

Byron Environmental Audit – Request for Additional Information Response

Question #: HH-1 **Category:** Human Health

Statement of Question:

Provide NPDES monthly discharge monitoring reports for the past five years.

Response:

The NPDES monthly discharge monitoring reports for all months of years 2008 through 2012 and January through July 2013 are provided.

List Attachments Provided:

1. NPDES monthly discharge monitoring reports for January 1, 2013 through July 31, 2013.
2. NPDES monthly discharge monitoring reports for January 1, 2012 through December 31, 2012
3. NPDES monthly discharge monitoring reports for January 1, 2011 through December 31, 2011
4. NPDES monthly discharge monitoring reports for January 1, 2010 through December 31, 2010
5. NPDES monthly discharge monitoring reports for January 1, 2009 through December 31, 2009
6. NPDES monthly discharge monitoring reports for January 1, 2008 through December 31, 2008

Exelon Generation
Byron Generating Station
4450 North German Church Road
Byron, IL 61010-9794
Tel 815-234-5441

www.exeloncorp.com

February 19, 2008

LTR: BYRON 2008-0013

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 January 1, 2008 through January 31, 2008

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

Respectfully,



David M. Hoots
Site Vice President
Byron Nuclear Generating Station

DMH/ZC/sdk

Attachments

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)


EFFLUENT

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---	2.3	2.3	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0	30.0	MG/L		ONCE/MONTH	COMP-B
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	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815	406-3600	08	02	19	
David M. Hoots						AREA	NUMBER	YEAR	MONTH	DAY	
Site Vice President	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. There was no discharge of processed steam generator chemical cleaning waste water during this month. 2. Flow existed 26 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	MONTH	DAY				
From: 0	8	0	1	0	1	To: 0	8	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			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY		1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.032	0.155	(03)	—	—	—	—	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD						DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815	406-3600	08	02	19	
David M. Hoots						AREA CODE	NUMBER	YEAR	MONTH	DAY	
Site Vice President	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

**MAJOR
(SUBR 01)**

F - FINAL

**STP EFFLUENT (FORMER 001B)
EFFLUENT**

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


MONITORING PERIOD									
YEAR			MONTH			DAY			
0	8		0	1		0	1		

From: To:

YEAR			MONTH			DAY			
0	8		0	1		3	1		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE																
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS																			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.50	0.66	(26)	—	5.1	6.6	(19)	0	290	DC																
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY		30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24																
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	—	7.41	—	7.62	(12)	0	290	GR																
	PERMIT REQUIREMENT			—	6.0 MINIMUM		9.0 MAXIMUM	SU		TWICE/MONTH	GRAB																
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.23	0.35	(26)	—	2.4	3.5	(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																
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	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																	
David M. Hoots								815	406-3600	08	02	19															
Site Vice President								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 31 of 31 days during the month.																											

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER


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

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0 8 0			0 1 0			1 0 1			To: 0 8 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 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	1.6	2.5	(19)	0	240	DC	
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24	
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500		
	PERMIT REQUIREMENT			LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB	
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500		
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500		
	PERMIT REQUIREMENT			LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500		
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500		
	PERMIT REQUIREMENT			LBS/DY		0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB	
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500		
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
David M. Hoots								815	406-3600	08	02	19
Site Vice President								AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED												

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 14 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER


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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE		
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS					
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500			
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB		
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	1.9	2.4	(19)	0	240	GR		
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.030	0.064	(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				
David M. Hoots							815	406-3600	08	02	19		
Site Vice President							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			
0	8		0	1		0	1		

From:


YEAR			MONTH			DAY			
0	8		0	1		3	1		

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	—	—	(26)	—	< 0.4	< 0.5	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT			LBS/DY		15.0	30.0	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE						30-DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	—	—	(26)	—	< 1.4	< 1.4	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT			LBS/DY		15.0	20.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30-DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.023	(03)	—	—	—	—	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD						DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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		
David M. Hoots			815	406-3600	08	02	19
Site Vice President			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 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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

**MAJOR
(SUBR 01)**

F - FINAL


**STORMWATER (FORMER 001E)
STORMWATER**

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	—	—	—	—	—	—	(12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			—	6.0 MINIMUM		9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
David M. Hoots								815 406-3600	08	02	19
Site Vice President								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. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 2 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	< 1.4	< 1.4	(19)	0	290	GR
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.011	0.012	(03)	---	---	---	---	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
David M. Hoots						815	406-3600	08	02	19	
Site Vice President						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0	8	0	To: 0	8	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	—	—	—	8.56	—	8.77	(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)	—	—	—	(19)		500		
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)	—	—	0.189	(19)	0	240	GR	
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY			1.0 DAILY MAX	MG/L		WEEKLY	GRAB	
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500		
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY			0.05 DAILY MAX	MG/L		WEEKLY	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	18.98	27.90	(03)	—	—	—	—	0	135	CN	
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						DAILY	CONTIN	
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	0.10	0.39	(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		
David M. Hoots								815	406-3600	08	02	19
Site Vice President								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												

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	---	---	---		---		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			---	6.0 MINIMUM		9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
David M. Hoots						815	406-3600	08	02	19	
Site Vice President						AREA CODE	NUMBER	YEAR	MONTH	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.											
2. This discharge point was not used this month.											

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)			
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)			
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)			
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	—	—	—	—			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
David M. Hoots						815	406-3600	08	02	19	
Site Vice President						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
January 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
01/05/08	120	71.7
01/12/08	120	65.7
01/19/08	120	56.7
01/26/08	120	71.9

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

HYDRAZINE MOITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharge to the Cooling System Blowdown during the month of January 2008.

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
January 2008

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
01/01/08	15	15	01/08/08	18	16
01/02/08	0	0	01/09/08	15	15
01/03/08	0	0	01/10/08	19	20
01/04/08	0	0	01/11/08	20	20
01/05/08	33	40	01/12/08	20	20
01/06/08	20	20	01/13/08	20	20
01/07/08	17	18			

HALOGEN DOSING CURVE

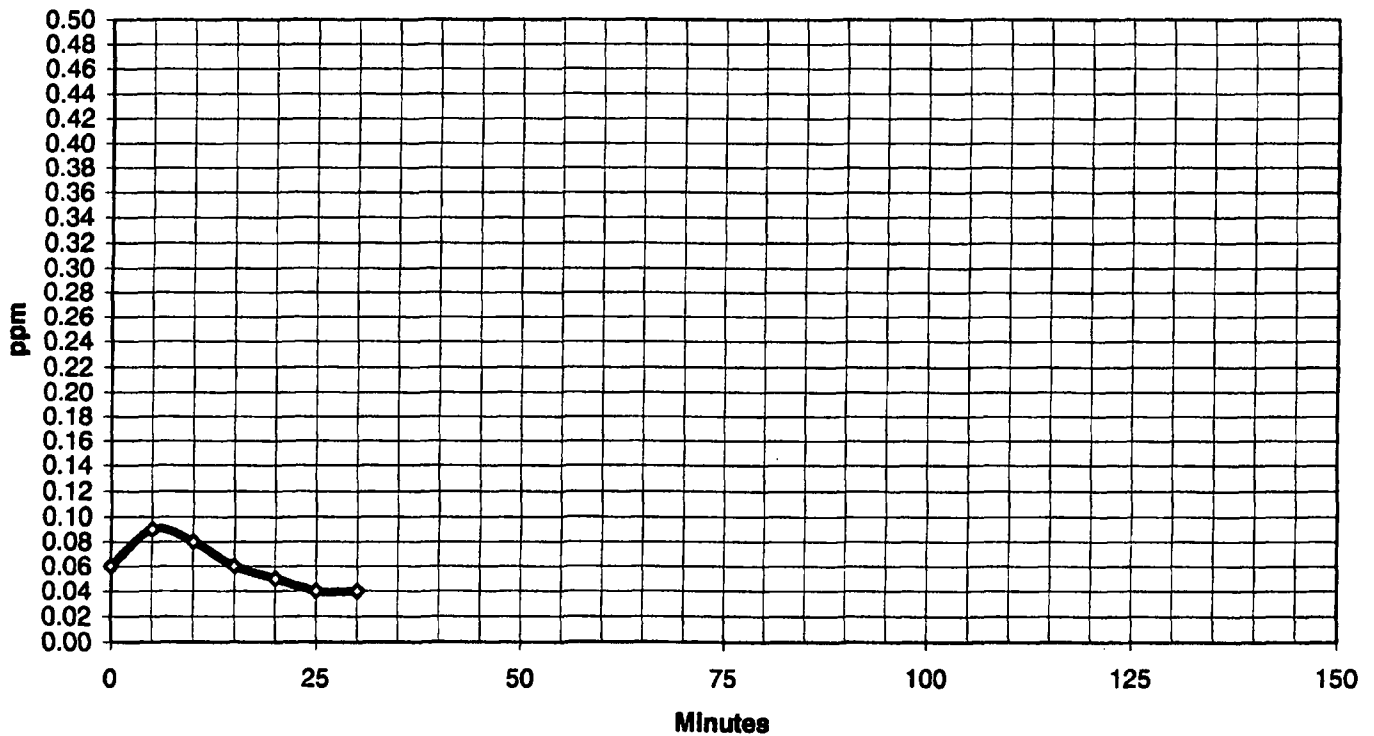
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/07/08
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.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
01/14/08	20	20
01/15/08	20	20
01/16/08	20	20
01/17/08	20	20
01/18/08	20	19
01/19/08	20	20
01/20/08	20	20

HALOGEN DOSING CURVE

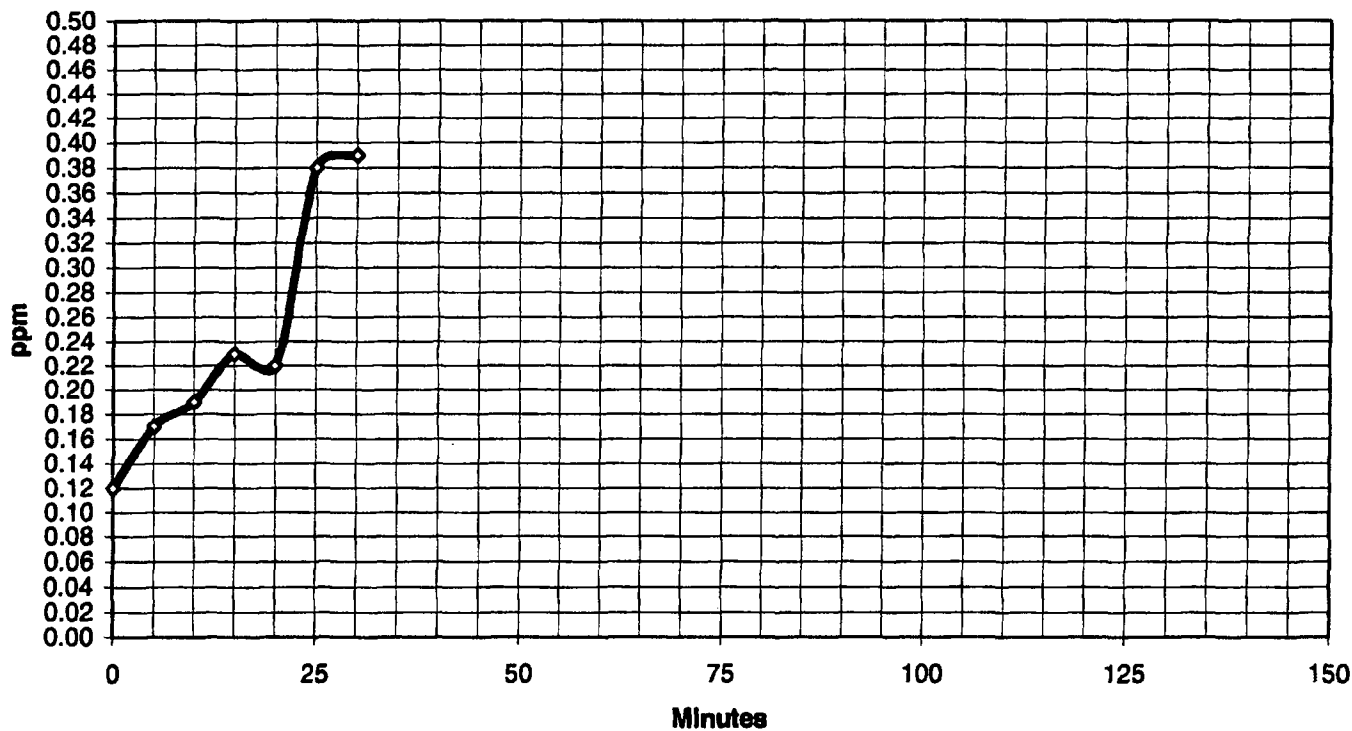
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/14/08
Time: 11:21

Analyzed by: T. B. 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
01/21/08	20	20
01/22/08	20	21
01/23/08	20	20
01/24/08	20	20
01/25/08	18	19
01/26/08	20	21
01/27/08	20	20

HALOGEN DOSING CURVE

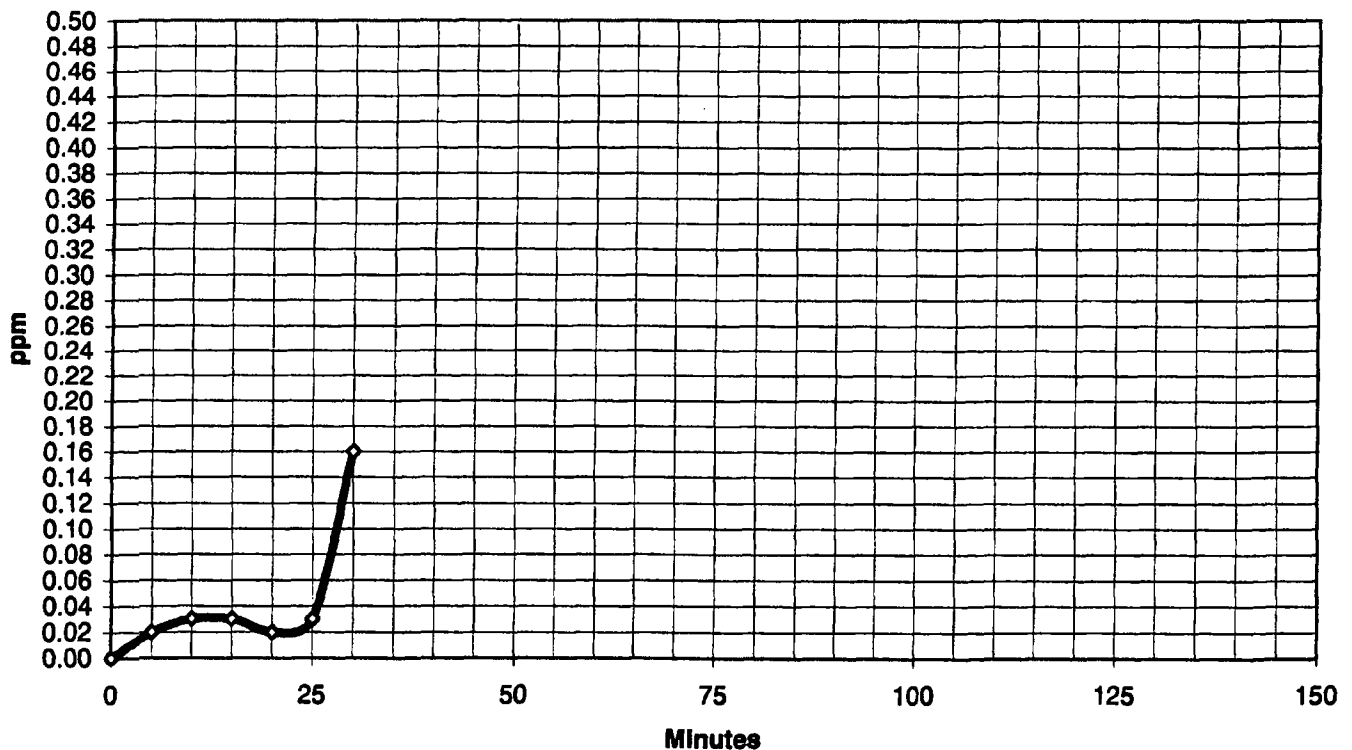
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/22/08
Time: 10:29

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>
01/28/08	20	20
01/29/08	20	20
01/30/08	20	20
01/31/08	20	20

HALOGEN DOSING CURVE

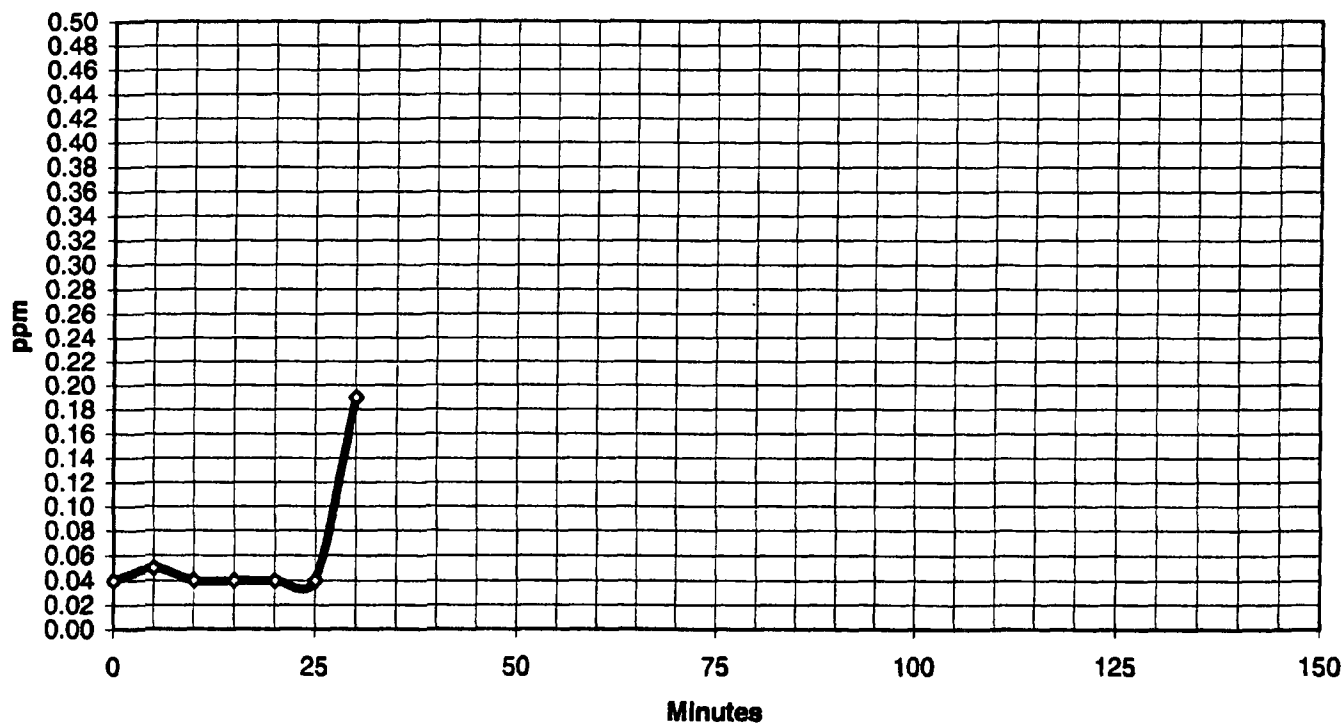
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/28/08
Time: 13:00

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

Unit: 2

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



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

www.exeloncorp.com

March 17, 2008

LTR: BYRON 2008-0023
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 February 1, 2008 through February 29, 2008.

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

Respectfully,



Bradley Adams
Plant Manager
Byron Nuclear Generating Station

BA/ZC

Attachments

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0	8	0	2	0	1	To: 0	8	0	2	2	9

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.9	1.9	(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.					TELEPHONE		DATE			
Bradley Adams						815 406-3700		08	03	17	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 20 of 29 days during this month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

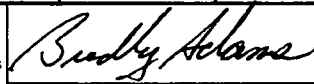
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 8	0 2	0 1	0 8	0 2	2 9

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.011	0.066	(03)	-----	-----	-----	----	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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 Adams			815	406-3700	08	03	17
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

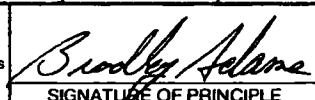
MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 001B)
EFFLUENT

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	8	0	2	0	1	To:	0	8	0	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	<0.34	<0.50	(26)	-----	<4.4	<6.6	(19)	0	290	DC			
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24			
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	----	6.84	-----	7.47	(12)	0	290	GR			
	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.093	0.11	(26)	-----	1.2	1.4	(19)	0	290	DC			
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	0.015	(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 Adams								815	406-3700	08	03	17		
Plant Manager								AREA CODE	NUMBER	YEAR	MONTH	DAY		
TYPED OR PRINTED														
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)														
1. Flow existed through this outfall 29 of 29 days during the month.														

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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


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

MONITORING PERIOD						
YEAR	MONTH	DAY	YEAR	MONTH	DAY	
0	8	0	2	0	1	To: 0 8 0 2 2 9

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.6	3.0	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley Adams			815	406-3700	08	03	17
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. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 18 of 29 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
08	02	01	08	02	09

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)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.7	2.2	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MGL		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.032	0.056	(03)	-----	-----	-----	-----	0	135	TM
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	-----		DAILY	TOTALIZ
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	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	08	03	17	
Bradley Adams						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					
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

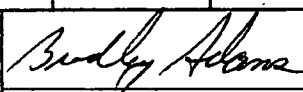
MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	8		0	2		0	1		0	8	

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE											
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS														
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<0.6	0.9	(19)	0	240	CP											
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS											
EFFLUENT GROSS VALUE																						
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<2.1	3.3	(19)	0	240	GR											
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB											
EFFLUENT GROSS VALUE																						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.022	(03)	-----	-----	-----	----	0	135	CN											
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN											
EFFLUENT GROSS VALUE																						
	SAMPLE MEASUREMENT																					
	PERMIT REQUIREMENT																					
	SAMPLE MEASUREMENT																					
	PERMIT REQUIREMENT																					
	SAMPLE MEASUREMENT																					
	PERMIT REQUIREMENT																					
	SAMPLE MEASUREMENT																					
	PERMIT REQUIREMENT																					
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 815 406-3700		DATE 08 03 17												
PRINCIPAL EXECUTIVE OFFICER																						
Bradley Adams																						
Plant Manager																						
TYPED OR PRINTED								AREA CODE		NUMBER												
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																						
1. Flow existed through this outfall 4 of 29 days during the month.																						

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
From: 0	8	0	To: 0	8	0	2	2	9	

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	----		-----		(12)		500	
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 Adams						815	406-3700	08	03	17	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 7 of 29 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD						
YEAR	MONTH	DAY	YEAR	MONTH	DAY	
From: 0	8	0	To: 0	8	0	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			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.5	1.6	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.134	0.677	(03)	-----	-----	-----	----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley Adams						815	406-3700	08	03	17	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
From: 0	8	0	2	0	1	To: 0	8	0	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			
PH	SAMPLE MEASUREMENT	-----	-----	----	8.72	-----	8.95	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
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)	-----	-----	0.086	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	18.76	23.80	(03)	-----	-----	-----	----	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.04	0.09	(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.					TELEPHONE		DATE			
Bradley Adams						815	406-3700	08	03	17	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

SEE ATTACHED

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
February 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
02/02/08	120	68.9
02/09/08	120	68.7
02/16/08	120	73.5
02/23/08	120	67.1

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

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharge to the Cooling System Blowdown during the month of February 2008.

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
February 2008

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 29 days.

