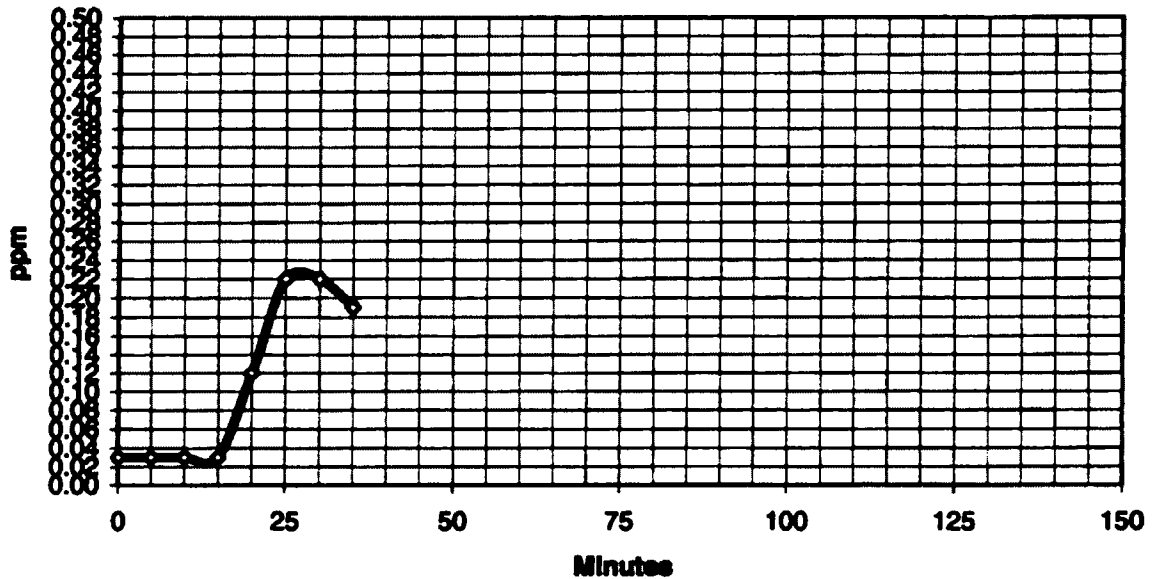
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 12/06/10  
Time: 13:20

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

Unit: 1

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



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

Date	Dosing Time (Minutes)	
	U-1	U-2
12/13/10	20	20
12/14/10	20	20
12/15/10	20	20
12/16/10	20	20
12/17/10	19	19
12/18/10	19	20
12/19/10	20	20

**HALOGEN DOSING CURVE**

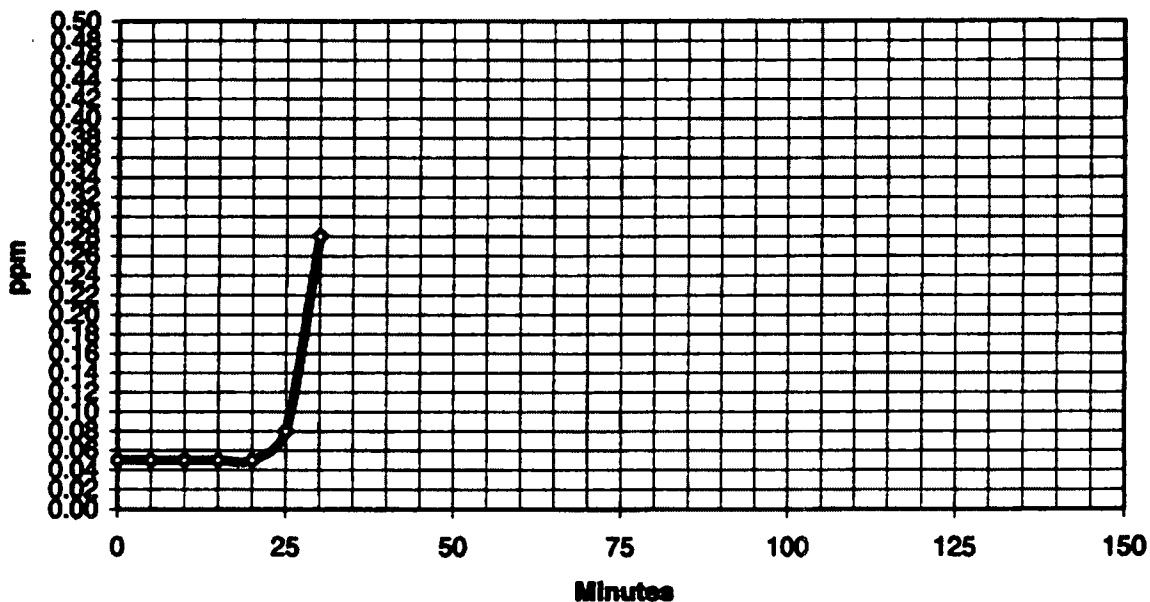
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 12/13/10  
Time: 10:55