**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		
From:	0	8	0	2	0	1	To:	0	8	0	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			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)			
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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 Adams		815	406-3700	08	03	17
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

2. This discharge point was not used this month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 8 0 2 0 1	To:	0 8 0 2 2 9			

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	----			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley Adams						815	406-3700	08	03	17	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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
02/01/08	20	20	02/08/08	50	22
02/02/08	18	18	02/09/08	50	55
02/03/08	18	17	02/10/08	20	20
02/04/08	20	20			
02/05/08	20	20			
02/06/08	20	20			
02/07/08	20	20			

HALOGEN DOSING CURVE

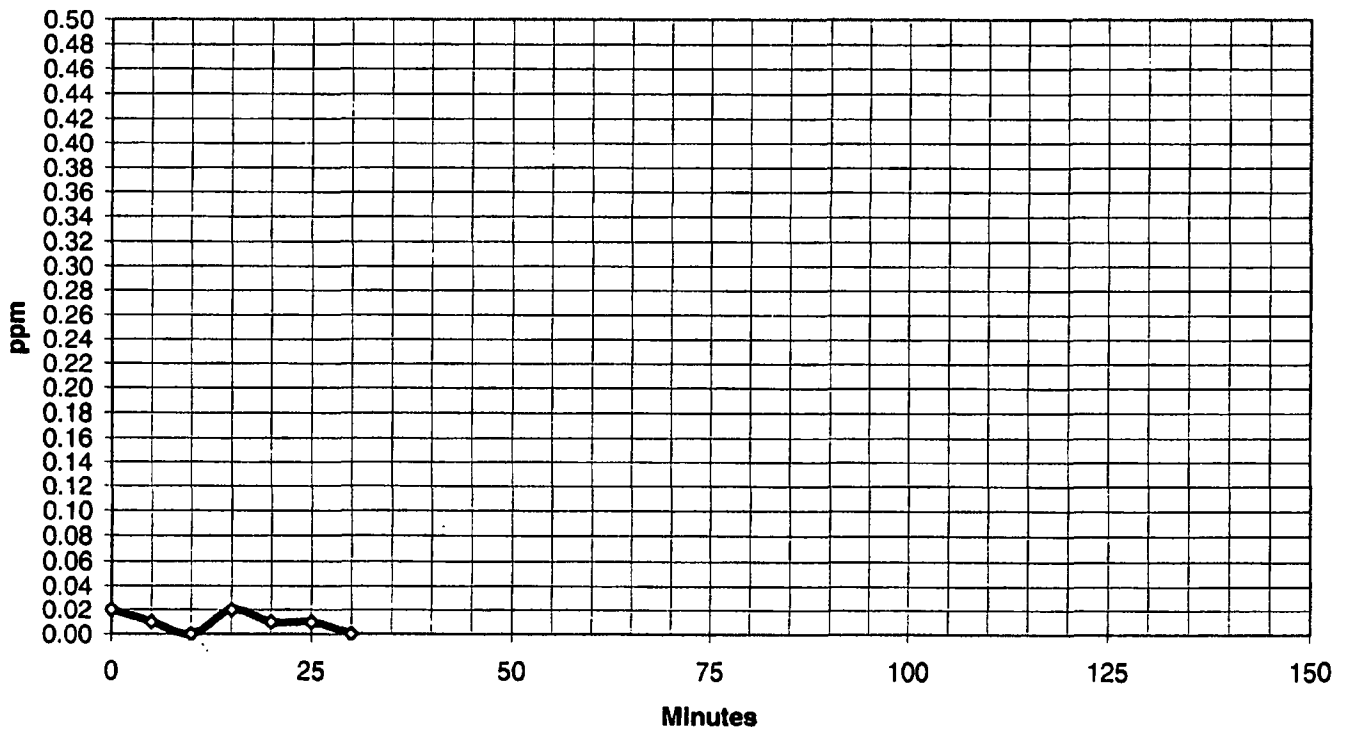
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/04/08
Time: 14:07

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
02/11/08	15	22
02/12/08	20	20
02/13/08	20	20
02/14/08	20	20
02/15/08	20	20
02/16/08	20	20
02/17/08	20	20

HALOGEN DOSING CURVE

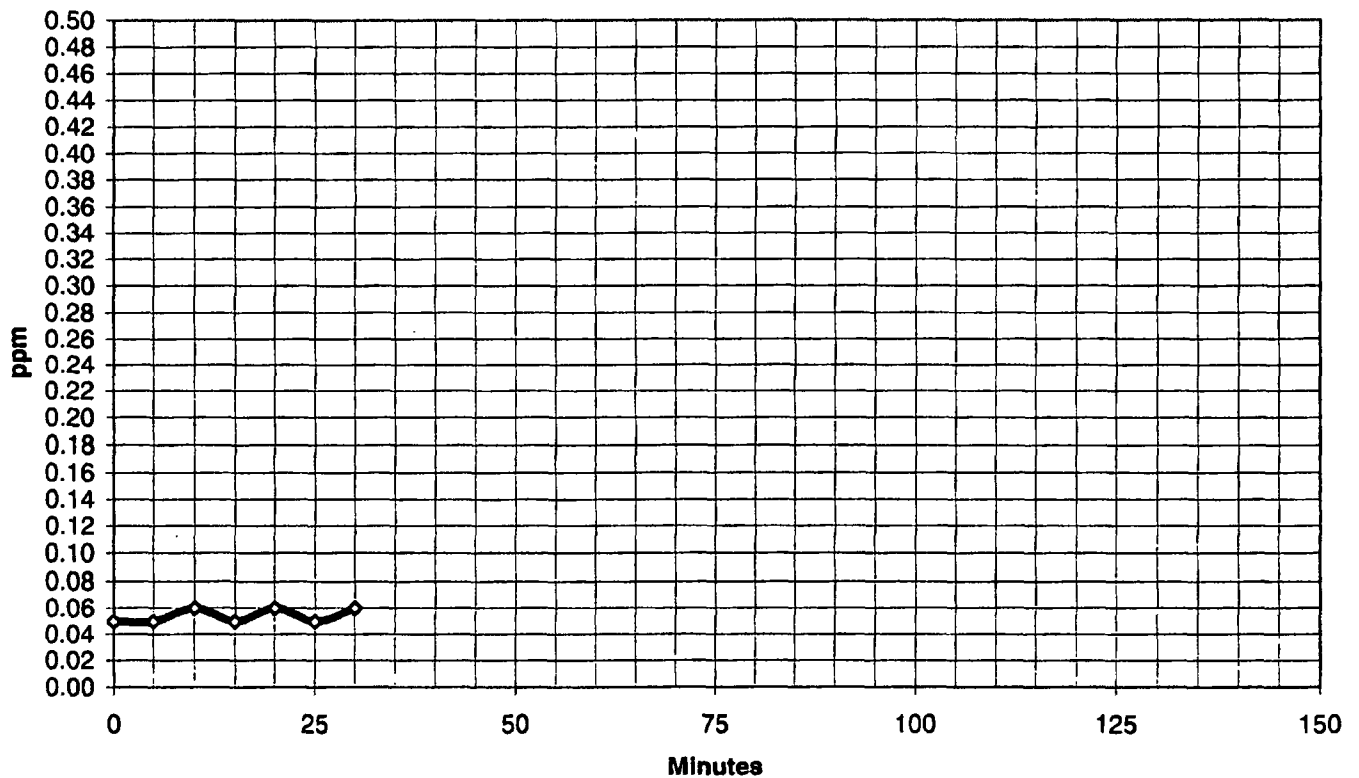
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/12/08
Time: 12:50

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
02/18/08	20	20
02/19/08	20	20
02/20/08	20	20
02/21/08	20	20
02/22/08	20	20
02/23/08	20	20
02/24/08	20	20

=====

HALOGEN DOSING CURVE

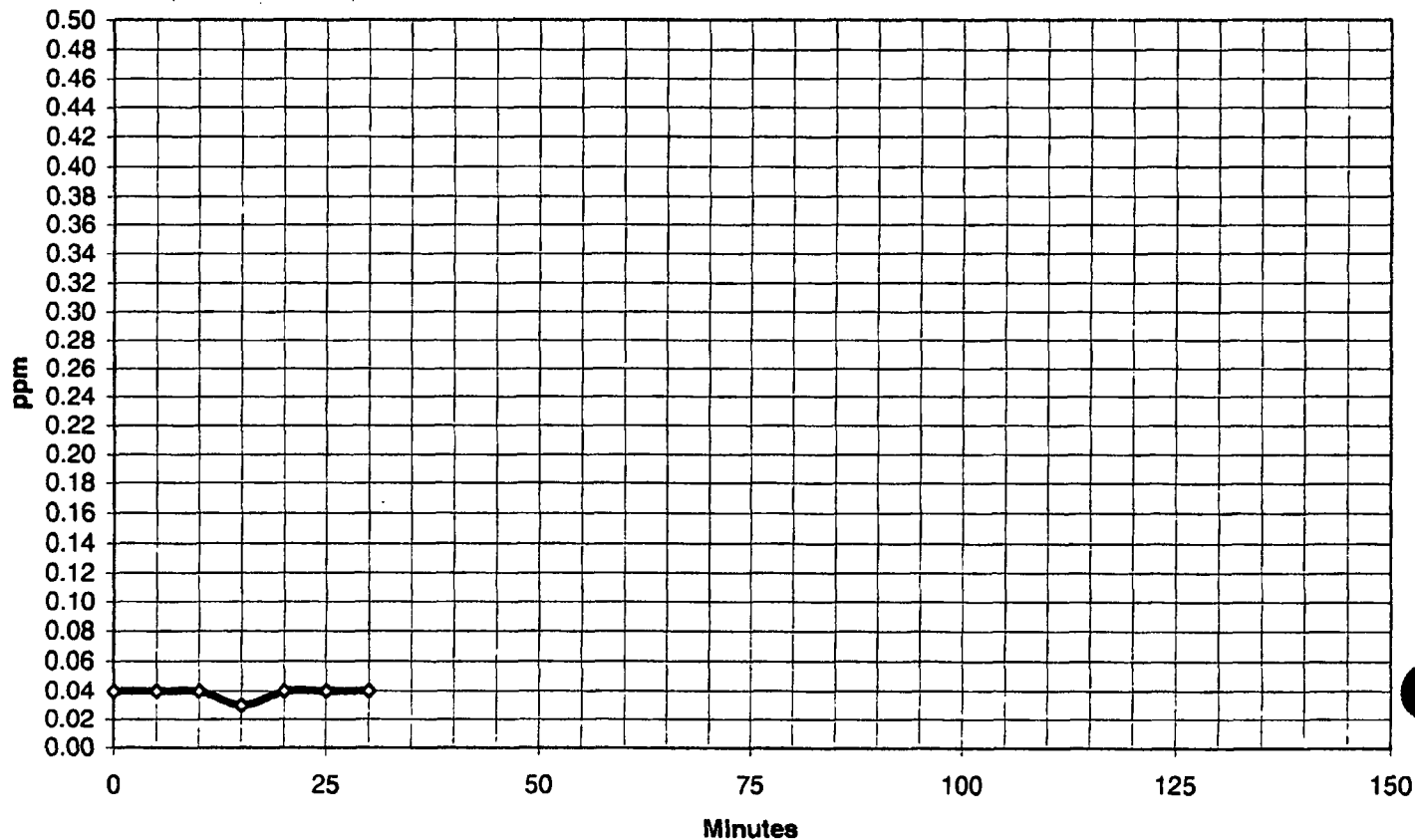
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/20/08
Time: 09:51

Analyzed by: S.C.
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
02/25/08	20	20
02/26/08	20	20
02/27/08	20	21
02/28/08	20	20
02/29/08	18	30

HALOGEN DOSING CURVE

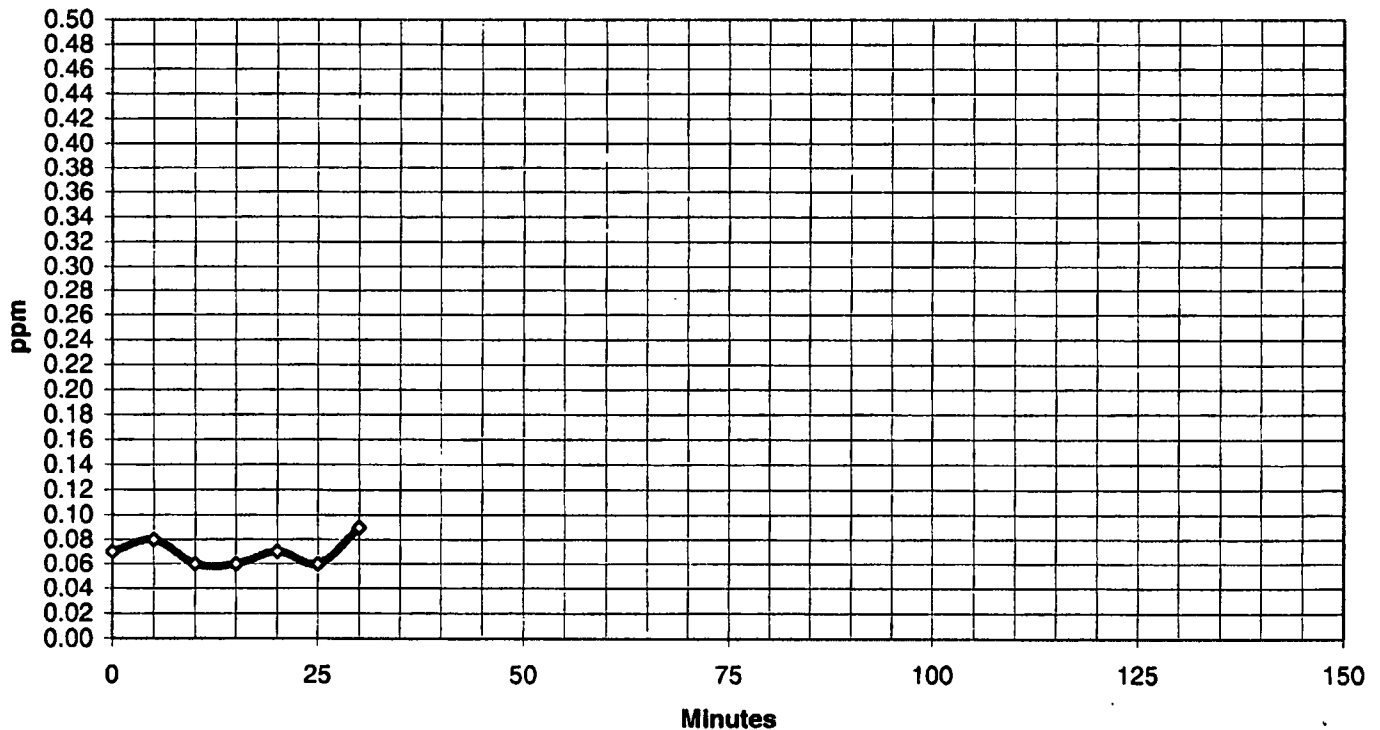
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/26/08
Time: 08:25

Analyzed by: M. K.
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

April 18, 2008

LTR: BYRON 2008-0037

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 March 1, 2008 through March 31, 2008.

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

Attachments

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	8	0	3	0	1	To:	0	8	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 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.3	1.3	(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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	04	18	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 26 of 31 days during this month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	8	0	3	0	1	From:	0	8	0
						To:	3	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)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY	---	1.0	2.0	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.021	0.181	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	---	---	---	---		DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	08	04	18	
Bradley J. Adams						AREA CODE		NUMBER	YEAR	MONTH	
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:	0	8	0	3	0		1	To:	0	8	0	3	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	<0.26	0.33	(26)	-----	<2.5	3.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	----	7.16	-----	7.39	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.12	0.18	(26)	-----	1.2	1.7	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.010	0.015	(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 815 406-3700 AREA CODE NUMBER		DATE 08 04 18 YEAR MONTH DAY	
Bradley J. Adams											
Plant Manager											
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) 1. Flow existed through this outfall 31 of 31 days during the month.											

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD														
YEAR			MONTH		DAY			YEAR			MONTH		DAY	
0 8			0 3		0 1			0 8			0 3		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)	-----	2.2	5.0	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	08	04	18
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 20 of 31 days during the month.

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

OCR0501

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

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		
From:	0	8	0	3	0	1	To:	0	8	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			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<2.9	5.4	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.031	0.055	(03)	-----	-----	-----	-----	0	135	TM
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	-----		DAILY	TOTALIZ
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	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	08	04	18	
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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<0.5	0.5	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.8	3.4	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.026	0.046	(03)	-----	-----	-----	-----	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	-----		DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	08	04	18	
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. Flow existed through this outfall 15 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

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

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA
CODE NUMBER

DATE

08 04 18

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 12 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR			MONTH		DAY		YEAR		
From: 0	8	0	3	0	1		To: 0	8	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 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.7	1.9	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG.	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.268	0.484	(03)	-----	-----	-----	----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	04	18	
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

YEAR	MONTH	DAY	YEAR	MONTH	DAY
08	03	01	08	03	31

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	----	8.62	-----	8.84	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
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)	-----	-----	0.131	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	18.57	26.30	(03)	-----	-----	-----	----	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.09	0.32	(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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	04	18	
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

**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:			To:		
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	8	0	0	8	0
		3			3
		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	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB				
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)							
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)							
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)							
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)							
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)							
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)							
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE							
Bradley J. Adams						815	406-3700	08	04	18					
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. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. This discharge point was not used this month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	----			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT- DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	04	18	
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
March 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
03/01/08	120	68.2
03/08/08	120	65.0
03/15/08	120	65.1
03/22/08	120	63.4
03/30/08	120	69.7

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 discharge to the Cooling System Blowdown during the month of March 2008.

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
March 2008**

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
03/01/08	17	20	03/08/08	22	24
03/02/08	19	19	03/09/08	25	25
03/03/08	25	25			
03/04/08	25	25			
03/05/08	25	25			
03/06/08	25	25			
03/07/08	26	25			

HALOGEN DOSING CURVE

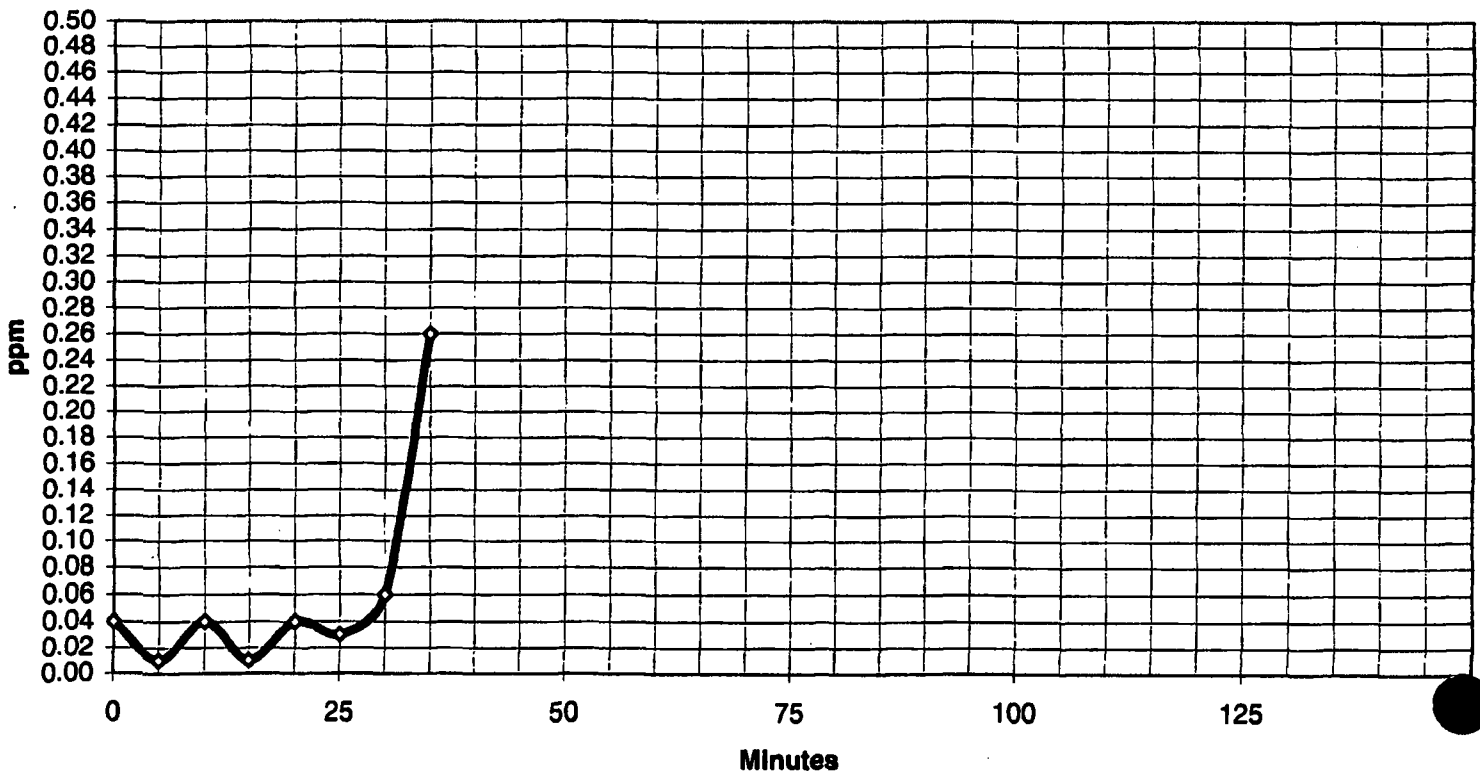
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/04/08
Time: 10:40

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
03/10/08	25	25
03/11/08	25	25
03/12/08	25	25
03/13/08	25	25
03/14/08	26	24
03/15/08	23	25
03/16/08	19	20

HALOGEN DOSING CURVE

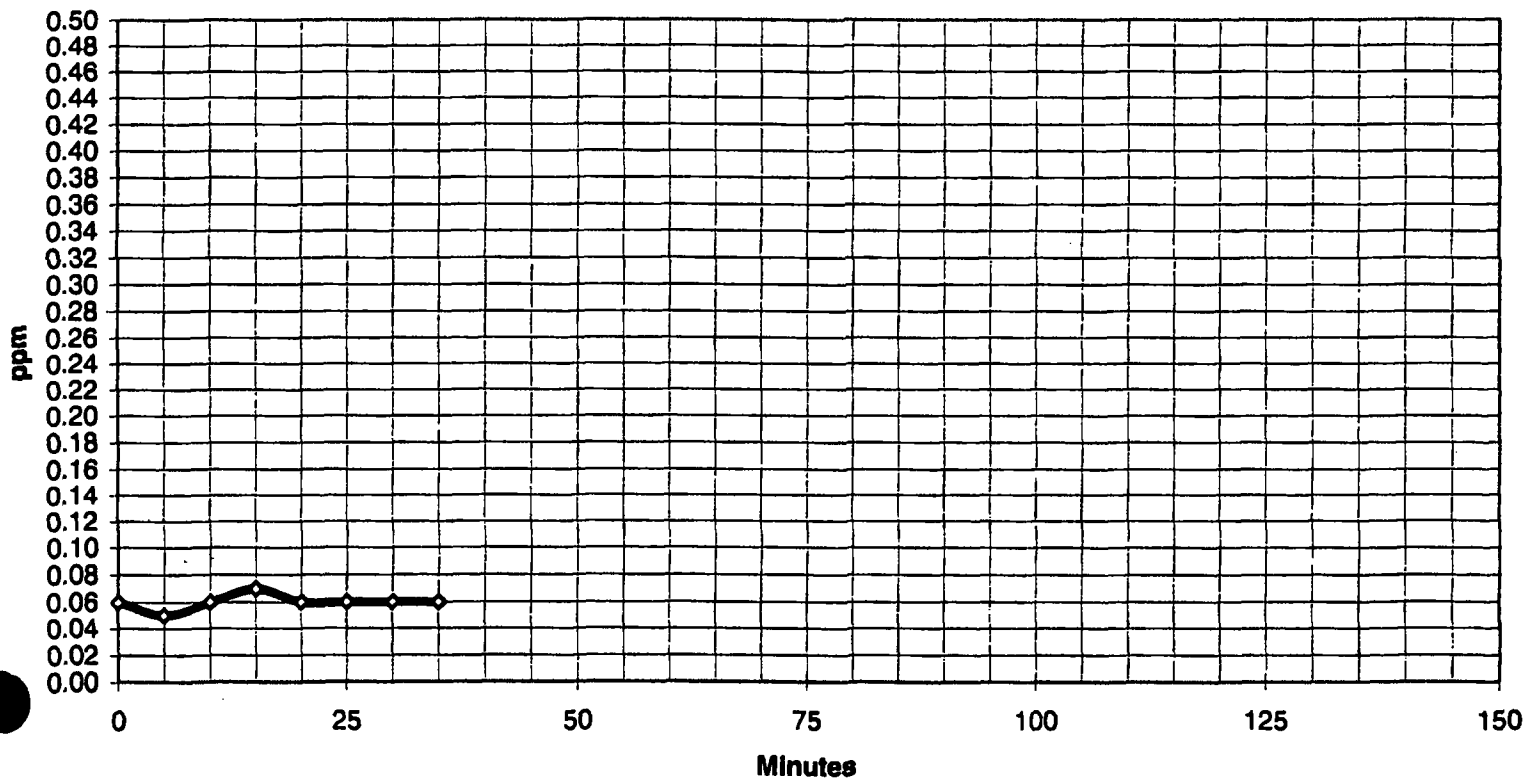
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/10/08
Time: 10:33

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
03/17/08	30	30
03/18/08	30	30
03/19/08	26	26
03/20/08	30	30
03/21/08	30	30
03/22/08	30	30
03/23/08	30	30

HALOGEN DOSING CURVE

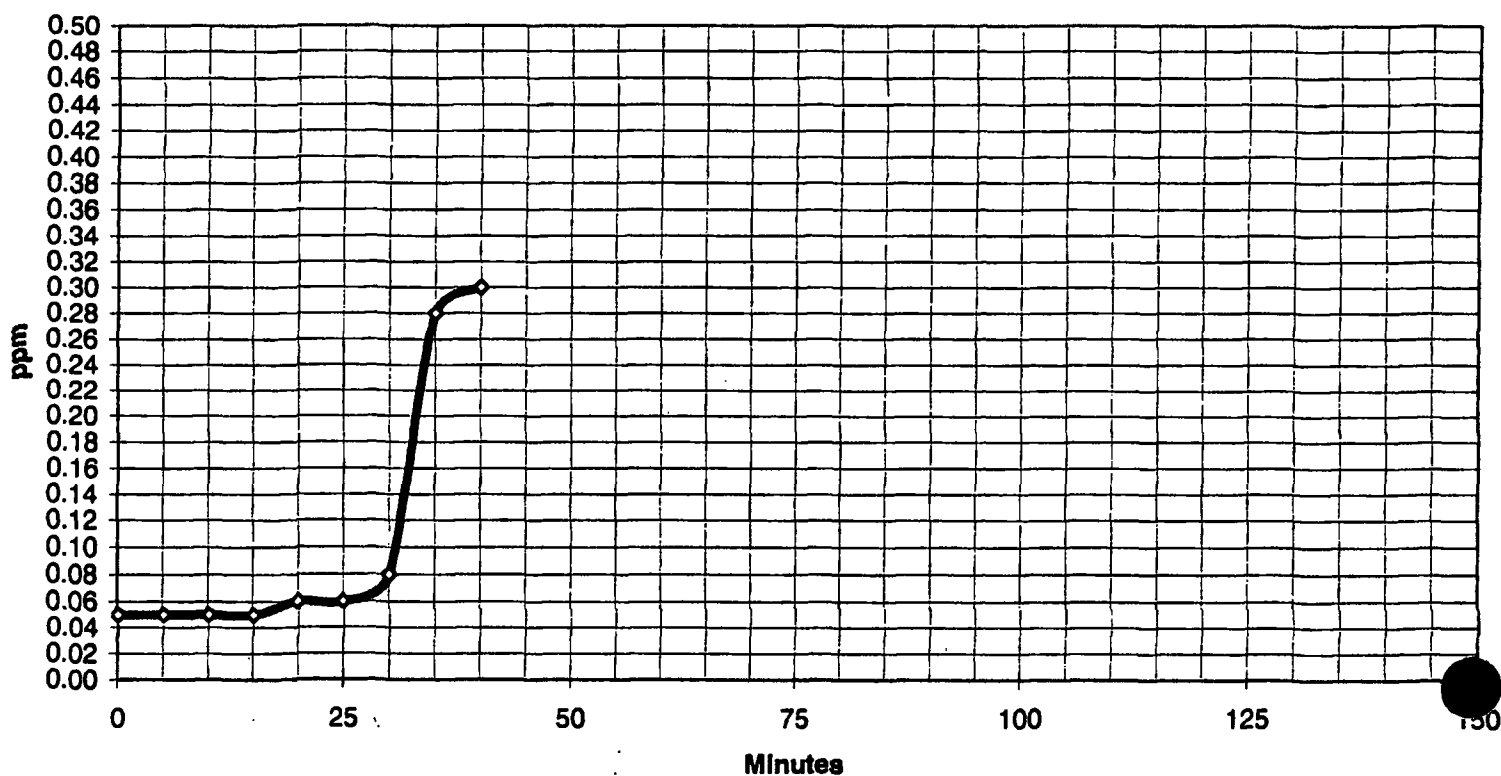
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/17/08
Time: 10:49

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
03/24/08	25	24
03/25/08	BIR15	25
03/26/08	BIR15	27
03/27/08	BIR15	30
03/28/08	BIR15	30
03/29/08	BIR15	30
03/30/08	BIR15	30

HALOGEN DOSING CURVE

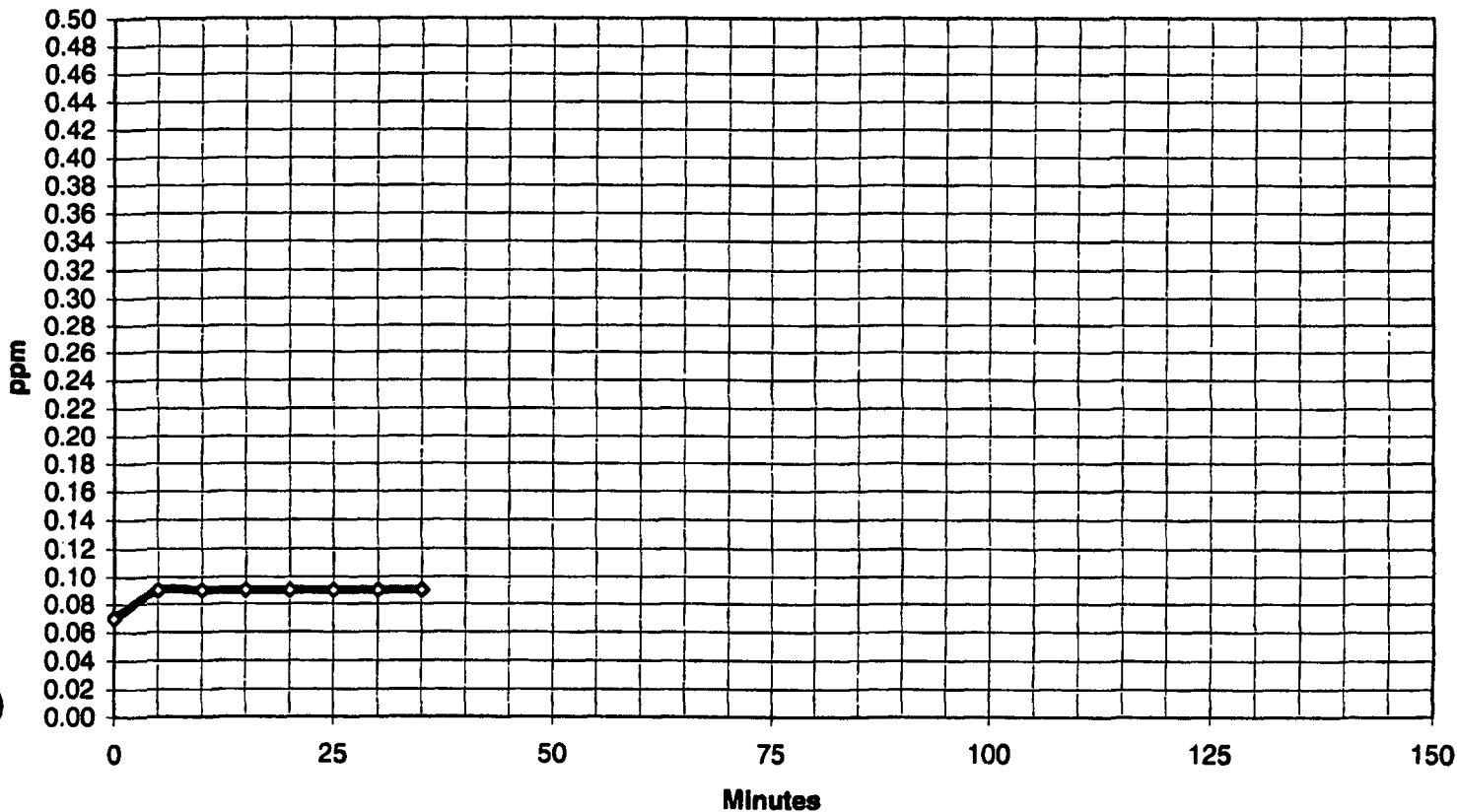
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/24/08
Time: 11:55

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
03/31/08	BIR15	26

HALOGEN DOSING CURVE

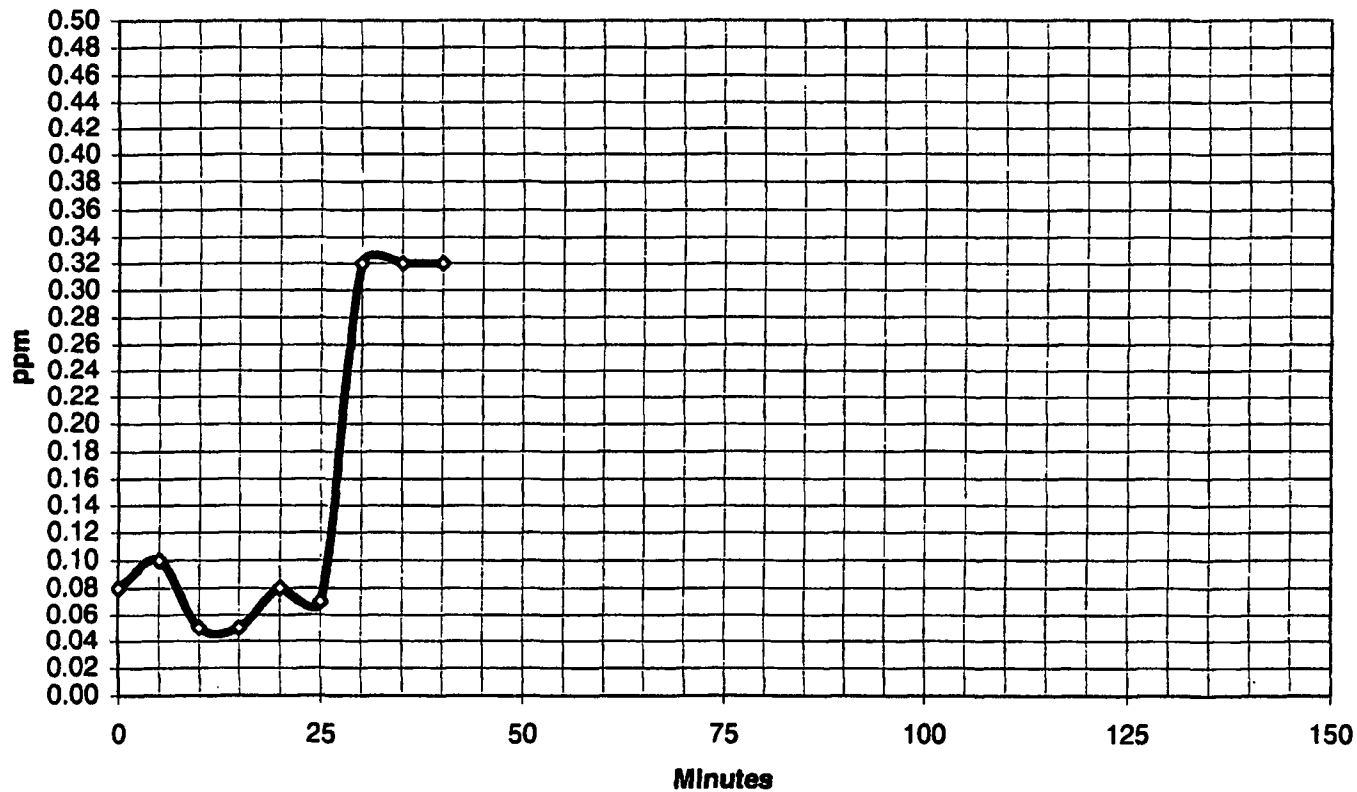
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/31/08
Time: 12:16

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

Unit: 2

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



Exelon Generation
Byron Generating Station
4450 North German Church Road
Byron, IL 61010-9794
Tel 815-234-5441

www.exeloncorp.com

May 19, 2008

LTR: BYRON 2008-0047

File: 2.09.0411

1.10.0101

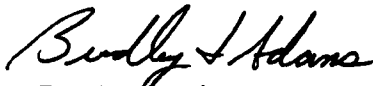
Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

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 April 1, 2008 through April 30, 2008.

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

Respectfully,



Bradley J. Adams
Plant Manager
Byron Nuclear Generation Station

BJA\ZC\sdk

Attachments

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron Station

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 8	0 4	0 1	To: 0 8	0 4	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 PERMIT REQUIREMENT	—	—	(26) LBS/DY	—	<1.3 15.0 30 DAY AVG	<1.3 30.0 DAILY MAX	(19) MG/L	0	285 ONCE/MONTH	EC COMP-8
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	—	—	(26) LBS/DY	—	0.1 30 DAY AVG	0.2 DAILY MAX	(19) MG/L		500 DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	—	—	(26) LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	(19) MG/L		500 DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	—	—	(26) LBS/DY	—	0.5 30 DAY AVG	1.0 DAILY MAX	(19) MG/L		500 DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	—	—	(26) LBS/DY	—	1.0 30 DAY AVG	1.0 DAILY MAX	(19) MG/L		500 DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	—	—	(26) LBS/DY	—	0.2 30 DAY AVG	0.4 DAILY MAX	(19) MG/L		500 DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	—	—	(26) LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	(19) MG/L		500 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		08	05	19	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

**MAJOR
(SUBR 01)**


**F - FINAL
DEMINERALIZER REGENERATE (001A)
EFFLUENT**

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

MONITORING PERIOD													
YEAR		MONTH		DAY			YEAR		MONTH		DAY		
From:	0	8	0	4	0		1	To:	0	8	0	4	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									
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500							
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.035	0.134	(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	08	05	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

B01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
From: 0	8	0	4	0	1	To: 0	8	0	4

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.66	0.78	(26)	-----	8.7	9.4	(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	-----	-----	---	7.42	-----	7.79	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.28	0.52	(26)	-----	<3.3	6.2	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.009	0.015	(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	08	05	19	
Plant Manager TYPED OR PRINTED						AREA CODE	NUMBER	YEAR	MONTH	DAY	
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) 1. Flow existed through this outfall 30 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		
From: 0			8			0			To: 0		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	3.1	7.3	(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) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	08	05	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 19 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																
YEAR			MONTH			DAY				YEAR			MONTH		DAY	
From:	0	8	0	4	0	1	To:			0	8	0	4	3	0	

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	<2.6	4.8	(19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.036	0.054	(03)	---	---	---	---	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	05	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT 					

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	8	0	4	0	1	To:	0	8	0

***NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	<0.6	0.7	(19)	0	240	CP
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	<1.4	<1.4	(19)	0	240	GR
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.046	(03)	—	—	—	—	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	05	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

- Flow existed through this outfall 8 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

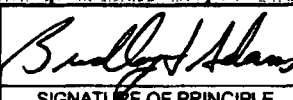
FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD									
YEAR			MONTH			DAY			
0	8	0	4	0	1	0	8	0	4

From: To: 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			—	6.0 MINIMUM		9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams	815	406-3700	08	05	19						
Plant Manager	AREA CODE	NUMBER	YEAR	MONTH	DAY						
TYPED OR PRINTED											

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

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER


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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
From: 0	8	0	4	0	1	To: 0	8	0	4

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE						
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS									
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500							
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB						
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500							
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB						
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	<1.4	<1.4	(19)	0	290	GR						
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB						
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.353	0.920	(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													B15	406-3700	08	05	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

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

IL0048313
PERMIT NUMBER


001 0
DISCHARGE NUMBER

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0 8 0			4 0 1			To: 0 8 0			4 3 0		

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	—	—	—	8.64	—	8.79	(12)	0	240	GR
00400 1 0 0	PERMIT REQUIREMENT	—	—	—	6.0 MINIMUM	—	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	—	—	(26)	—	—	0.011	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	—	—	(26)	—	—	0.117	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	17.14	25.28	(03)	—	—	—	—	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	—	—	—	—		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	0.10	0.37	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
HYDRAZINE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
81313 1 0 0	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	08	05	19						
Plant Manager	AREA CODE	NUMBER	YEAR	MONTH	DAY						
TYPED OR PRINTED											

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

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

SEE ATTACHED

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD																
YEAR			MONTH			DAY				YEAR			MONTH		DAY	
From:	0	8	0	4	0	1	To:	0	8	0	4	3	0			

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	08	05	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. 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		
From:	0	8	0	4	0	1	To:	0	8	0	4

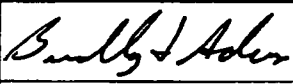
**MAJOR
(SUBR 01)**

F - FINAL

**STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER**

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)				
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)				
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)				
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	---	---	---	---				
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALIZ	
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 815 406-3700 AREA CODE NUMBER		DATE 08 05 19 YEAR MONTH DAY		
Bradley J. Adams												
Plant Manager												
TYPED OR PRINTED												

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

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
April 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
04/05/08	120	77.1
04/12/08	120	71.0
04/19/08	120	80.9
04/26/08	120	76.3

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 April 2008.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
April 2008

COMMENTS:

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

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
04/01/08	0	30	04/08/08	30	30
04/02/08	0	30	04/09/08	26	24
04/03/08	0	30	04/10/08	30	30
04/04/08	0	23	04/11/08	30	30
04/05/08	0	23	04/12/08	28	26
04/06/08	0	30	04/13/08	25	25
04/07/08	0	25			

HALOGEN DOSING CURVE

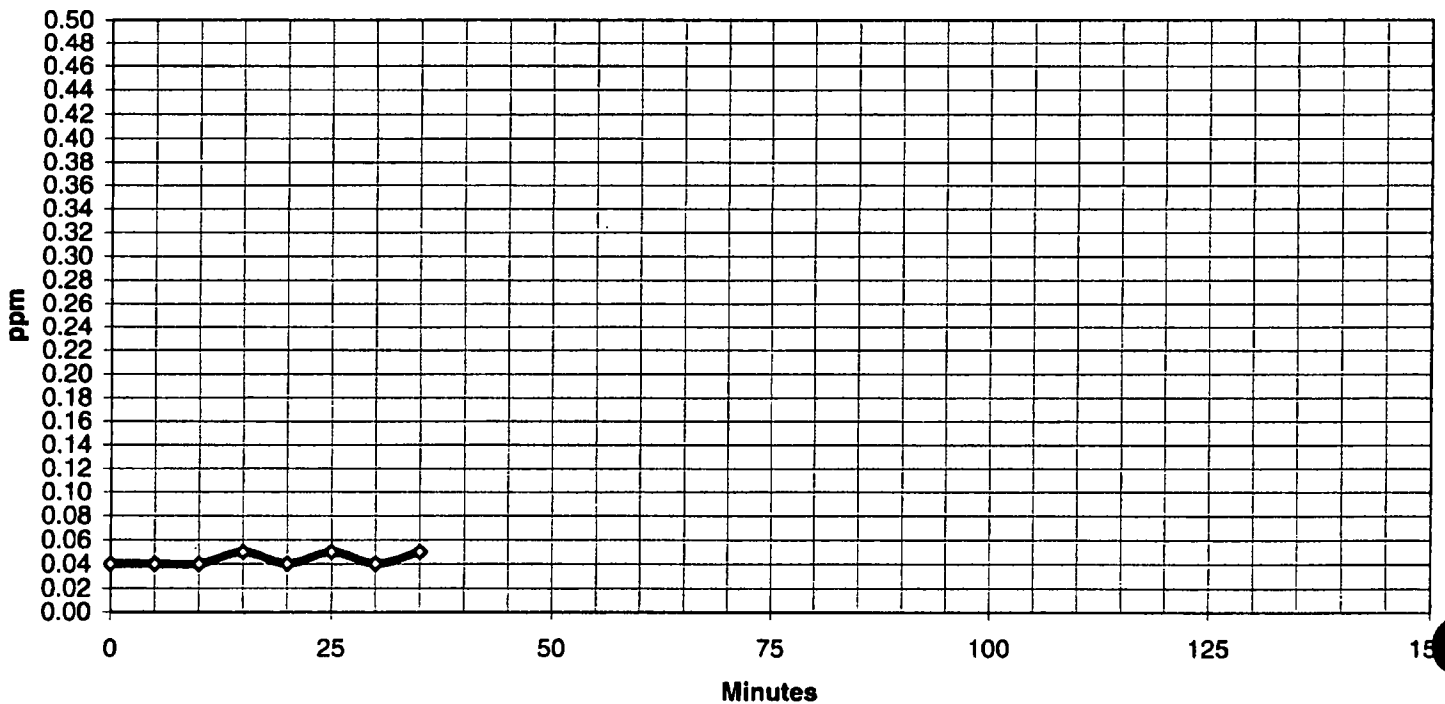
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/07/08
Time: 11:25

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
04/14/08	30	30
04/15/08	31	32
04/16/08	27	30
04/17/08	28	25
04/18/08	27	28
04/19/08	30	28
04/20/08	27	30

HALOGEN DOSING CURVE

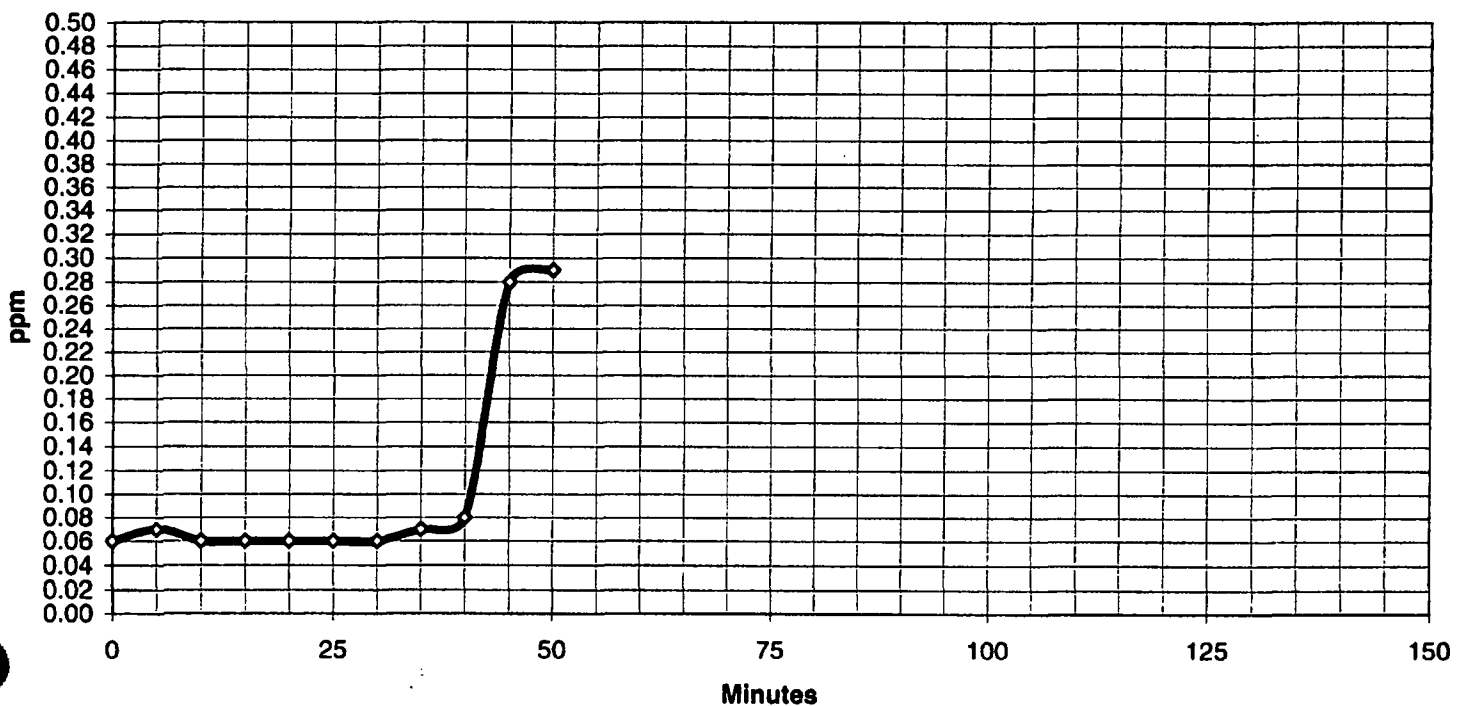
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/15/08
Time: 11:46

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
04/21/08	40	40
04/22/08	40	40
04/23/08	30	35
04/24/08	25	30
04/25/08	30	35
04/26/08	40	40
04/27/08	40	40

HALOGEN DOSING CURVE

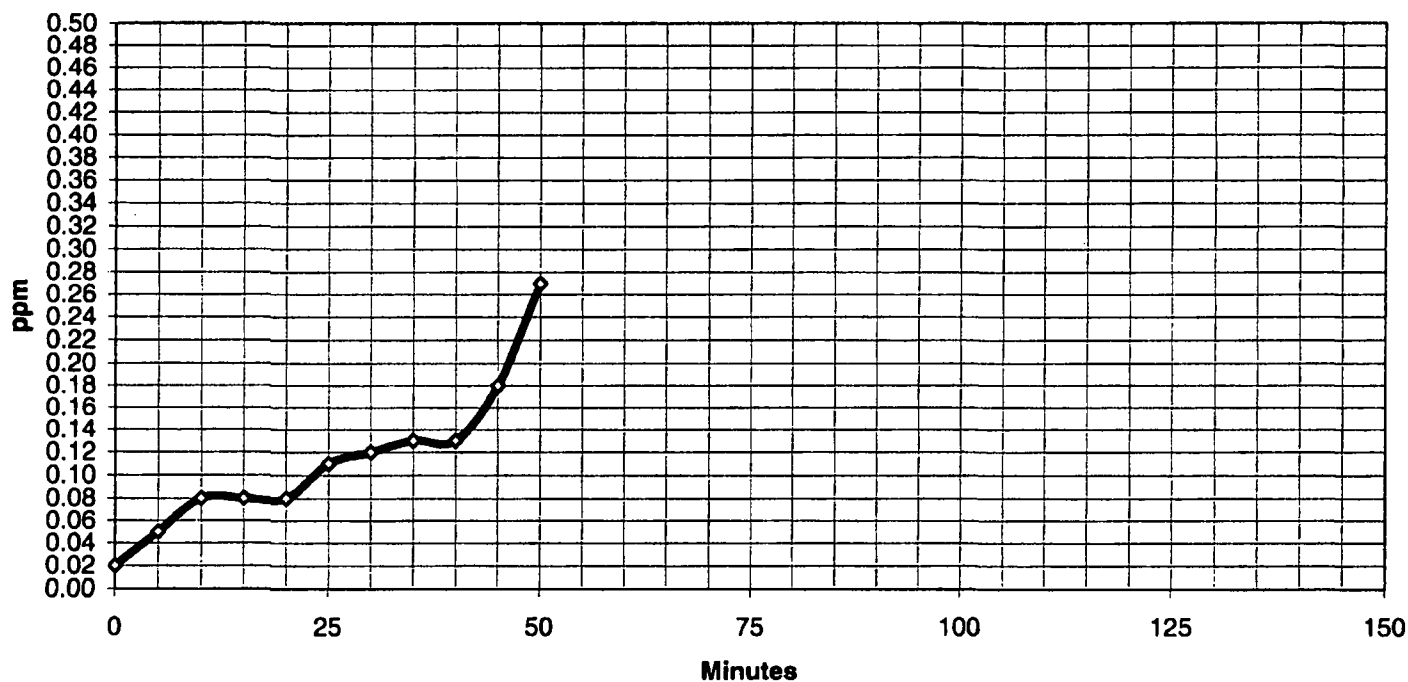
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/22/08
Time: 11:42