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
12/20/10	18	19
12/21/10	18	18
12/22/10	20	20
12/23/10	20	20
12/24/10	20	18
12/25/10	19	18
12/26/10	19	19

**HALOGEN DOSING CURVE**

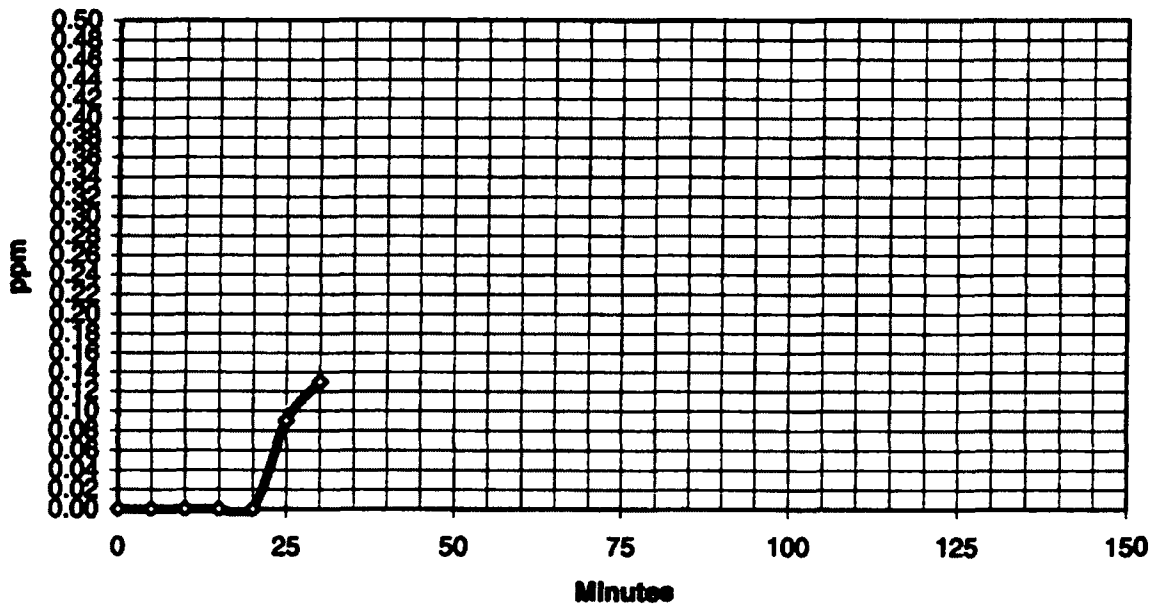
Concentration of total residual chlorine/halogen  
vs. minutes of chlorination period.

Date: 12/21/10  
Time: 10:18

Analyzed by: A.W.  
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  
BYRON STATION  
Permit IL0048313  
WEEKLY HALOGEN DOSING INFORMATION**

Date	Dosing Time (Minutes)	
	U-1	U-2
12/27/10	20	21
12/28/10	19	18
12/29/10	20	20
12/30/10	20	18
12/31/10	17	18

**HALOGEN DOSING CURVE**

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

Date: 12/27/10  
Time: 11:23

Analyzed by: J. D.  
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.