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
04/28/08	40	40
04/29/08	40	40
04/30/08	40	43

HALOGEN DOSING CURVE

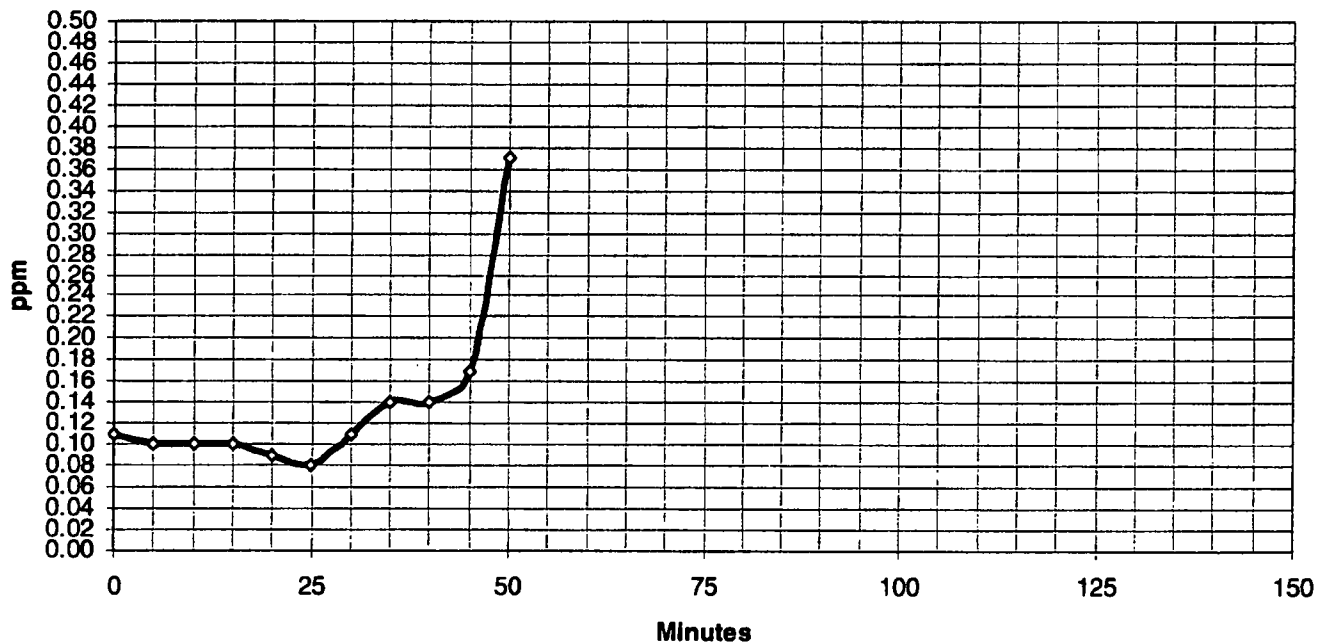
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/28/08
Time: 09:55

Analyzed by: T.M.
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 Generation
Byron Generating Station
4450 North German Church Road
Byron, IL 61010-9794
Tel 815-234-5441

www.exeloncorp.com

June 19, 2008

LTR: BYRON 2008-0056
File: 2.09.0411
1.10.0101

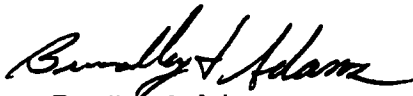
Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

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 May 1, 2008 through May 31, 2008.

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

Respectfully,



Bradley J. Adams
Plant Manager
Byron Nuclear Generation Station

BJA/ZC

Attachments

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron Station

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD														
YEAR			MONTH		DAY			YEAR			MONTH		DAY	
0	8		0	5	0	1		0	8		0	5	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)	-----	<0.6	<0.6	(19)	0	285	EC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/ MONTH	COMP-8
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		6-12-08 DATE		
Bradley J. Adams		815	406-3700	08	06	19
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. There was no discharge of processed steam generator chemical cleaning waste water during this month.

2. Flow existed 25 of 31 days during this month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR	MONTH	DAY	YEAR
0	8	0	5	0	1	0	8	0	5

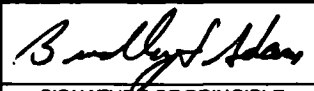
From:

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)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY		1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX.				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.034	0.116	(03)	-----	-----	-----	----	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	----		DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX.								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	08	06
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
From: 0	8	0	5	0	1	To: 0	8	0	5
								3	1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE										
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS													
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.20	0.22	(26)	-----	3.9	4.0	(19)	0	290	DC										
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24										
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.28	-----	7.73	(12)	0	290	GR										
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB										
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.07	0.07	(26)	-----	1.4	1.7	(19)	0	290	DC										
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24										
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.006	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		6-12-08 DATE													
Bradley J. Adams						815	406-3700	08	06	19											
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY											
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT																				
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																					
1. Flow existed through this outfall 29 of 31 days during the month.																					

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	8	0	5	0	1	0	8	0	5	3	1

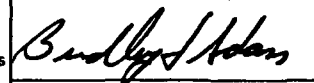
From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.6	2.8	(19)	0	240	DC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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		6-12-08 DATE		
Bradley J. Adams			815	406-3700	08	06	19
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)

- There was no discharge of processed steam generator chemical cleaning waste water during this month.
- Flow existed through this outfall 16 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

MONITORING PERIOD													
YEAR			MONTH		DAY			YEAR		MONTH		DAY	
0 8			0 5		0 1			0 8		0 5		3 1	
From:							To:						

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<1.6	2.0	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG.	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.030	0.054	(03)	-----	-----	-----	---	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE 6-12-08 DATE					
Bradley J. Adams						815	406-3700	08	06	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

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


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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	8	0	5	0	1	To:	0	8	0
							5	3	1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.5	1.8	(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)	-----	<5.9	10.6	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.021	0.023	(03)	-----	-----	-----	----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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		6-12-08DATE			
Bradley J. Adams			815	406-3700	08	06	19	
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 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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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


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

MONITORING PERIOD													
YEAR			MONTH		DAY			YEAR		MONTH		DAY	
0 8			0 5		0 1			0 8		0 5		3 1	
From:							To:						

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		6-12-08DATE		
Bradley J. Adams			815	406-3700	08	06	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							
		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

1. 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 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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	8	0	5	0	1	To:	0	8	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)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	<2.1	2.8	(19)	0	290	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.135	0.360	(03)	-----	-----	-----	----	0	290	TM
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/MONTH	TOTALIZ
EFFLUENT GROSS VALUE											
	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

6-12-08 DATE
08 06 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

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
From: 0	8	0	5	0	1	To: 0	8	0	5

*** 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	-----	-----	---	8.67	-----	8.77	(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)	-----	-----	0.011	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.023	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	21.11	28.46	(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)	-----	0.10	0.46	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE 6-12-08 DATE				
Bradley J. Adams				815	406-3700	
Plant Manager		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		08	06	19
TYPED OR PRINTED				AREA CODE	NUMBER	YEAR MONTH DAY

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

SEE ATTACHED

EPA Form 3320-1 (Rev 3/99) SD PAGE 1 OF 1

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

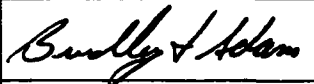
MAJOR
(SUBR 01)
F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

MONITORING PERIOD														
YEAR			MONTH		DAY			YEAR			MONTH		DAY	
0 8			0 5		0 1			0 8			0 5		3 1	
From:							To:							

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
PH												
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)				
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)				(19)				
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		15.0 30-DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB	
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)				
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.1 30-DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB	
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)				
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		1.0 30-DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)				
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.5 30-DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)				
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		1.0 30-DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)				
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.2 30-DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		6-12-08 DATE		
Bradley J. Adams								815	406-3700	08	06	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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	8	0	5	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			
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MG/L		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	-----	-----	-----	---			
50050 1 0 0	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	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		6-1200 DATE			
PRINCIPAL EXECUTIVE OFFICER						815 406-3700		08	06	19	
Bradley J. Adams						AREA CODE NUMBER		YEAR	MONTH	DAY	
Plant Manager											
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
May 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
05/03/08	120	78.6
05/10/08	120	79.9
05/18/08	120	78.4
05/25/08	120	89.1

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

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of May 2008.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
May 2008**

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

<u>Date</u>	<u>Dosing Time</u> (Minutes)		<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>		<u>U-1</u>	<u>U-2</u>
05/01/08	35	38	05/08/08	55	49
05/02/08	31	32	05/09/08	50	50
05/03/08	32	30	05/10/08	50	50
05/04/08	32	29	05/11/08	50	50
05/05/08	40	40			
05/06/08	40	40			
05/07/08	40	40			

HALOGEN DOSING CURVE

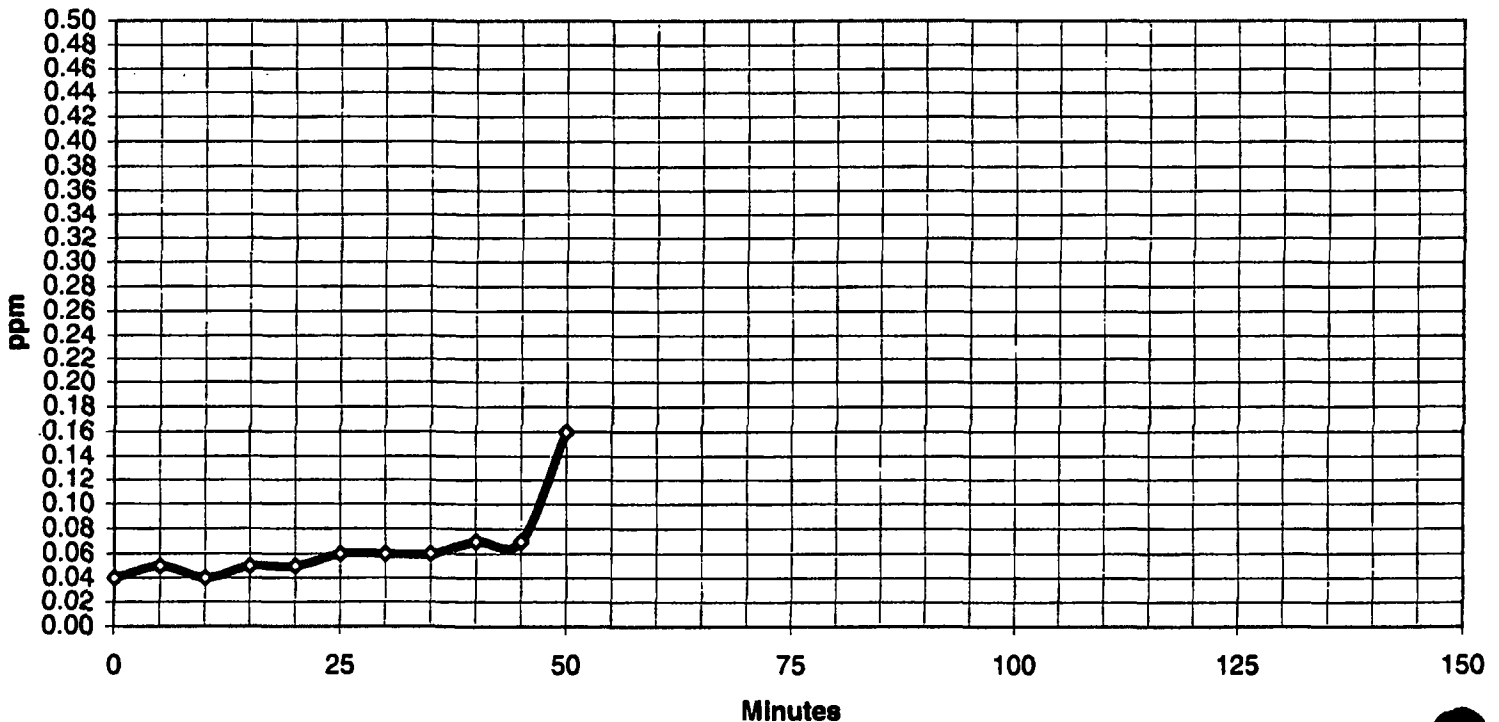
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/05/08
Time: 11:53

Analyzed by: J.E.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
05/12/08	50	50
05/13/08	50	50
05/14/08	50	50
05/15/08	50	50
05/16/08	40	45
05/17/08	50	51
05/18/08	42	42

HALOGEN DOSING CURVE

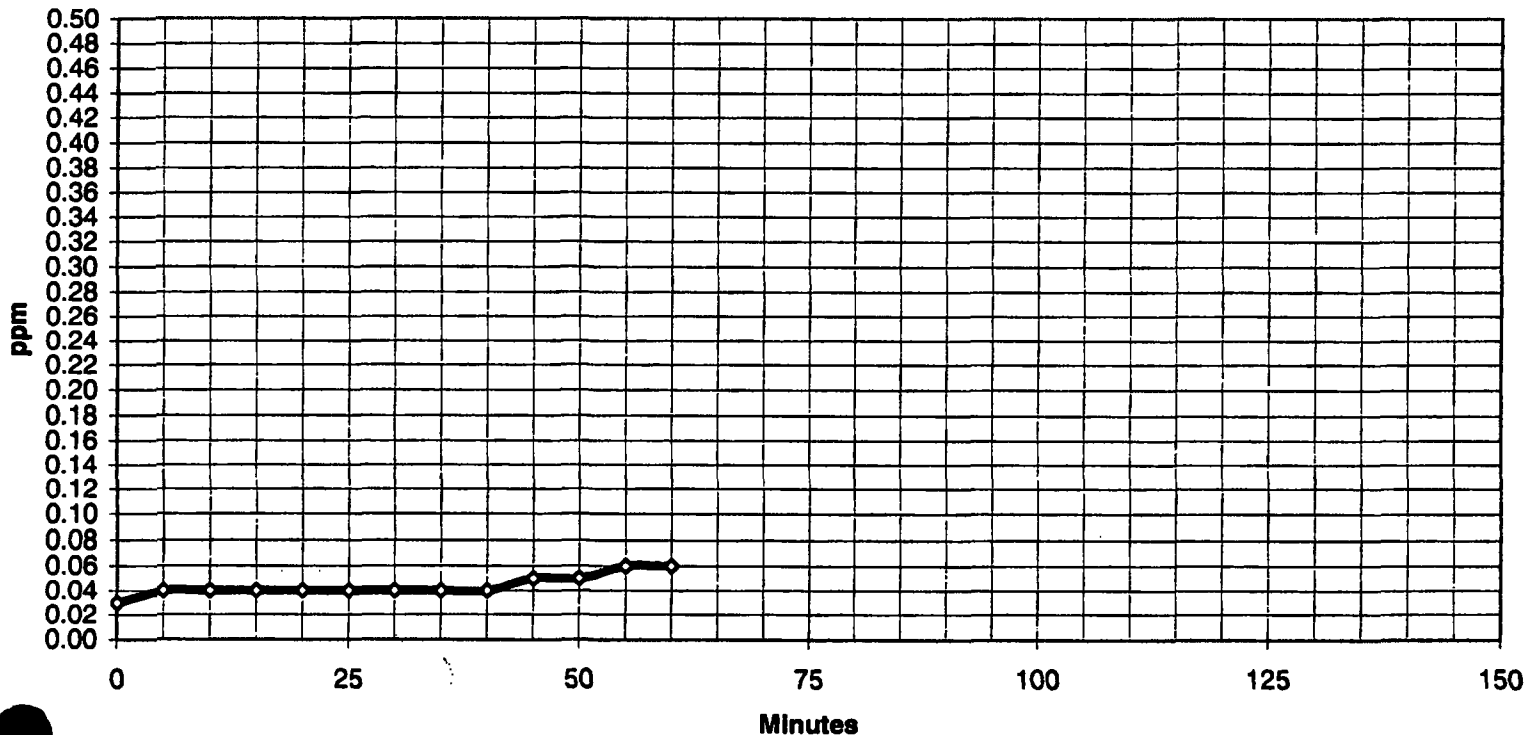
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/13/08
Time: 10:19

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
05/19/08	41	39
05/20/08	37	40
05/21/08	38	40
05/22/08	35	36
05/23/08	40	35
05/24/08	40	40
05/25/08	36	36

HALOGEN DOSING CURVE

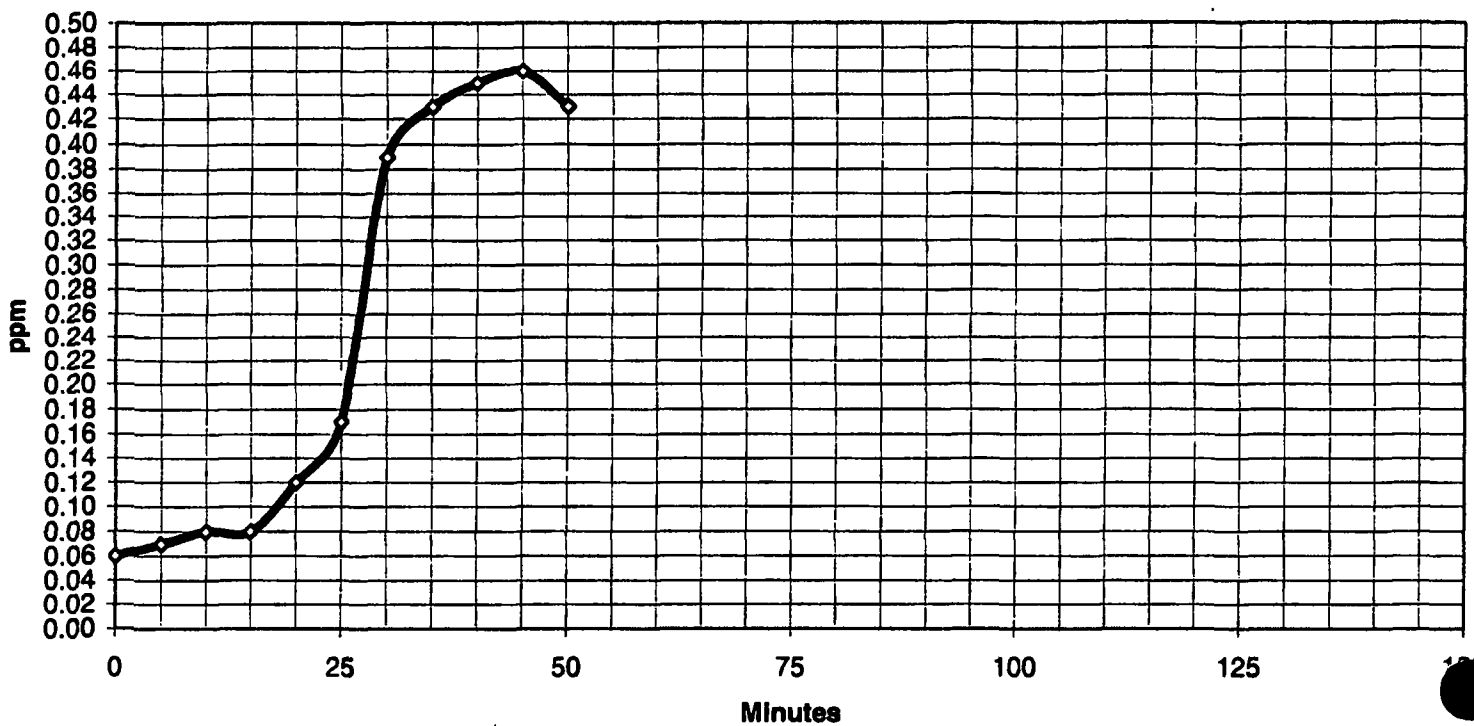
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/19/08
Time: 10:50

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
05/26/08	35	40
05/27/08	34	43
05/28/08	55	55
05/29/08	55	56
05/30/08	39	60
05/31/08	41	41

HALOGEN DOSING CURVE

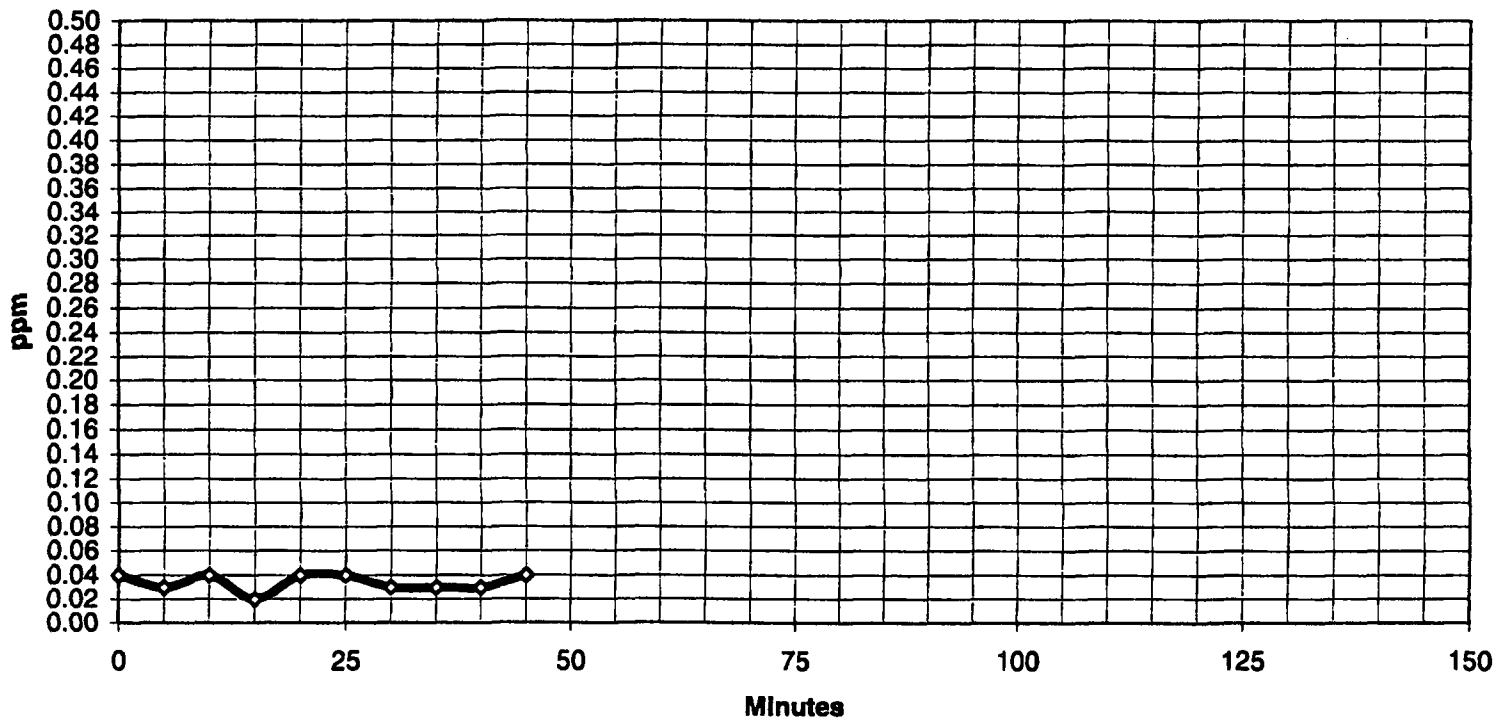
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/27/08
Time: 10:08

Analyzed by: D.L.
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
Byron Generating Station
4450 North German Church Road
Byron, IL 61010-9794
Tel 815-234-5441

www.exeloncorp.com

July 18, 2008

LTR: BYRON 2008-0070
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 June 1, 2008 through June 30, 2008.

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

Respectfully,



Bradley J. Adams
Plant Manager
Byron Nuclear Generation Station

BJA\ZC\sdk

Attachments

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron Station

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)

EFFLUENT

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	8	0	6	0	1	To:	0	8	0	6

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE				
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS							
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	_____	_____	(26)	_____	< 1.9	< 1.9	(19)	0	285	EC				
00530 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	15.0	30.0	MG/L		ONCE/MONTH	COMP-8				
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				
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				
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				
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				
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				
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				
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	08	07	18
Plant Manager											AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT									

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 12 of 30 days during this month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

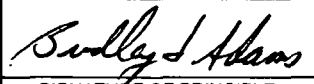
FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
From: 0	8	0	6	0	1	To: 0	8	0	6
								3	0

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	—	—	(26)	—			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY	—	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.013	0.062	(03)	—	—	—	—	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	—	—	—	—		DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	08	07	18
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)**

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

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

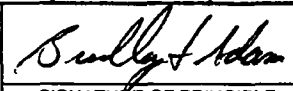
FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD																
YEAR			MONTH			DAY				YEAR			MONTH		DAY	
From:	0	8	0	6	0	1	To:	0		8	0	6	3	0		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.36	0.59	(26)	—	< 5.5	8.9	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	—	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	—	7.46	—	7.53	(12)	0	290	GR
	PERMIT REQUIREMENT	—	—	—	6.0 MINIMUM	—	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.04	0.047	(26)	—	< 0.6	0.7	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	—	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 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	08	07	18
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

1. Flow existed through this outfall 30 of 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

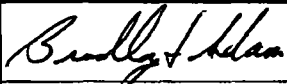
MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

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

MONITORING PERIOD																		
YEAR			MONTH			DAY				YEAR			MONTH			DAY		
0 8			0 6			0 1				0 8			0 6			3 0		
From:						To:												

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	3.0	7.5	(19)	0	240	DC	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24	
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB	
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB	
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Bradley J. Adams						815	406-3700	08	07	18		
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY		
TYPED OR PRINTED												

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

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

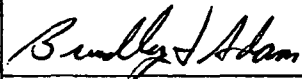
MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	8	0	6	0	1	To:	0	8	0	6

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500		
	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	< 1.9	3.0	(19)	0	240	GR	
	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.027	0.042	(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	08	07	18
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	
From:	0	8	0	6	0	1		To:	0	8	0	6	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)	—	< 1.4	2.2	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0	30.0	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	—	—	(26)	—	< 6.1	11.3	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0	20.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.021	0.023	(03)	—	—	—	—	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	—	—	—	—		DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	08	07	18
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
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)**

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

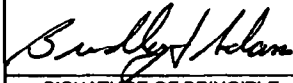
FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	8	0	6	0	1	To:	0	8	0
							6	3	0

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	08	07	18
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 3 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR			MONTH			DAY			
0	8		0	6		0	1		

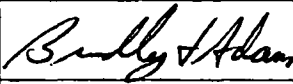
From:

YEAR			MONTH			DAY			
0	8		0	6		3	0		

To:

***NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500		
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	< 1.4	< 1.4	(19)	0	290	GR	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.096	0.209	(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	08	07	18		
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											
YEAR			MONTH			DAY			YEAR		
From:	0	8	0	6	0	1	To:	0	8	0	6

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	—	—	—	8.53	—	8.82	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	—	6.0 MINIMUM	—	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	—	—	(26)	—	—	0.016	(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)	—	—	0.125	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	21.40	32.48	(03)	—	—	—	—	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	—	—	—	—		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	0.18	0.45	(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.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	07	18	
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 3/99)											

SD

PAGE 1 OF 1

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD											
YEAR	MONTH	DAY	YEAR	MONTH	DAY						
From: 0	8	0	6	0	1	To: 0	8	0	6	3	0

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE			
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS						
PH	SAMPLE MEASUREMENT	---	---	---	---	---	---	(12)						
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	---	6.0 MINIMUM	---	9.0 MAXIMUM	SU		SEE PERMIT	GRAB			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)						
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB			
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)						
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB			
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)						
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB			
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)						
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB			
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)						
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB			
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)						
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB			
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE						
Bradley J. Adams						815	406-3700	08	07	18				
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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 8 0 6 0 1	To: 0 8 0 6 3 0				

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

***NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	---	---	---	---			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	07	18	
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
June 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
06/07/08	120	96.2
06/14/08	120	89.9
06/21/08	120	87.9
06/28/08	120	90.2

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

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of June 2008.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
June 2008

COMMENTS:

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

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
06/01/08	55	57	06/08/08	45	45
06/02/08	55	59			
06/03/08	55	55			
06/04/08	42	41			
06/05/08	45	42			
06/06/08	55	55			
06/07/08	44	42			

HALOGEN DOSING CURVE

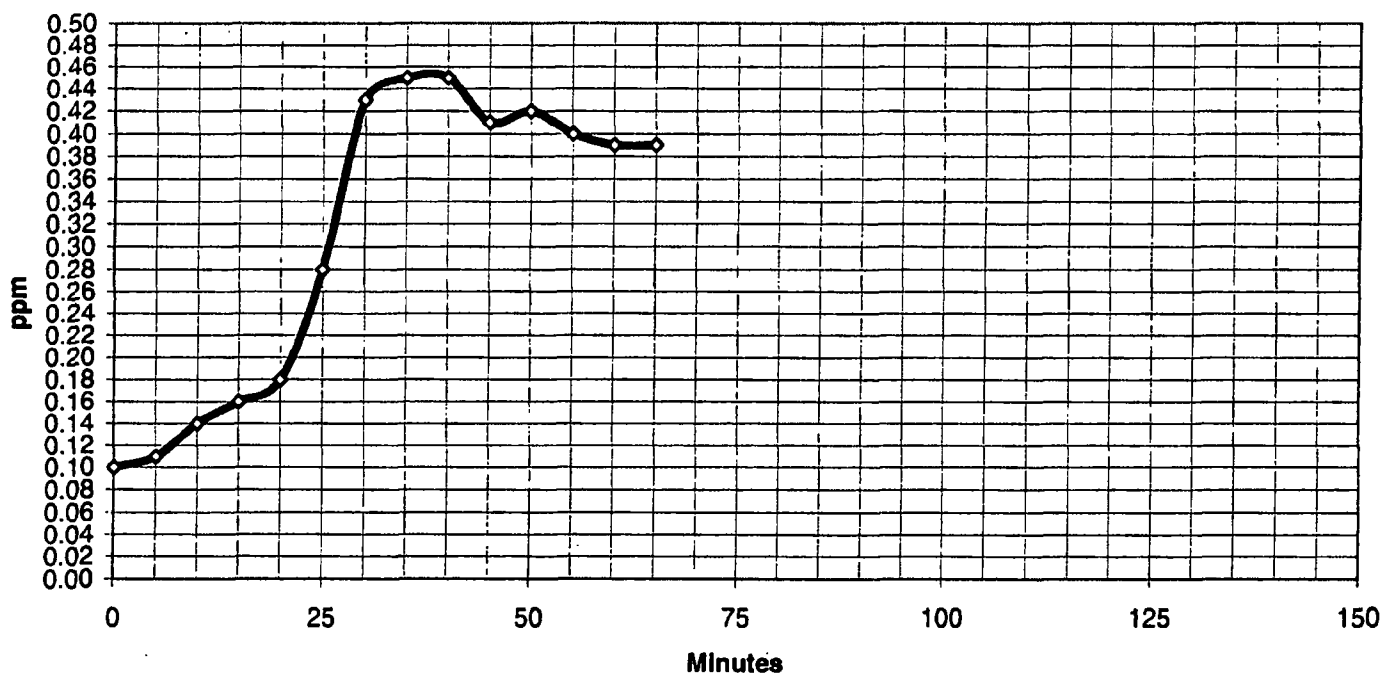
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/03/08
Time: 10:46

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
06/09/08	50	50
06/10/08	50	50
06/11/08	43	43
06/12/08	42	40
06/13/08	55	55
06/14/08	50	50
06/15/08	50	50

=====

HALOGEN DOSING CURVE

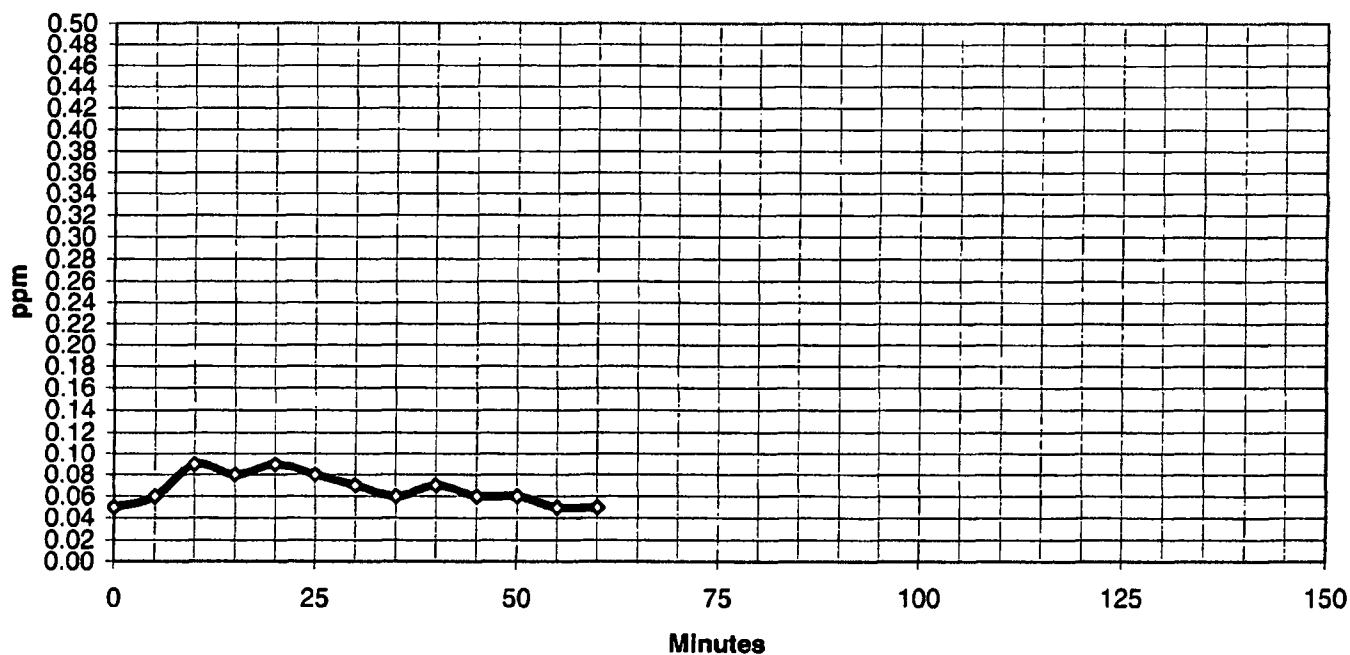
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/09/08
Time: 10:41

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

Unit: l

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
06/16/08	50	50
06/17/08	51	61
06/18/08	51	57
06/19/08	51	51
06/20/08	50	50
06/21/08	50	50
06/22/08	50	50

HALOGEN DOSING CURVE

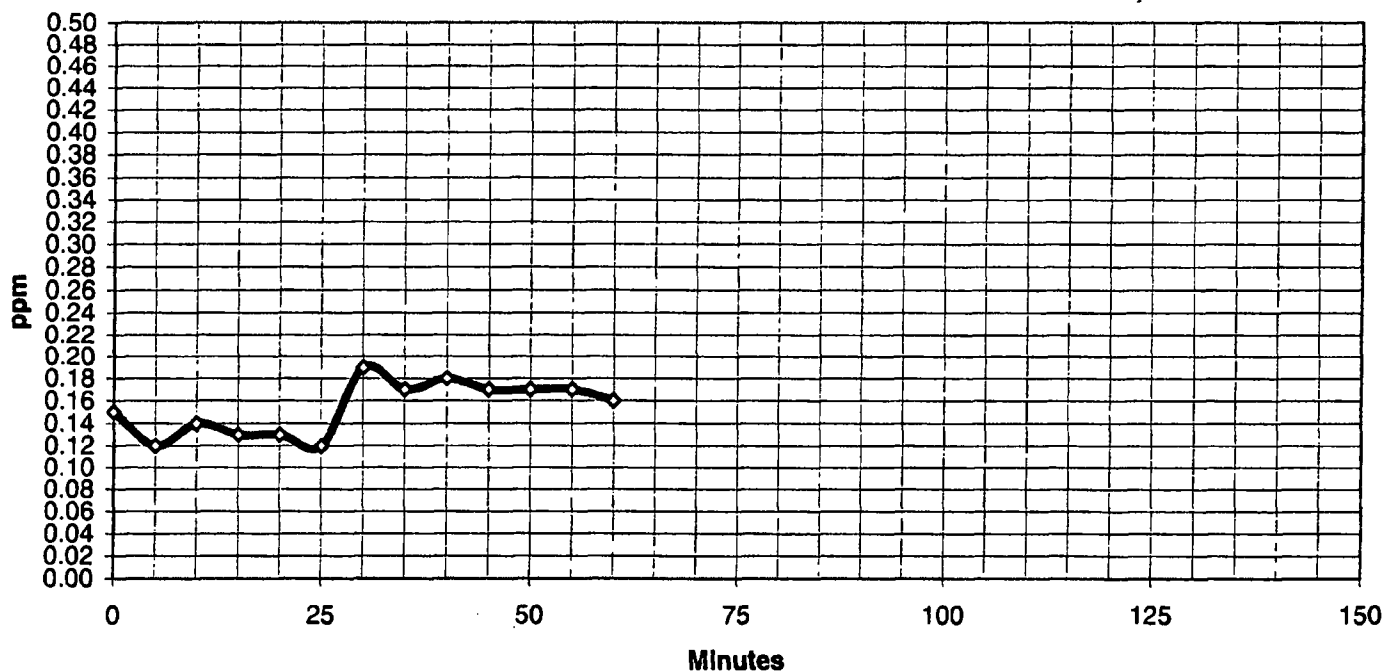
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/16/08
Time: 13:15

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
06/23/08	43	45	06/30/08	50	55
06/24/08	44	41			
06/25/08	43	40			
06/26/08	51	50			
06/27/08	50	50			
06/28/08	50	50			
06/29/08	52	54			

HALOGEN DOSING CURVE

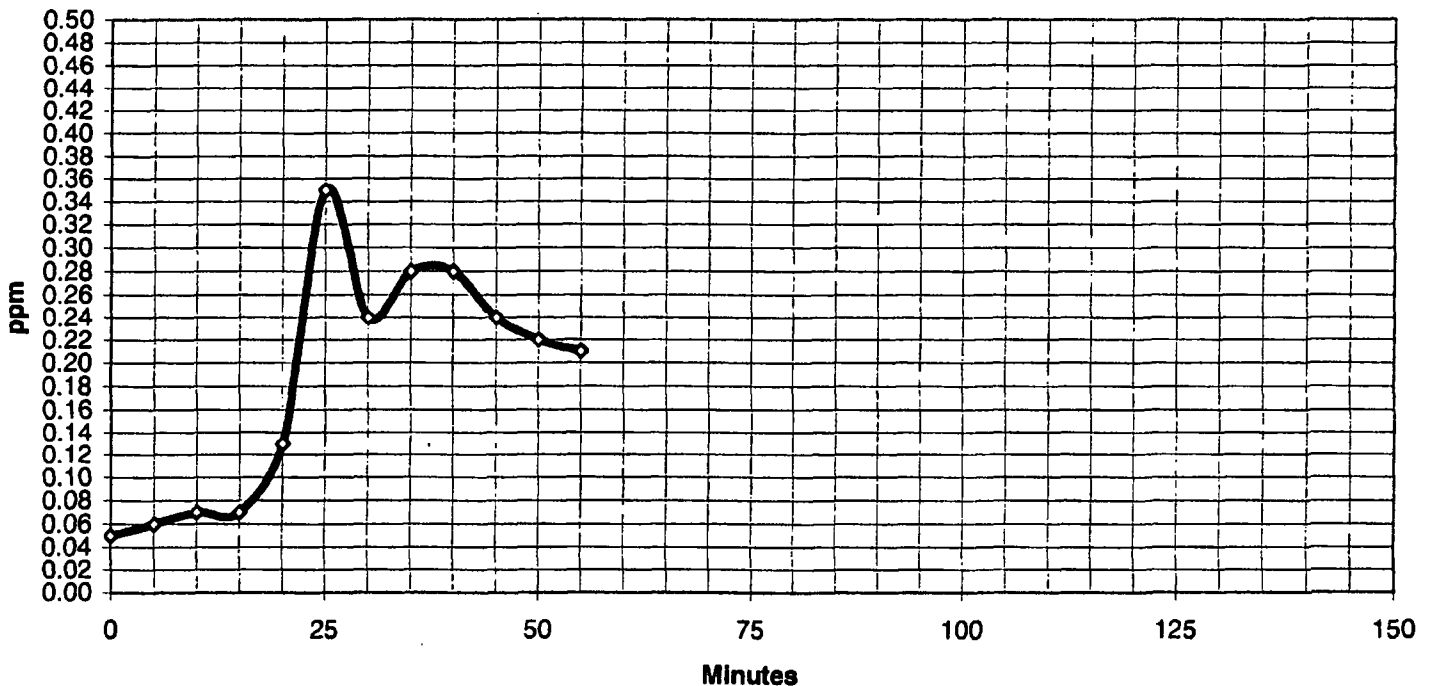
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/23/08
Time: 09:17

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

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

www.exeloncorp.com

August 21, 2008

LTR: BYRON 2008-0084
File: 2.09.0411
1.10.0101

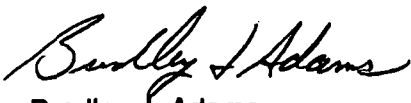
Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant 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 July 1, 2008 through July 31, 2008.

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

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron Station

**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		
0	8	0	7	0	1	0	8	0	7	3	1

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.8	< 0.8	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		ONCE/MONTH	COMP-8
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1	0.2	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2	0.4	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	08	08	21
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. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 23 of 31 days during this month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)

EFFLUENT

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

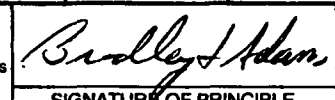
MONITORING PERIOD												
YEAR		MONTH		DAY			YEAR		MONTH		DAY	
0	8	0	7	0	1		0	8	0	7	3	1

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500		
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY		1.0	2.0	MG/L		DAILY	GRAB	
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX					
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.009	0.070	(03)	-----	-----	-----	-----	0	135	CN	
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	-----		DAILY	CONTIN	
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX									
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 815 406-3700 AREA CODE NUMBER		DATE 08 08 21 YEAR MONTH DAY		
PRINCIPAL EXECUTIVE OFFICER												
Bradley J. Adams												
Plant Manager												
TYPED OR PRINTED												

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER


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

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

MONITORING PERIOD														
YEAR			MONTH		DAY			YEAR			MONTH		DAY	
From:	0	8	0	7	0	1		To:	0	8	0	7	3	1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE											
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS														
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.12	< 0.13	(26)	-----	< 2.0	< 2.0	(19)	0	290	DC											
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24											
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.49	-----	7.53	(12)	0	290	GR											
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB											
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.09	0.10	(26)	-----	1.6	2.0	(19)	0	290	DC											
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.006	0.011	(03)	-----	-----	-----	---	0	135	CN											
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN											
	SAMPLE MEASUREMENT																					
	PERMIT REQUIREMENT																					
	SAMPLE MEASUREMENT																					
	PERMIT REQUIREMENT																					
	SAMPLE MEASUREMENT																					
	PERMIT REQUIREMENT																					
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE												
Bradley J. Adams						815	406-3700	08	08	21												
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY												
TYPED OR PRINTED																						
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)																						
1. Flow existed through this outfall 29 of 31 days during the month.																						

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	8	0	7	0	1	From:	0	8	0
						To:	7	3	1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 6.4	17.2	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	08	08	21
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 8 0 7 0 1	To: 0 8 0 7 3 1				

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN)	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
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.5	1.9	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.030	0.053	(03)	-----	-----	-----	----	0	135	TM
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	08	21	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

RADWASTE TREATMENT (FORMER 001D)
EFFLUENT

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	8	0	7	0	1	0	8	0	7	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)	-----	3.0	4.8	(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)	-----	< 3.0	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	0.045	(03)	-----	-----	-----	-----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager
TYPED OR PRINTED

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

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

TELEPHONE

815 406-3700

AREA CODE NUMBER

DATE

08 08 21

YEAR MONTH DAY

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

1. Flow existed through this outfall 9 of 31 days during the month.

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

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		
0	8	0	0	7	0	1	0	8

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	----		-----		(12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	08	21	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

1. 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

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:	0	8	0	7	0	1		To:	0	8	0	7	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	MG/L		DAILY	GRAB			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500				
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB			
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.6	1.8	(19)	0	290	GR			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.370	0.696	(03)	-----	-----	-----	---	0	290	TM			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		TWICE/MONTH	TOTALIZ.			
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.							TELEPHONE		DATE				
Bradley J. Adams								815	406-3700	08	08	21		
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)														

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD


YEAR	MONTH	DAY	YEAR	MONTH	DAY
08	07	01	08	07	31

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.69	-----	8.97	(12)	0	240	GR
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.014	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX.	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.07	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX.	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX.	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	22.71	31.31	(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)	-----	0.17	0.33	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX.	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX.	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	08	08	21
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

**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	
0 8			0 7		0 1			0 8			0 7		3 1	
From:							To:							

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

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

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	08	08	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

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

OCR0501

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

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		
From:	0	8	0	7	0	1	To:	0	8	0	7

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)				
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)				
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)				
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	----				
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ	
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
	SAMPLE MEASUREMENT											
	PERMIT REQUIREMENT											
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
Bradley J. Adams								815	406-3700	08	08	21
Plant Manager								AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED												

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

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
July 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
07/06/08	120	93.1
07/12/08	120	91.2
07/19/08	120	92.5
07/26/08	120	91.3

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 July 2008.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
July 2008**

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
07/01/08	45	45
07/02/08	53	51
07/03/08	50	48
07/04/08	50	47
07/05/08	48	50
07/06/08	50	47

HALOGEN DOSING CURVE

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

Date: 07/01/08

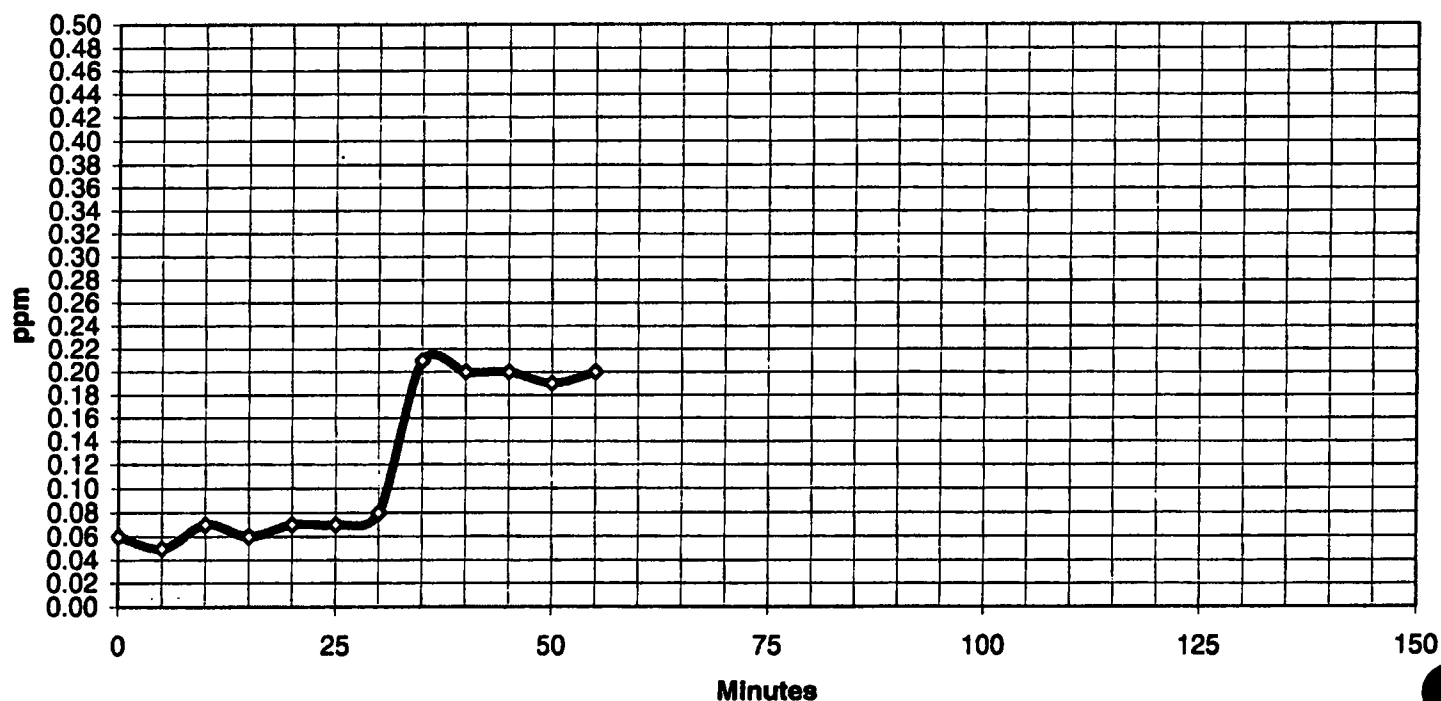
Analyzed by: M.D.

Unit: 2

Time: 10:35

Reviewed by: D.M.

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
07/07/08	55	54
07/08/08	51	50
07/09/08	55	55
07/10/08	55	54
07/11/08	55	54
07/12/08	55	55
07/13/08	54	47

HALOGEN DOSING CURVE

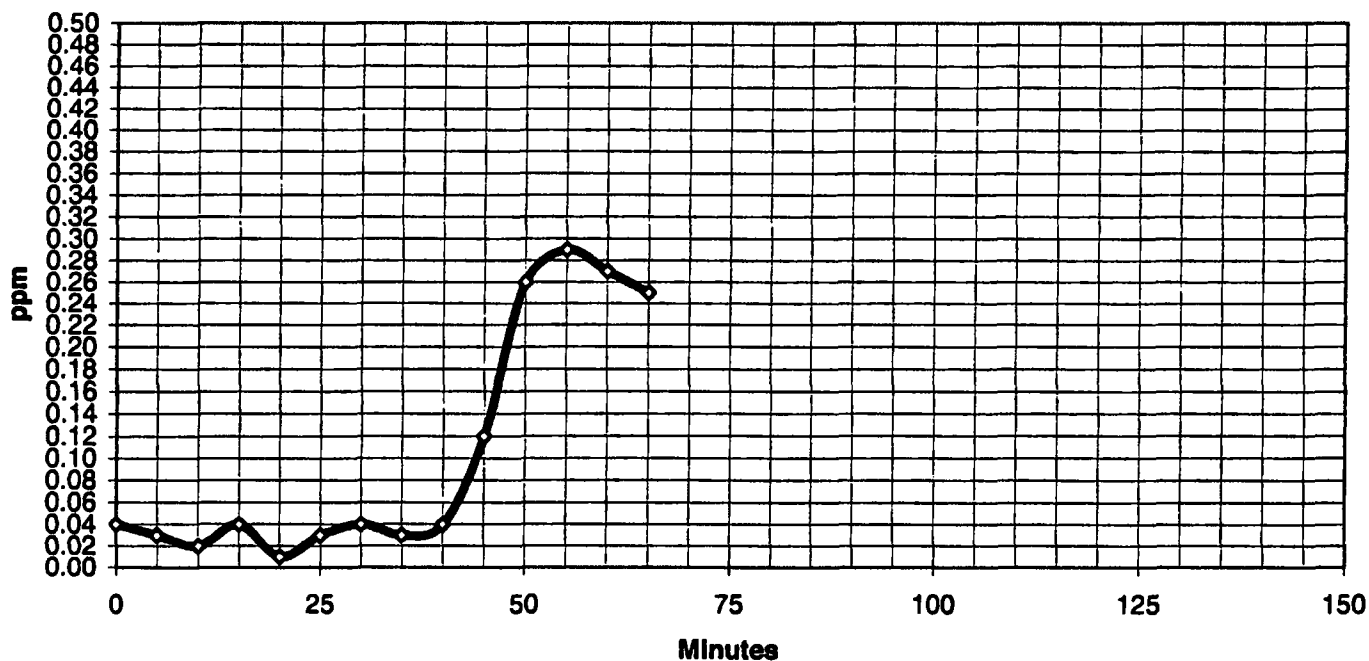
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/07/08
Time: 10:50

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
07/14/08	60	60
07/15/08	50	60
07/16/08	52	60
07/17/08	66	60
07/18/08	60	50
07/19/08	62	61
07/20/08	60	60

HALOGEN DOSING CURVE

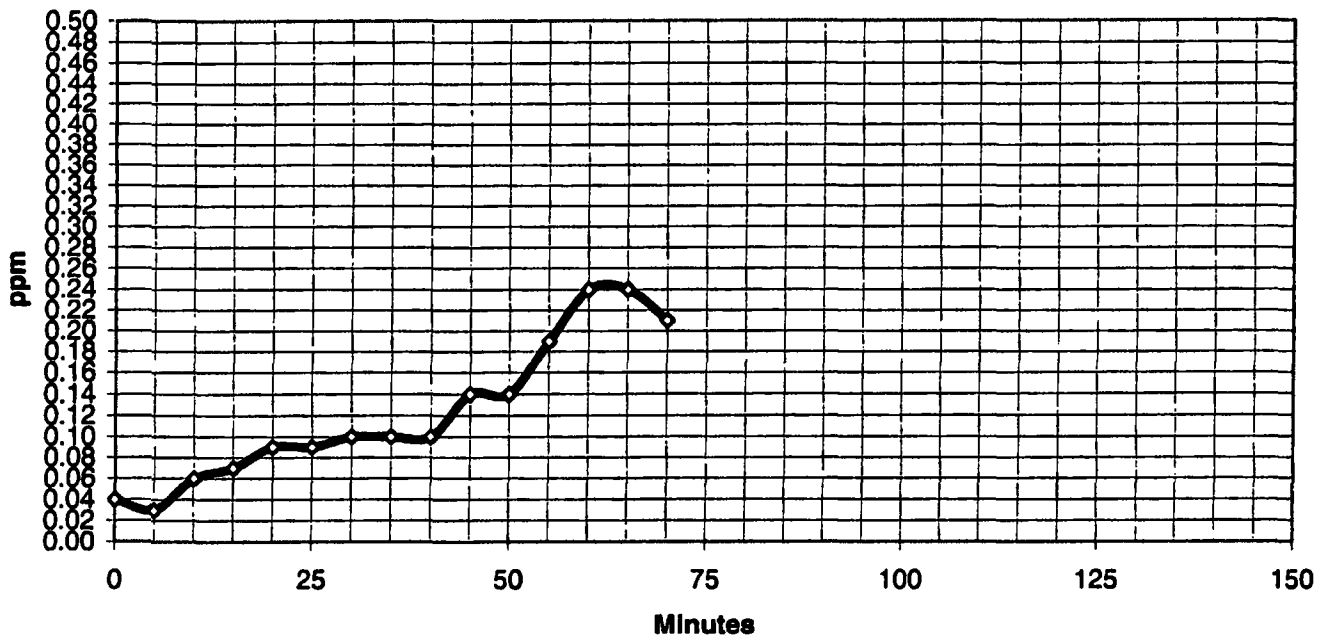
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/16/08
Time: 11:56

Analyzed by: M.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
07/21/08	57	55
07/22/08	54	52
07/23/08	60	60
07/24/08	63	64
07/25/08	60	60
07/26/08	62	63
07/27/08	57	52

HALOGEN DOSING CURVE

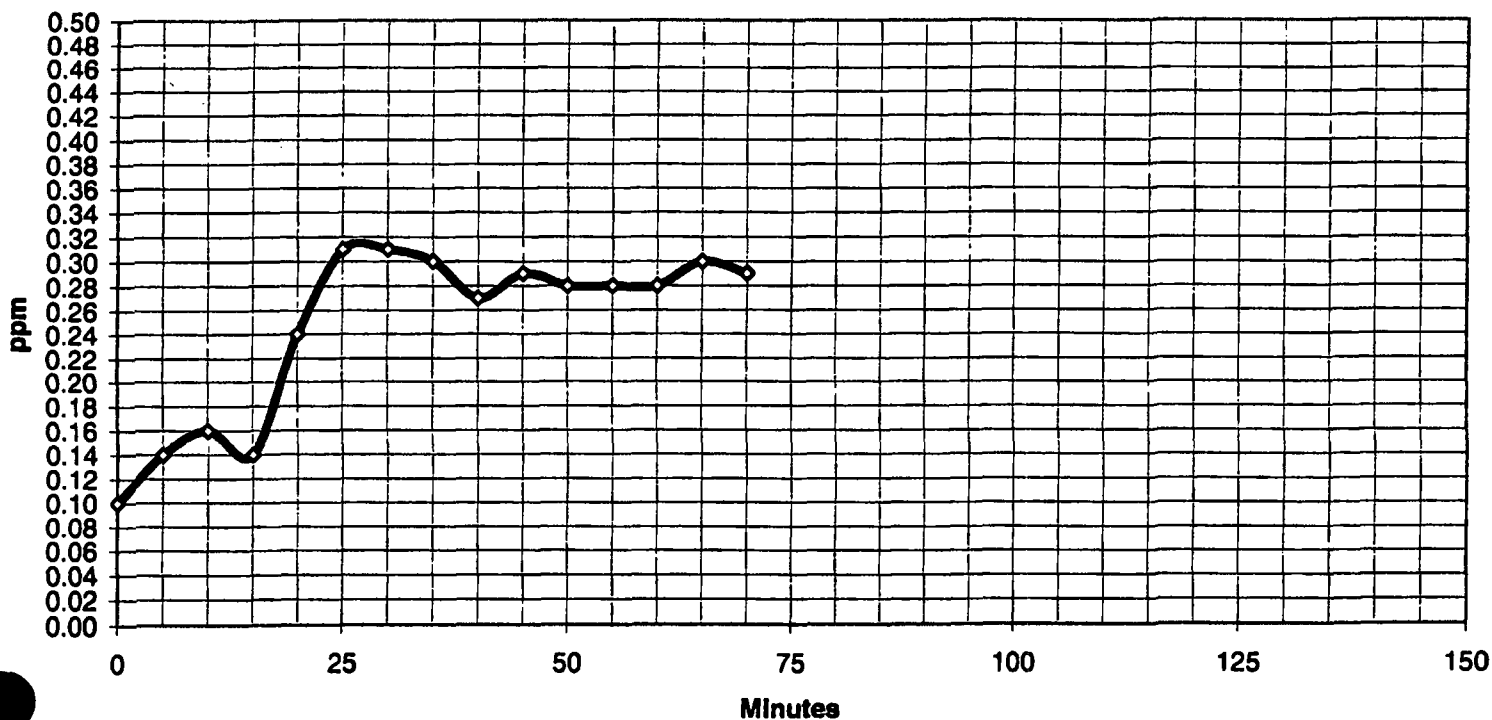
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 07/21/08
Time: 12:31

Analyzed by: 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
07/28/08	49	51
07/29/08	54	51
07/30/08	53	53
07/31/08	57	60

HALOGEN DOSING CURVE

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

Date: 07/28/08

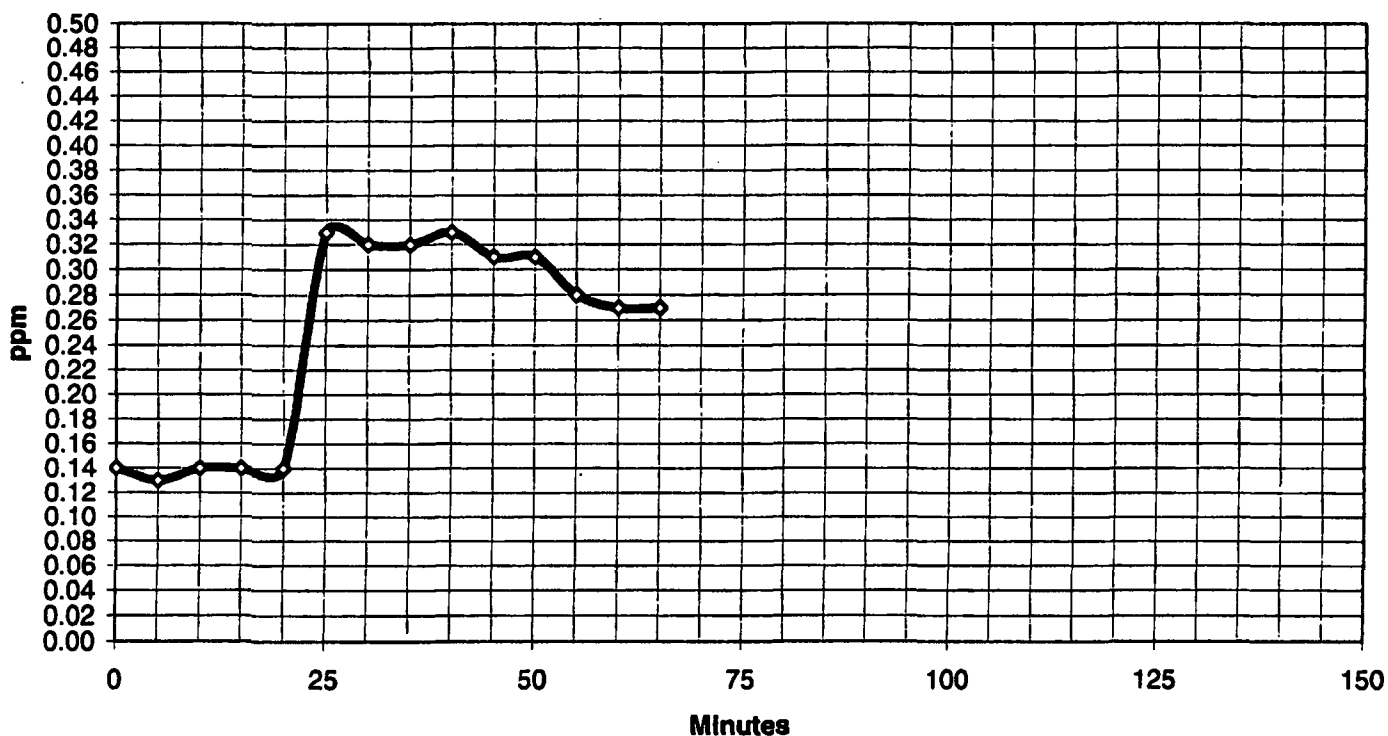
Analyzed by: D.C.A.

Unit: 2

Time: 11:41

Reviewed by: D.M.

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



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

www.exeloncorp.com

September 16, 2008

LTR: BYRON 2008-0098
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 August 1, 2008 through August 31, 2008.

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

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.4	1.4	(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.	TELEPHONE		DATE		
Bradley J. Adams						
Plant Manager		815	406-3700	08	09	16
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 20 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	MONTH	DAY				
0	8	0	8	0	1	To:	0	8	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
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.012	0.076	(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.		TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	08	09	16
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)

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

OCR0501

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY		
	0	8	0	8	0	1	0	8	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	< 0.14	< 0.17	(26)	-----	< 2.0	< 2.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY		30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	----	7.42	-----	7.49	(12)	0	290	GR
	PERMIT REQUIREMENT			----	6.0 MINIMUM		9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.06	0.06	(26)	-----	0.9	1.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY		30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 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

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

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

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE
815 406-3700

DATE
08 09 16

AREA
CODE NUMBER YEAR MONTH DAY

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

1. Flow existed through this outfall 29 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	4.6	8.7	(19)	0	240	DC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	08	09	16
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 18 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.7	2.0	(19)	0	240	GR
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.031	0.048	(03)	-----	-----	-----	----	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD				----		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	09	16	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

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			
0	8		0	8		0	1		

From: To:

YEAR			MONTH			DAY			
0	8		0	8		3	1		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 2.0	3.8	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT			LBS/DY		15.0	30.0	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 2.9	4.5	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT			LBS/DY		15.0	20.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.023	(03)	-----	-----	-----	----	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD						DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	08	09	16	
Bradley J. Adams						AREA CODE	NUMBER	YEAR	MONTH	DAY	
Plant Manager	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
TYPED OR PRINTED											

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

1. Flow existed through this outfall 9 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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


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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	08	09	16
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 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	8	0	8	0	1	To:	0	8	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 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.4	1.5	(19)	0	290	GR
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.168	0.407	(03)	-----	-----	-----	-----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	08	09	16
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

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

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.63	-----	8.65	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.013	(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)	-----	-----	0.053	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	23.41	32.71	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.17	0.40	(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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	09	16	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

SEE ATTACHED

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

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC

ADDRESS 4300 Winfield Road

Warrenville, IL 60555

FACILITY Byron Nuclear Power Station

LOCATION 4450 North German Church Road

Byron, IL 61010

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

From:

To:

MAJOR

(SUBR 01)

F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW

STORMWATER

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH											
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				8.0 MINIMUM		9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED				(26)				(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)				(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)				(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)				(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)				(26)				(19)			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)				(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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	09	16	
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				
0	8	0	8	0	1	From:	0	8	0
						To:	8	3	1

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01067 1 0 0	PERMIT REQUIREMENT			LBS/DY		1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY		1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
03582 1 0 0	PERMIT REQUIREMENT			LBS/DY		15.0	20.0	MG/L		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	-----	-----	-----	----		500	
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD				----		TWICE/MONTH	TOTALIZ
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	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	08	09	16	
Bradley J. Adams						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	
Plant Manager											
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
August 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
08/02/08	120	88.8
08/09/08	120	89.3
08/16/08	120	87.4
08/23/08	120	91.6
08/30/08	120	90.0

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 August 2008.

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 2008**

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
08/01/08	60	62	08/08/08	51	51
08/02/08	60	60	08/09/08	51	51
08/03/08	53	52	08/10/08	50	50
08/04/08	60	60			
08/05/08	60	60			
08/06/08	50	50			
08/07/08	50	50			

HALOGEN DOSING CURVE

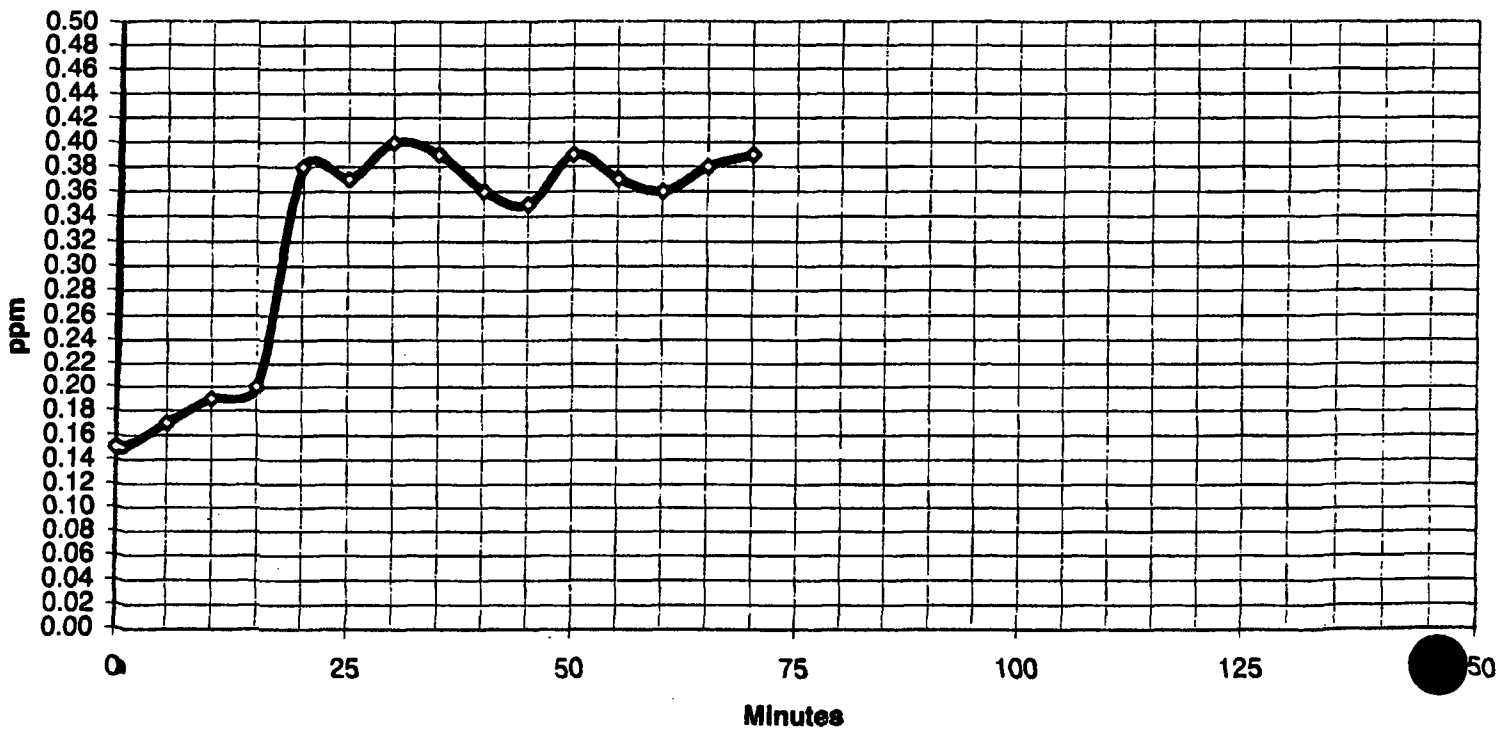
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/05/08
Time: 10:21

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

Unit: l

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/11/08	52	50
08/12/08	52	54
08/13/08	50	51
08/14/08	50	51
08/15/08	43	45
08/16/08	45	44
08/17/08	34	45

HALOGEN DOSING CURVE

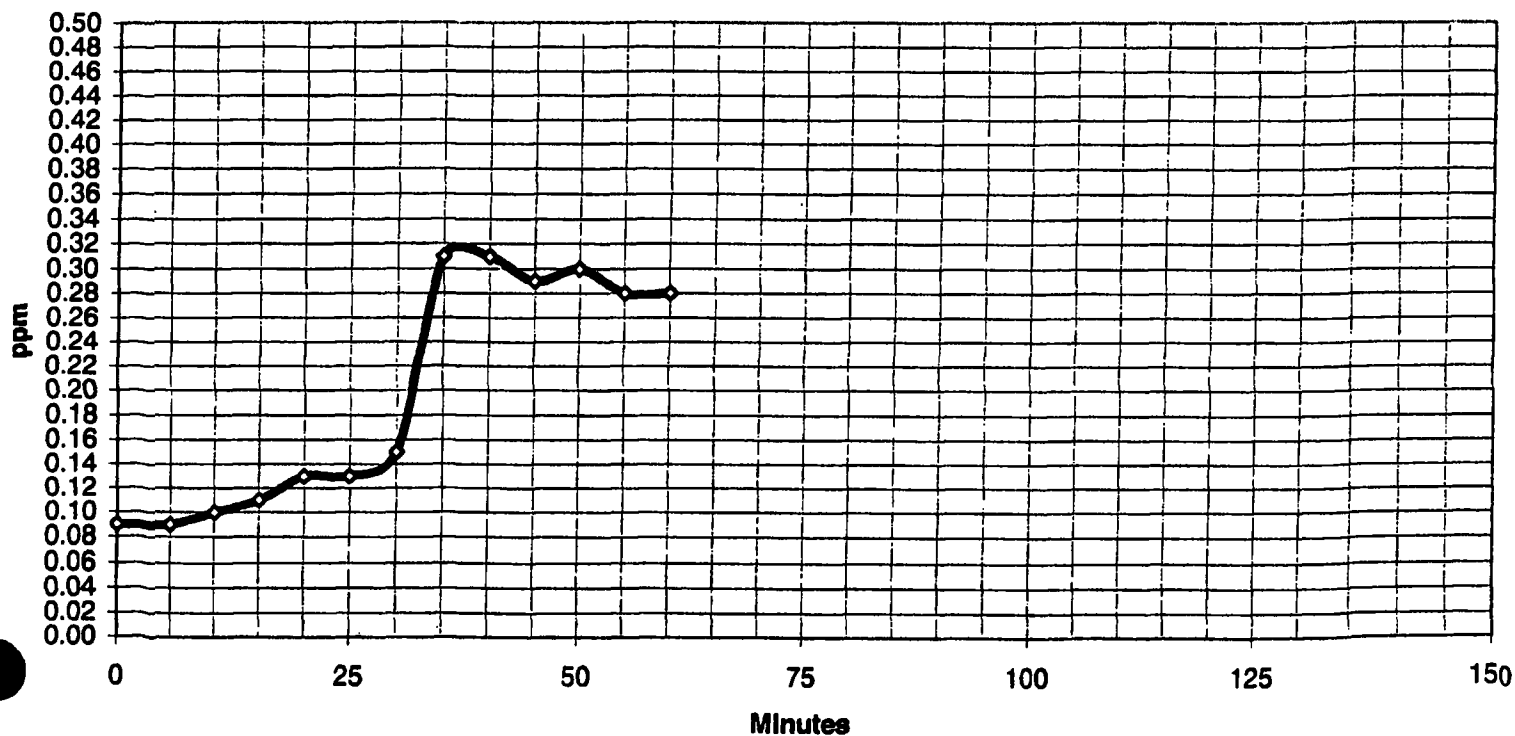
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/11/08
Time: 10:32

Analyzed by: J.E.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

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
08/18/08	45	45
08/19/08	45	45
08/20/08	45	45
08/21/08	45	45
08/22/08	45	45
08/23/08	48	46
08/24/08	46	46

HALOGEN DOSING CURVE

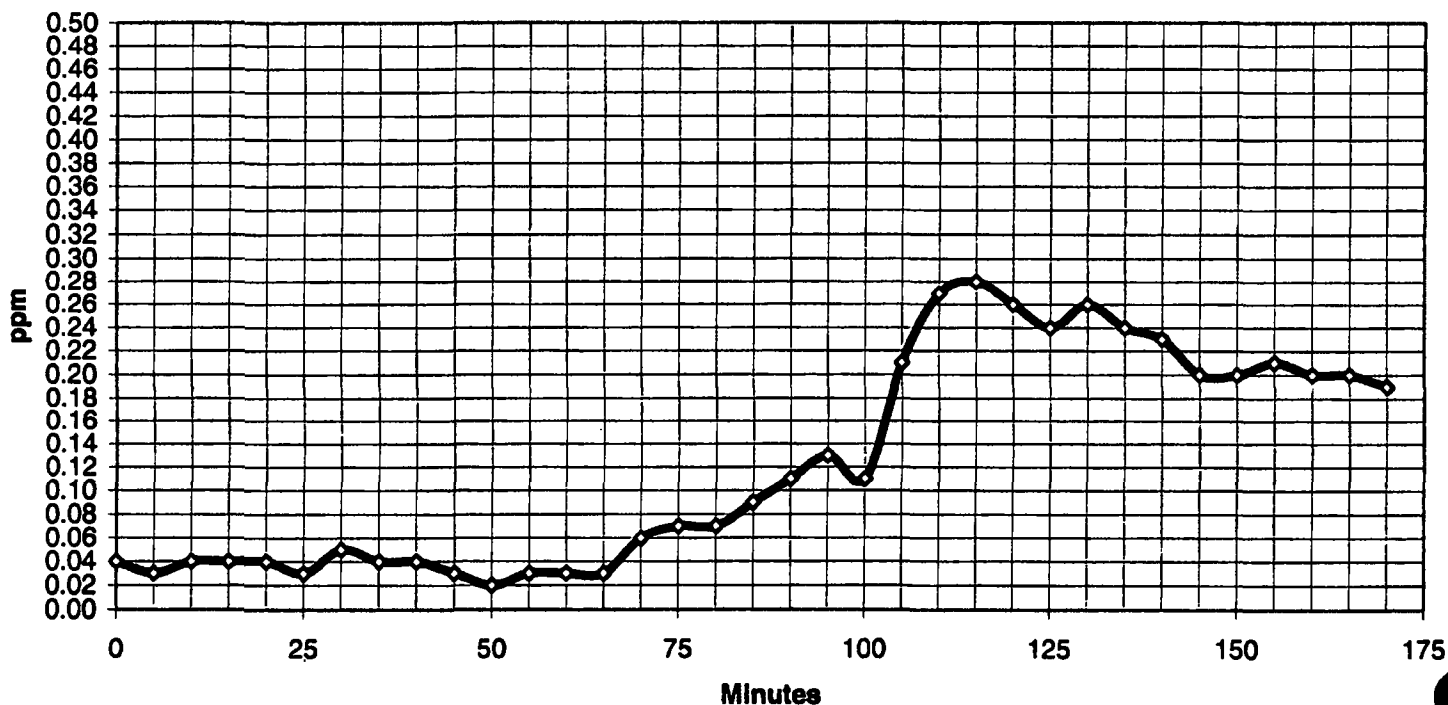
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/20/08
Time: 09:15

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

Unit: I

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
08/25/08	45	45
08/26/08	46	45
08/27/08	40	40
08/28/08	40	40
08/29/08	40	40
08/30/08	40	43
08/31/08	40	40

HALOGEN DOSING CURVE

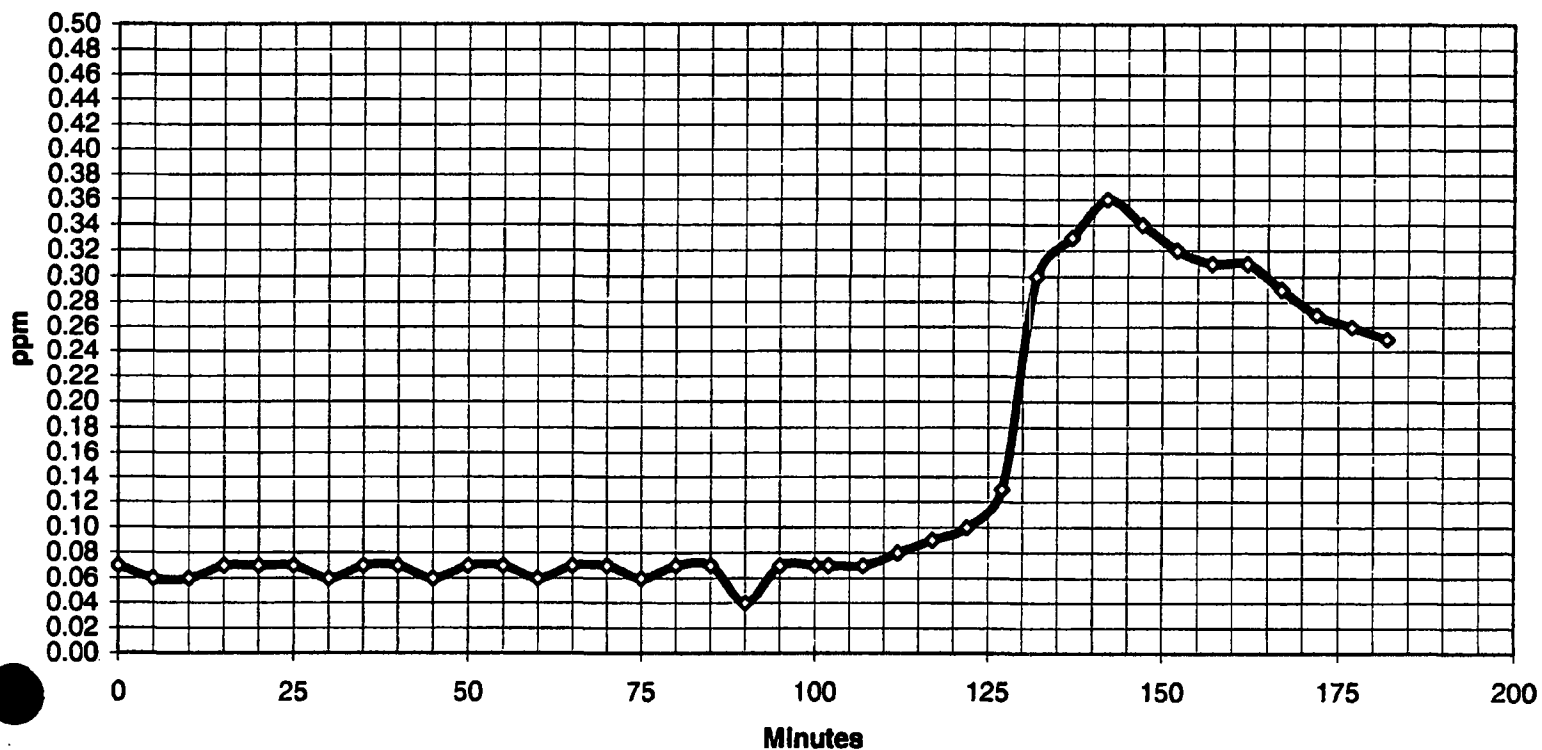
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 08/25/08
Time: 10:00

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

Unit: 2

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



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

www.exeloncorp.com

October 17, 2008

LTR: BYRON 2008 - 0107
File: 2.09.0411
1.10.0101

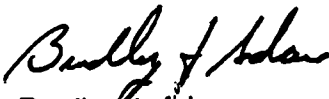
Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
Springfield, IL 62794-9276

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 September 1, 2008 through September 30, 2008.

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

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry - Byron

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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


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

MONITORING PERIOD																		
YEAR			MONTH			DAY				YEAR			MONTH			DAY		
0 8			0 9			0 1				0 8			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)	-----	0.7	0.7	(19)	0	285	EC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG.	30.0 DAILY MAX.	MG/L		ONCE/MONTH	COMP-B
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG.	0.2 DAILY MAX.	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	2.0 DAILY MAX.	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG.	1.0 DAILY MAX.	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	1.0 DAILY MAX.	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG.	0.4 DAILY MAX.	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	2.0 DAILY MAX.	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		10/7-08DATE		
Bradley J. Adams			815	406-3700	08	10	17
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED			SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

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

2. Flow existed 22 of 30 days during this month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	8	0		0	8	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)	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	0.007	0.068	(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		08	10	17	
Bradley J. Adams						AREA CODE NUMBER		YEAR	MONTH	DAY	
Plant Manager											
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

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: 0 8			0 9			0 1			To: 0 8		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.17	< 0.27	(26)	-----	< 2.0	< 2.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.30	-----	7.33	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.12	0.21	(26)	-----	1.2	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 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.008	0.017	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE 815 406-3700		DATE 10-17-08			
Bradley J. Adams								08	10	17	
Plant Manager								YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					AREA CODE	NUMBER	YEAR	MONTH	DAY	

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

1. Flow existed through this outfall 29 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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


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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.7	3.4	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Bradley J. Adams Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE 10-17-08 DATE				
			815	406-3700	08	10	17
			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 19 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
08	09	01	08	09	30

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	< 1.6	1.9	(19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.026	0.056	(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 815 406-3700
AREA CODE NUMBER YEAR MONTH DAY
10-17-08 DATE

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

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


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

MONITORING PERIOD									
From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY		
	0	8	0		0	8	0	9	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)	-----	< 0.2	< 0.5	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		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	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.023	0.023	(03)	-----	-----	-----	-----	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE 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	08	10	17
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 9 of 30 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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


MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 8 0 9 0 1	To: 0 8 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	_____	_____	_____	6.0 MINIMUM	_____	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	_____	_____	(26)	_____	_____	_____	(19)		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	_____	_____	(26)	_____	_____	_____	(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	_____	_____	(26)	_____	_____	_____	(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	_____	_____	(26)	_____	_____	_____	(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	_____	_____	(26)	_____	_____	_____	(19)		500	
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	_____	_____	(26)	_____	_____	_____	(19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	10-17-08 DATE			
Bradley J. Adams			815 406-3700	08	10	17	
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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

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

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD																		
YEAR			MONTH			DAY				YEAR			MONTH			DAY		
0 8			0 9			0 1				0 8			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			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	2.0 DAILY MAX.	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG.	2.0 DAILY MAX.	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 2.0	2.5	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG.	20.0 DAILY MAX.	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.396	0.948	(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	10-17-03 DATE		
Bradley J. Adams								815 406-3700	08	10	17
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)**

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

COOLING SYSTEM BLOWDOWN
EFFLUENT

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

MONITORING PERIOD																			
YEAR			MONTH			DAY				YEAR			MONTH			DAY			
0 8			0 9			0 1				0 8			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			
PH	SAMPLE MEASUREMENT	—	—	—	8.48	—	8.64	(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)	—	—	0.012	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	—	—	(26)	—	—	0.038	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	23.51	30.89	(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)	—	0.20	0.33	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	—	—	LBS/DY	—	—	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE 10-17-08 DATE
815 406-3700 08 10 17
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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH											
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT							(12)			
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED				(26)				(19)			
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
	PERMIT REQUIREMENT			LBS/DY							
CHROMIUM, HEXAVALENT (AS CR)				(26)				(19)			
01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
	PERMIT REQUIREMENT			LBS/DY							
CHROMIUM, TOTAL (AS CR)				(26)				(19)			
01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
	PERMIT REQUIREMENT			LBS/DY							
COPPER, TOTAL (AS CU)				(26)				(19)			
01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
	PERMIT REQUIREMENT			LBS/DY							
IRON, TOTAL (AS FE)				(26)				(19)			
01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
	PERMIT REQUIREMENT			LBS/DY							
LEAD, TOTAL (AS PB)				(26)				(19)			
01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT					0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
	PERMIT REQUIREMENT			LBS/DY							
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 10-17-08 DATE			
Bratley J. Adams						815 406-3700		08	10	17	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.											
2. 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
0	8	0	9	0	1
From:			To:		
0	8	0	9	3	0

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
	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)		500	
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	---	---	---	---		500	
	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 10-17-08 DATE

815 406-3700 08 10 17

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
September 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
09/06/08	120	82.1
09/13/08	120	92.2
09/20/08	120	89.1
09/27/08	120	88.7

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 2008.

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 2008**

COMMENTS:

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

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/01/08	40	40
09/02/08	40	41
09/03/08	40	40
09/04/08	40	40
09/05/08	40	40
09/06/08	40	40
09/07/08	40	40

HALOGEN DOSING CURVE

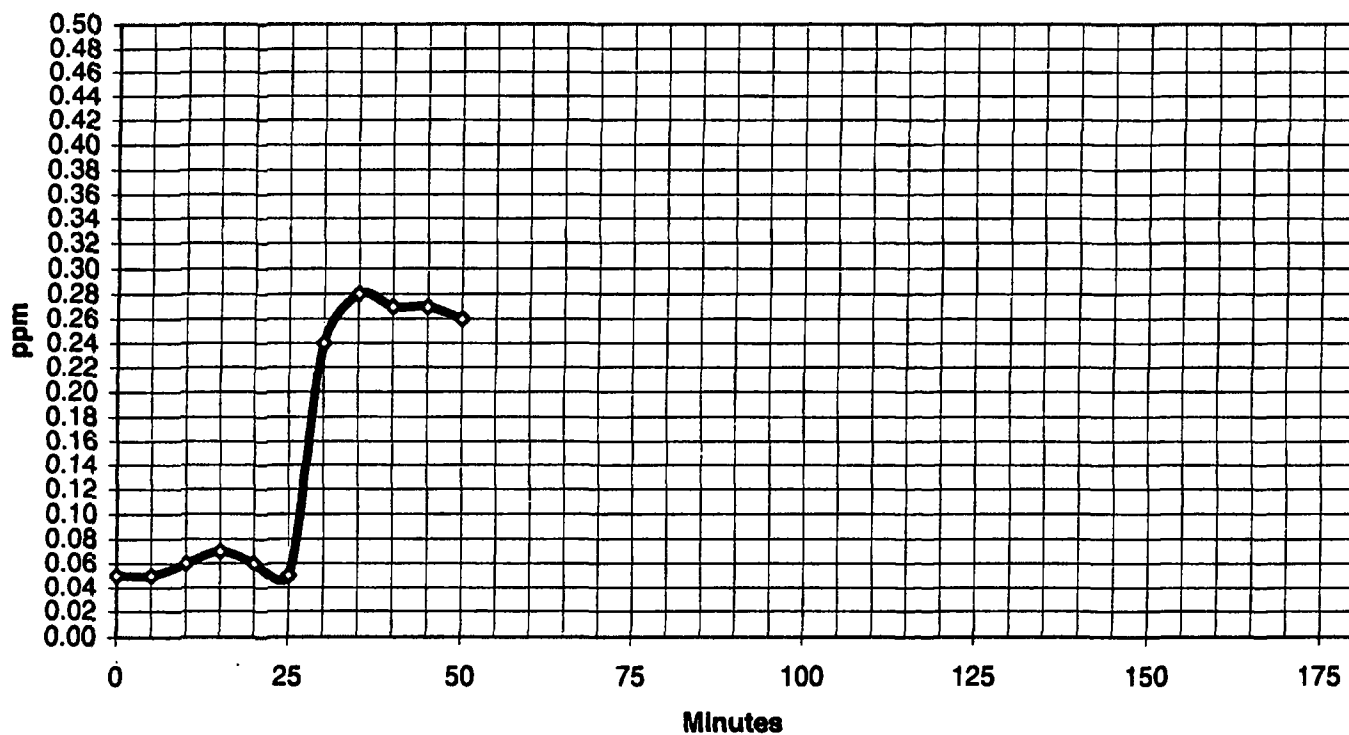
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/02/08
Time: 10:55

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

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
09/08/08	41	40
09/09/08	40	40
09/10/08	40	40
09/11/08	39	40
09/12/08	43	44
09/13/08	42	43
09/14/08	40	40

HALOGEN DOSING CURVE

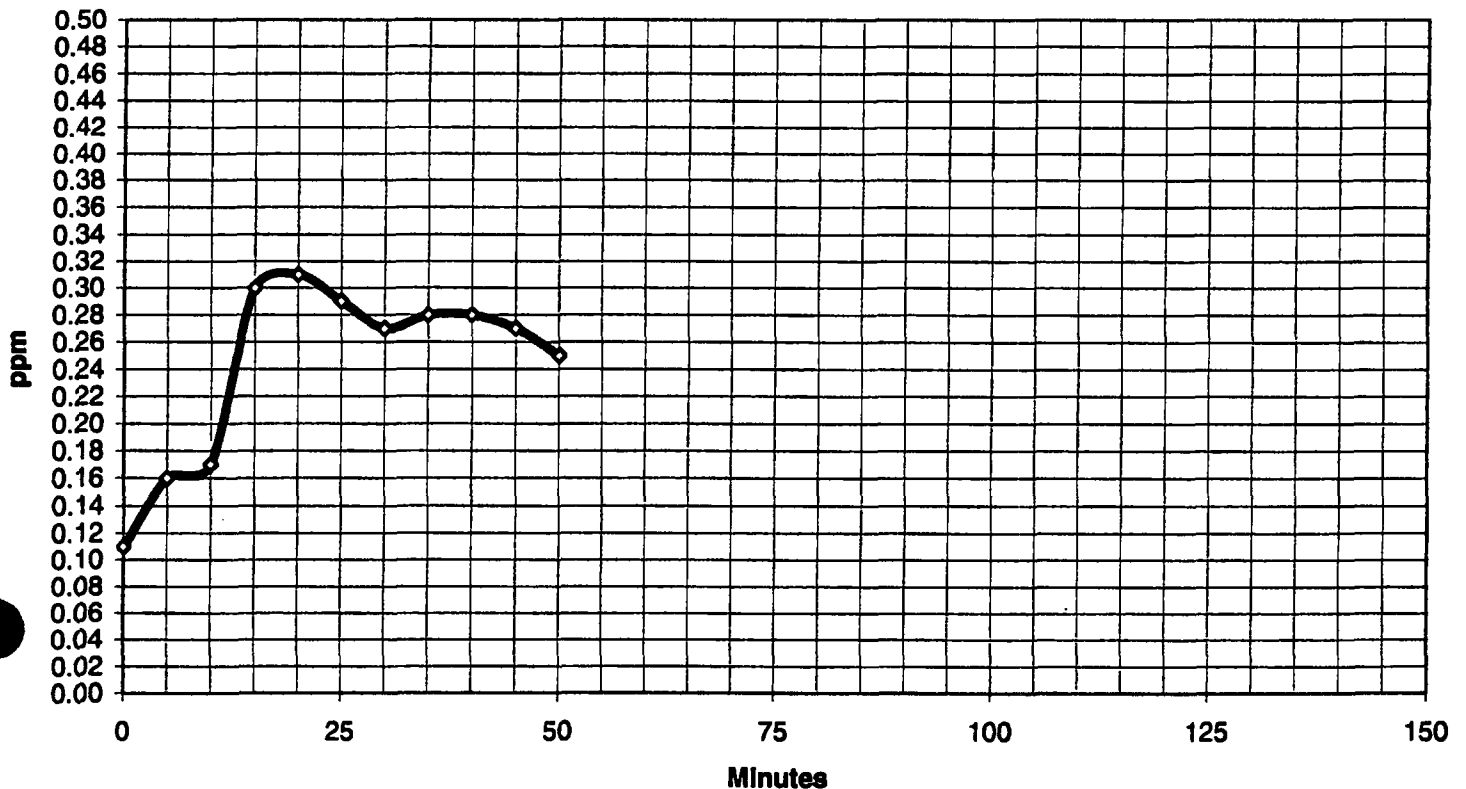
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/08/08
Time: 10:37

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
09/15/08	40	40
09/16/08	40	40
09/17/08	40	42
09/18/08	40	40
09/19/08	43	41
09/20/08	40	40
09/21/08	40	46

HALOGEN DOSING CURVE

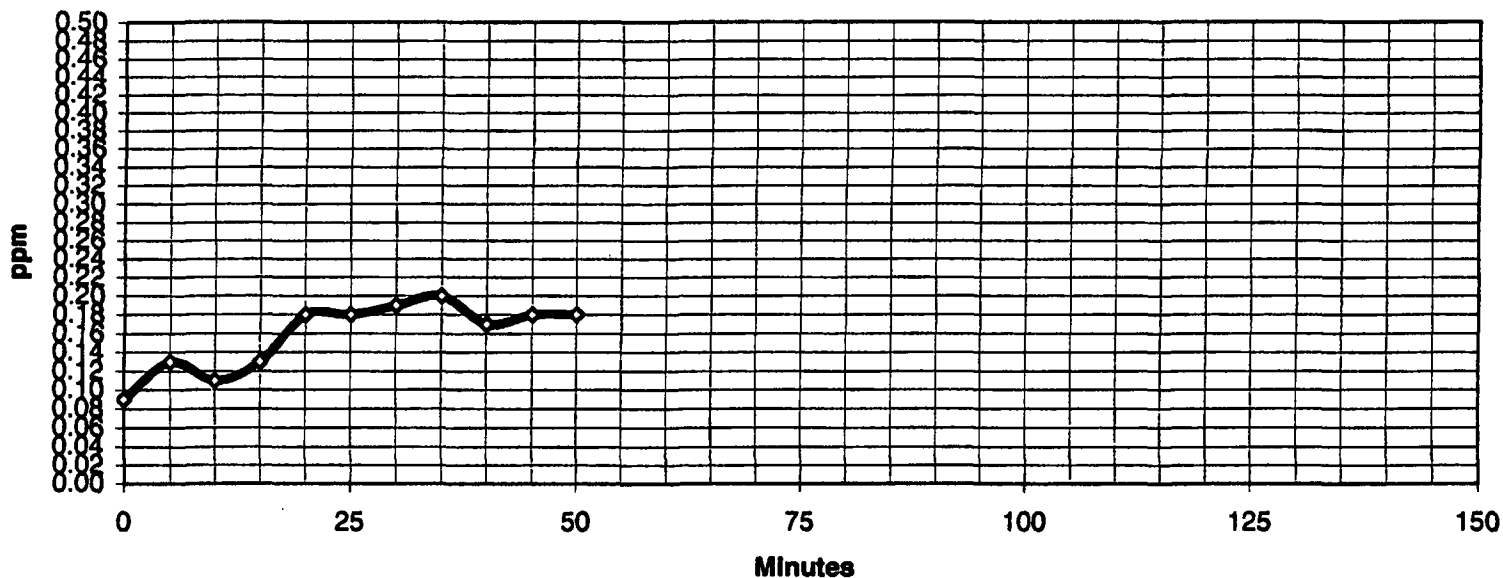
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/16/08
Time: 12:20

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/22/08	40	40
09/23/08	40	40
09/24/08	40	40
09/25/08	40	40
09/26/08	40	40
09/27/08	40	40
09/28/08	40	40

HALOGEN DOSING CURVE

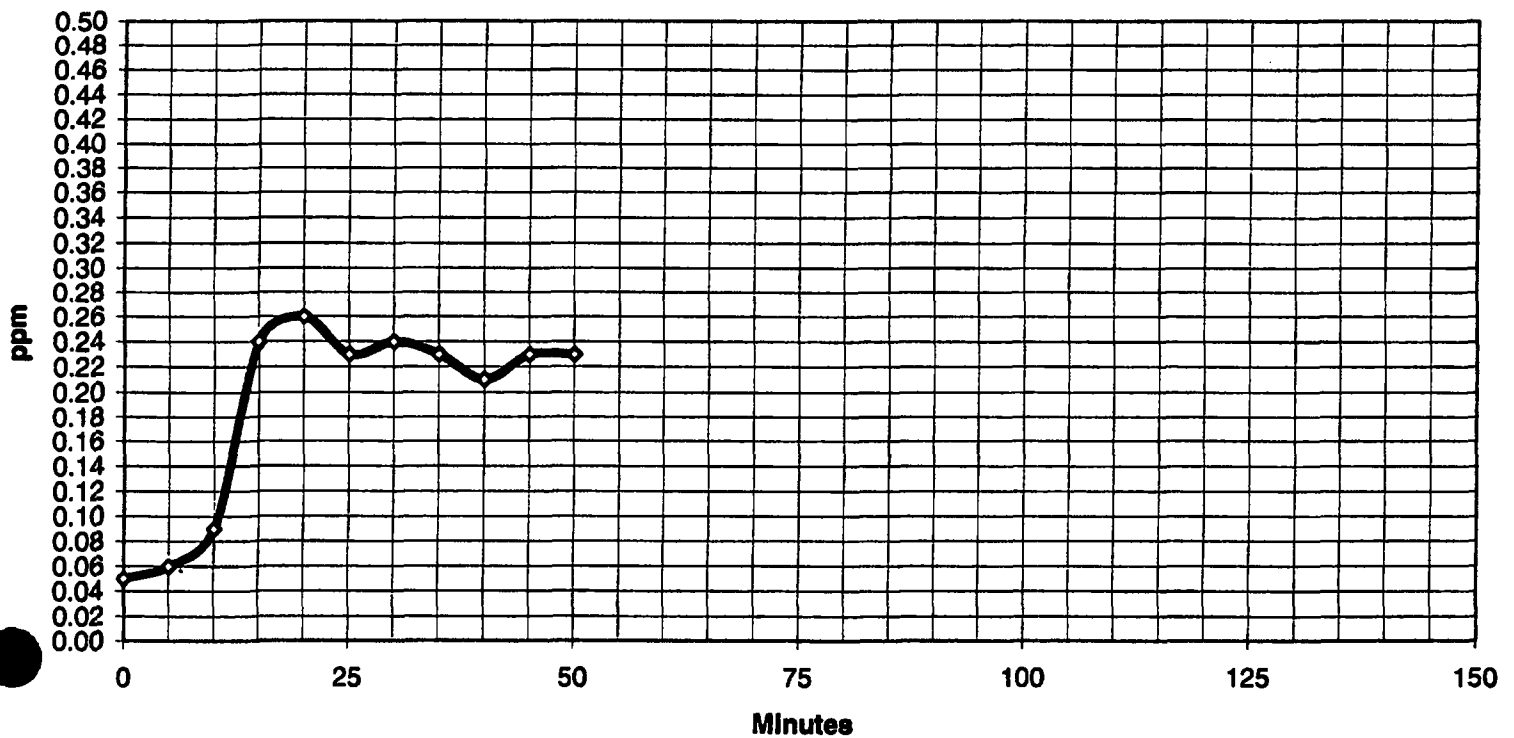
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/22/08
Time: 11:00

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
09/29/08	40	40
09/30/08	41	46

HALOGEN DOSING CURVE

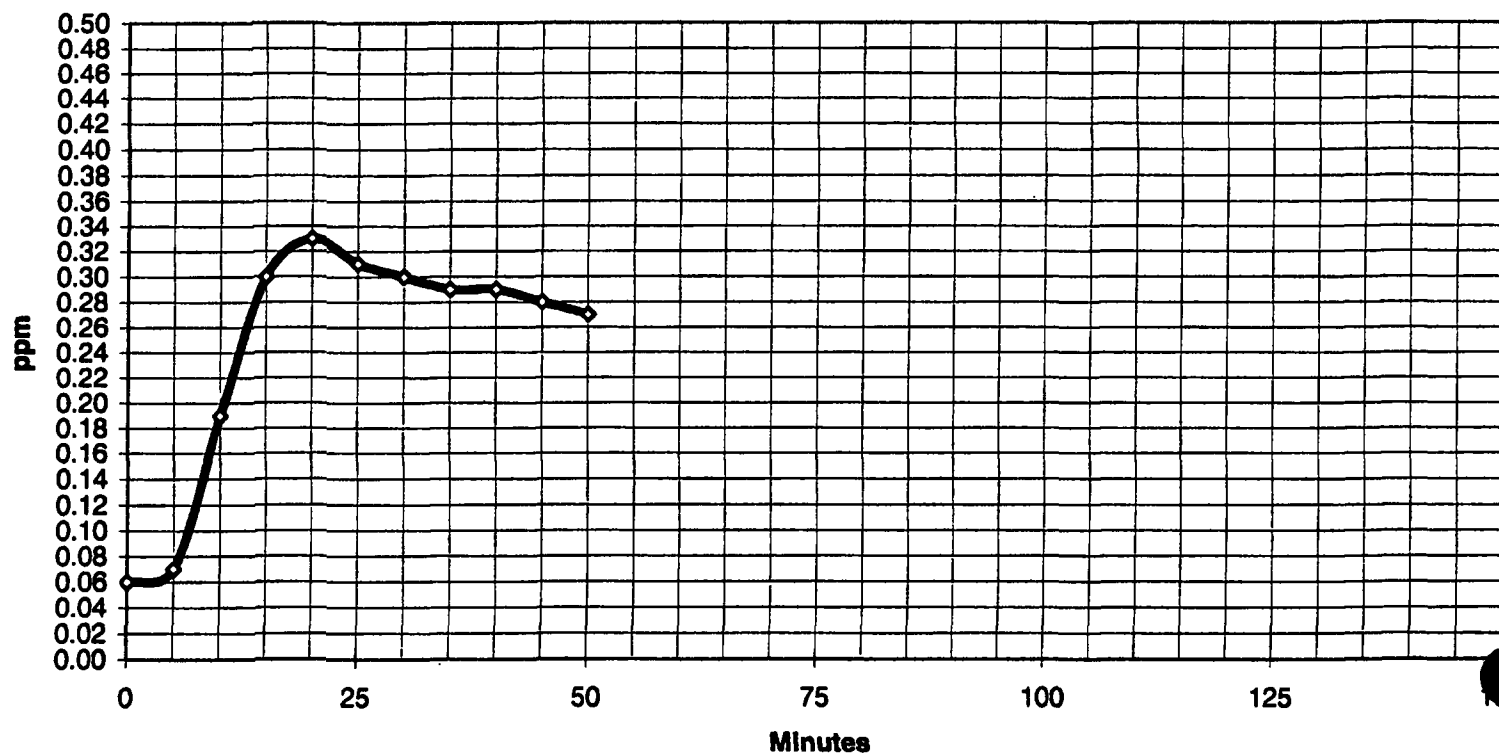
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 09/29/08
Time: 12:00

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

Unit: 1

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



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

www.exeloncorp.com

November 19, 2008

LTR: BYRON 2008-0114
File: 2.09.0411
1.10.0101

**Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
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 October 1, 2008 through October 31, 2008.

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

J. Boite - Environmental - Cantera
Z. Cox - Chemistry - Byron

**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		
0	8	1	0	0	1	0	8	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)	—	0.9	0.9	(19)	0	285	EC
	PERMIT REQUIREMENT	—	—	LBS/DY	—	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-8
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
	PERMIT REQUIREMENT	—	—	LBS/DY	—	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	—	—	(26)	—	—	—	(19)		500	
	PERMIT REQUIREMENT	—	—	LBS/DY	—	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

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

Bradley J. Adams

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA
CODE

DATE

08 11 19

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
DEMINERALIZER REGENERATE (001A)
EFFLUENT

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 8 1 0 0 1	To: 0 8 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			
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	0.023	0.091	(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
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE		DATE		
815	406-3700	08	11	19
AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD																		
YEAR			MONTH			DAY				YEAR			MONTH			DAY		
From:	0	8	1	0	0	1	To:	0		8	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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.92	1.47	(26)	-----	9.8	16.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.63	-----	7.88	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.68	1.14	(26)	-----	7.3	12.4	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.010	0.014	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams	815	406-3700	08	11	19						
Plant Manager	AREA CODE	NUMBER	YEAR	MONTH	DAY						
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
08	10	01	08	10	31

*** 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	10.0	(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)	-----	0.1 30 DAY AVG	0.2 DAILY MAX	(19) MG/L		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)	-----	1.0 30 DAY AVG	2.0 DAILY MAX	(19) MG/L		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)	-----	0.5 30 DAY AVG	1.0 DAILY MAX	(19) MG/L		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)	-----	1.0 30 DAY AVG	1.0 DAILY MAX	(19) MG/L		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)	-----	0.2 30 DAY AVG	0.4 DAILY MAX	(19) MG/L		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)	-----	1.0 30 DAY AVG	2.0 DAILY MAX	(19) MG/L		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	08	11	19
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

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

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed through this outfall 22 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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	7.2	(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	0.037	0.059	(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										
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	08	11	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

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

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

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

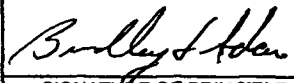
From:

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)	-----	< 0.4	< 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)	-----	< 2.9	6.5	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.023	(03)	-----	-----	-----	-----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

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	08	11	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
1. Flow existed through this outfall 10 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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	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	08	11	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

1. 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 12 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.9	2.4	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.243	0.655	(03)	-----	-----	-----	-----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE 815 406-3700 AREA CODE NUMBER		DATE 08 11 19 YEAR MONTH DAY			
Bradley J. Adams											
Plant Manager											
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
08	10	01	08	10	03

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.52	-----	8.69	(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)	-----	-----	0.018	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.045	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	17.36	27.67	(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	0.47	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	08	11	19
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

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

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

SEE ATTACHED

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams						
Plant Manager		815	406-3700	08	11	19
TYPED OR PRINTED		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. 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
0	8	1	0	0	1

From: To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	-----			
	PERMIT REQUIREMENT	REPORT 30-DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	11	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
October 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
10/04/08	120	78.7
10/12/08	120	90.0
10/19/08	120	73.4
10/25/08	120	77.7

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 October 2008.

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 2008**

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
10/01/08	42	44	10/08/08	35	0
10/02/08	40	40	10/09/08	35	0
10/03/08	40	40	10/10/08	25	0
10/04/08	40	40	10/11/08	38	0
10/05/08	40	41	10/12/08	37	0
10/06/08	47	40			
10/07/08	35	0			

HALOGEN DOSING CURVE

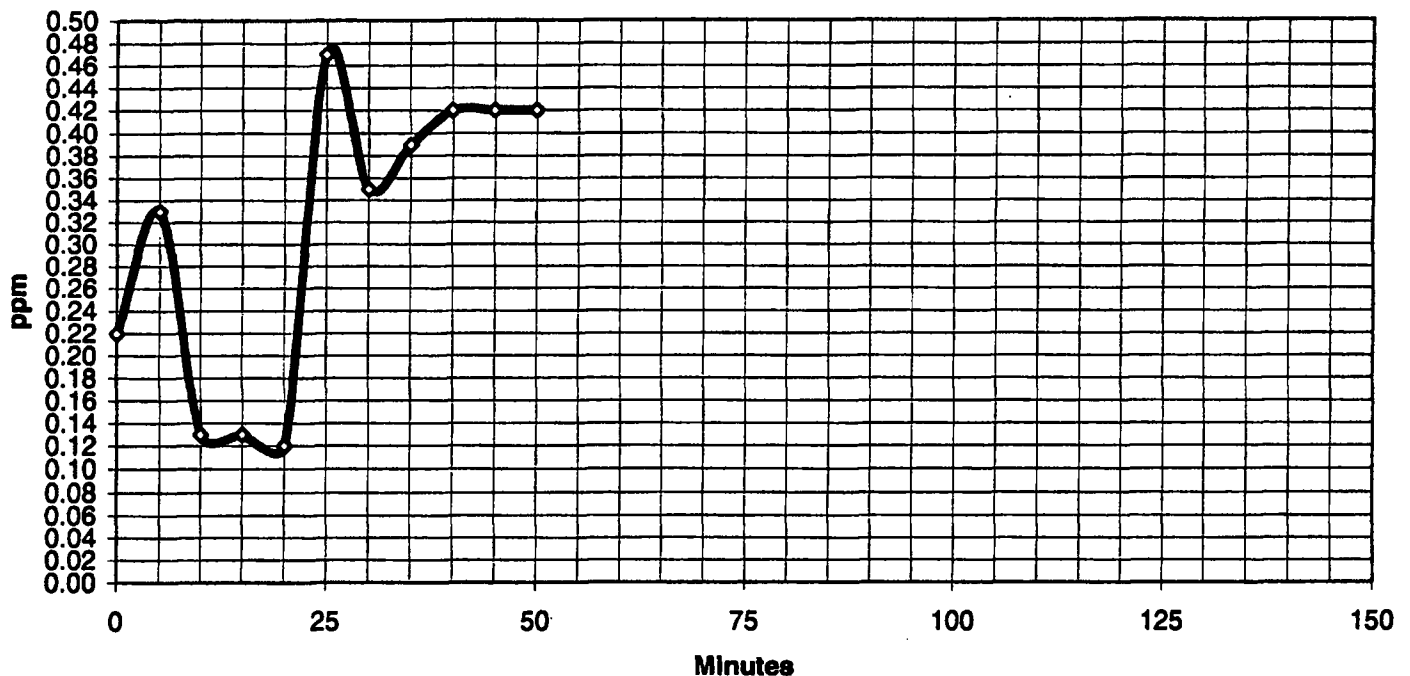
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/06/08
Time: 10:07

Analyzed by: M.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
10/13/08	30	0
10/14/08	30	0
10/15/08	30	0
10/16/08	31	0
10/17/08	37	0
10/18/08	37	30
10/19/08	30	30

HALOGEN DOSING CURVE

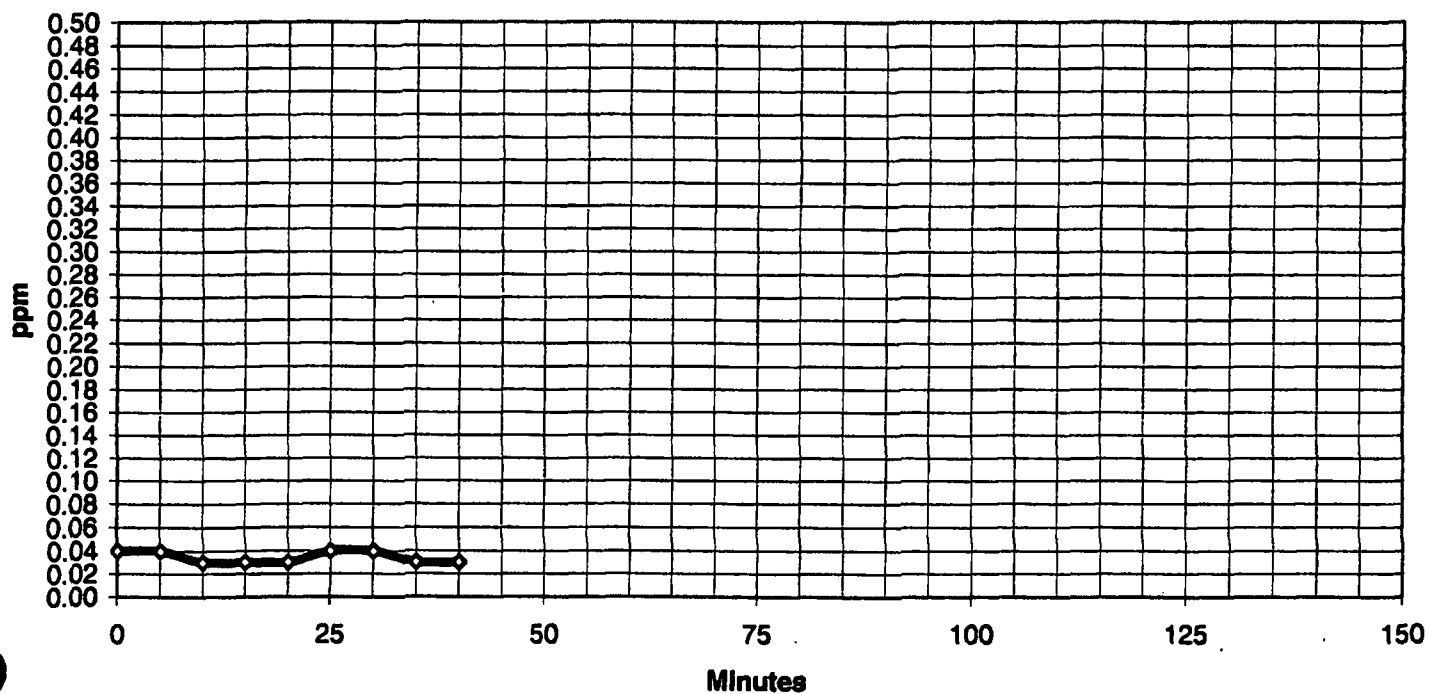
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/13/08
Time: 17:35

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

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
10/20/08	35	22
10/21/08	30	40
10/22/08	25	30
10/23/08	26	26
10/24/08	27	28
10/25/08	25	30
10/26/08	25	25

HALOGEN DOSING CURVE

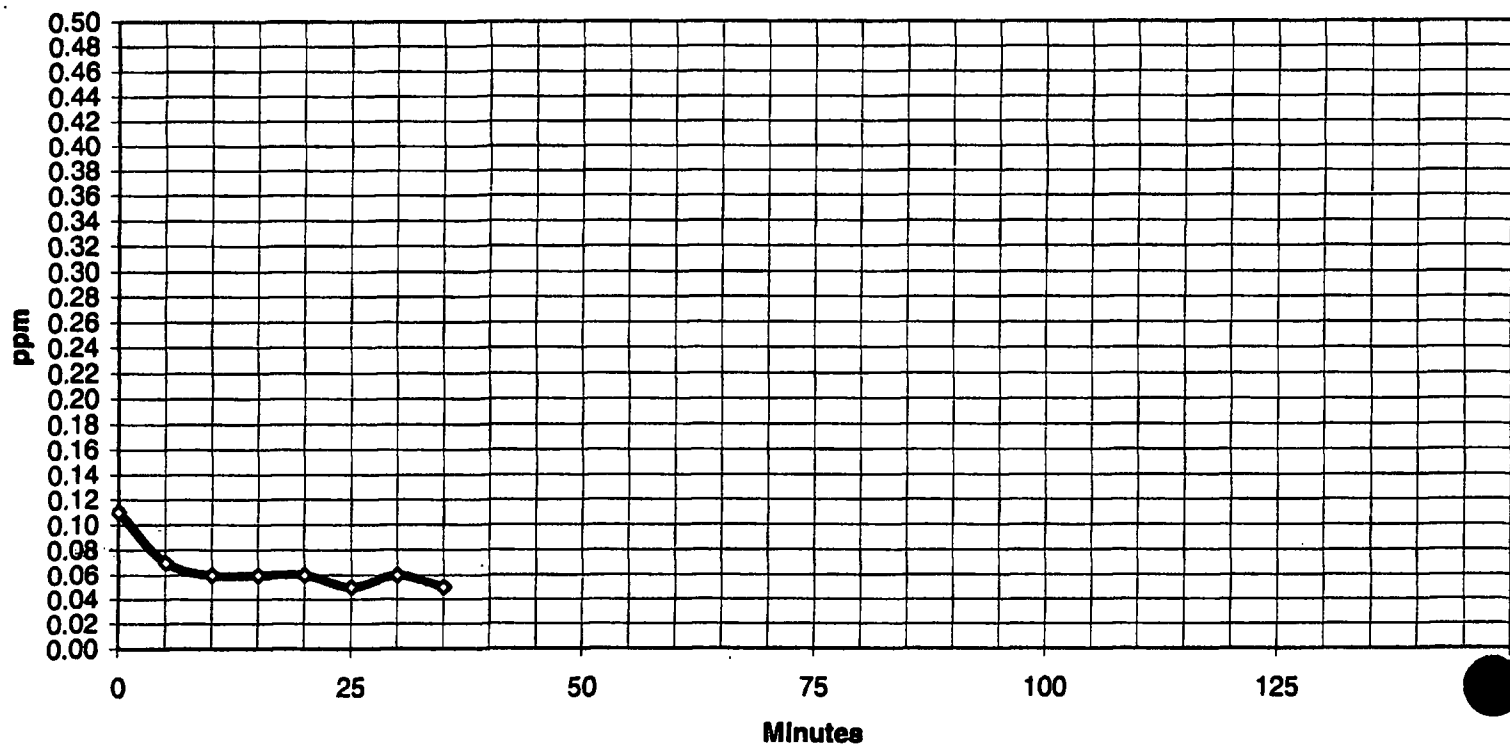
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/22/08
Time: 10:00

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
10/27/08	25	25
10/28/08	25	25
10/29/08	25	25
10/30/08	25	25
10/31/08	25	26

HALOGEN DOSING CURVE

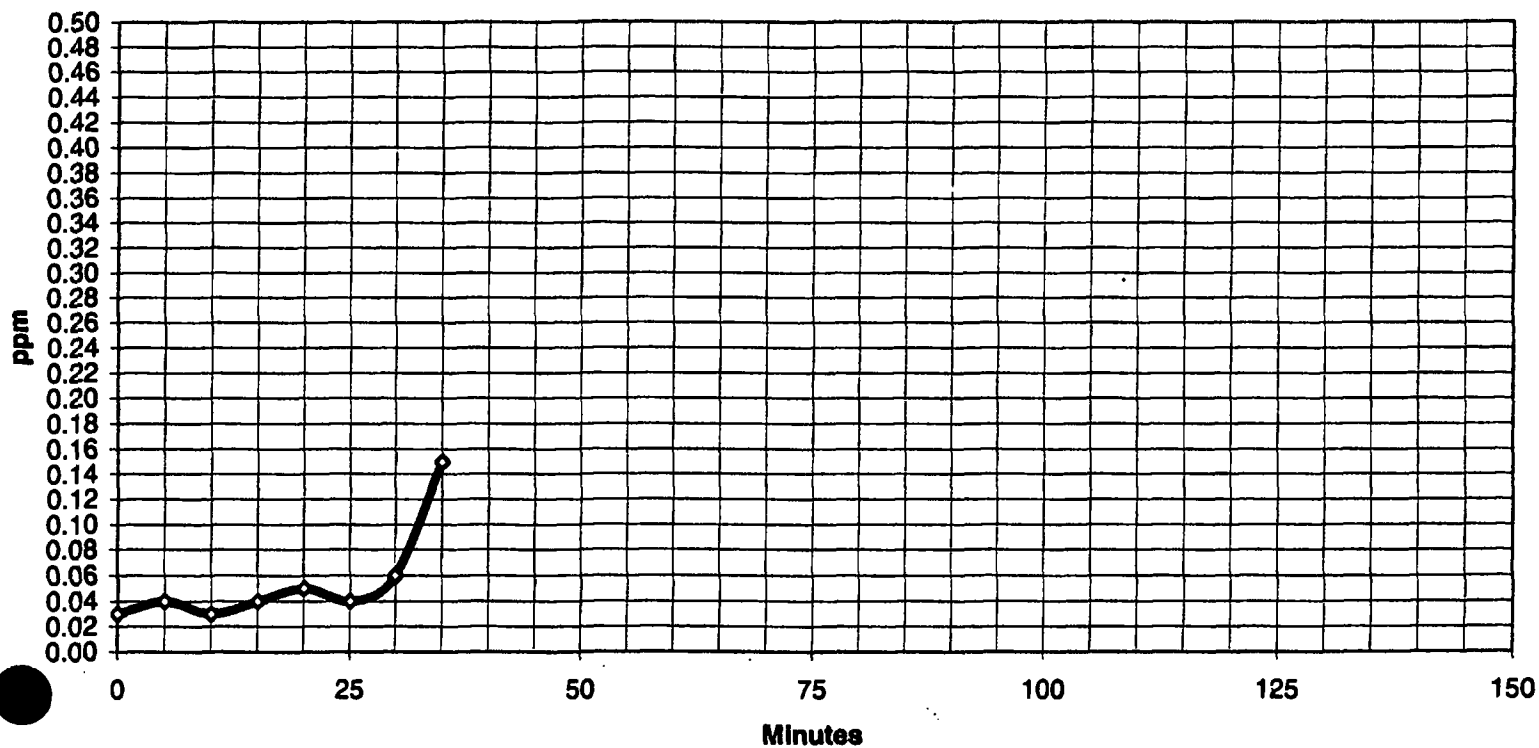
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 10/27/08
Time: 11:53

Analyzed by: M.K.
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 16, 2008

LTR: BYRON 2008-0122
File: 2.09.0411
1.10.0101

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

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant Discharge Elimination System (NPDES) Permit Number IL0048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period November 1, 2008 through November 30, 2008.

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

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry – Byron

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.7	< 0.7	(19)	0	285	EC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMB-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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	12	16	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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	0.041	0.114	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30-DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	08	12	16	
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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD											
YEAR	MONTH	DAY	YEAR	MONTH	DAY						
From: 0	8	1	1	0	1	To: 0	8	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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.10	< 0.10	(26)	-----	< 2.0	< 2.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.25	-----	7.47	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.04	0.04	(26)	-----	< 0.7	0.8	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.005	0.008	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	12	16	
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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	-----	-----	(26) LBS/DY	-----	< 0.6 15.0 30 DAY AVG	0.8 30.0 DAILY MAX	(19) MG/L	0	240 WEEKLY	DC COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	-----	-----	(26) LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	(19) MG/L		500 DAILY	
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	-----	-----	(26) LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	(19) MG/L		500 DAILY	
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	-----	-----	(26) LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	(19) MG/L		500 DAILY	
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	-----	-----	(26) LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	(19) MG/L		500 DAILY	
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	-----	-----	(26) LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	(19) MG/L		500 DAILY	
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT PERMIT REQUIREMENT	-----	-----	(26) LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	(19) MG/L		500 DAILY	
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		08	12	16	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. There was no discharge of processed steam generator chemical cleaning waste water during this month. 2. Flow existed through this outfall 13 of 30 days during the month.											

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

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: 0 8 1 1 0 1						To: 0 8 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			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 2.6	3.5	(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	0.034	0.056	(03)	-----	-----	-----	----	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD				----		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	08	12	16	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD


YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	8	1	0	1	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 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.022	(03)					0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	08	12	16
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. Flow existed through this outfall 5 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL

STORMWATER (FORMER 001E)
STORMWATER

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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	08	12	16
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 3 of 30 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

YEAR	MONTH	DAY	From:	YEAR	MONTH	DAY	To:
0	8	1	1	0	1	0	1
0	8	1	1	3	0	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			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.7	1.8	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.043	0.086	(03)	-----	-----	-----	-----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		08	12	16	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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


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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.62	-----	8.69	(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)	-----	-----	0.010	(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)	-----	-----	0.030	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	18.58	25.44	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.11	0.33	(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	08	12	16
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

**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)

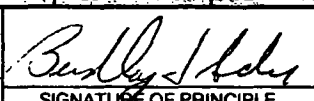
F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)				
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)				
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB	
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)				
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB	
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)				
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)				
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)				
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)				
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB	
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 815 406-3700		DATE 08 12 16		
Bradley J. Adams												
Plant Manager												
TYPED OR PRINTED								AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

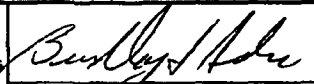
MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	8	1	1	0	1

From: To: 0 8 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)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MG/L		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT			(03)	-----	-----	-----	---			
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	---		TWICE/MONTH	TOTALIZ
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	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	08	12	16
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
November 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
11/01/08	120	81.7
11/08/08	120	68.1
11/15/08	120	70.2
11/22/08	120	67.6
11/29/08	120	68.2

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

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of November 2008.

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 2008

COMMENTS:

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

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
11/01/08	20	26	11/08/08	25	25
11/02/08	25	27	11/09/08	27	30
11/03/08	26	29			
11/04/08	26	31			
11/05/08	25	25			
11/06/08	33	28			
11/07/08	25	25			

HALOGEN DOSING CURVE

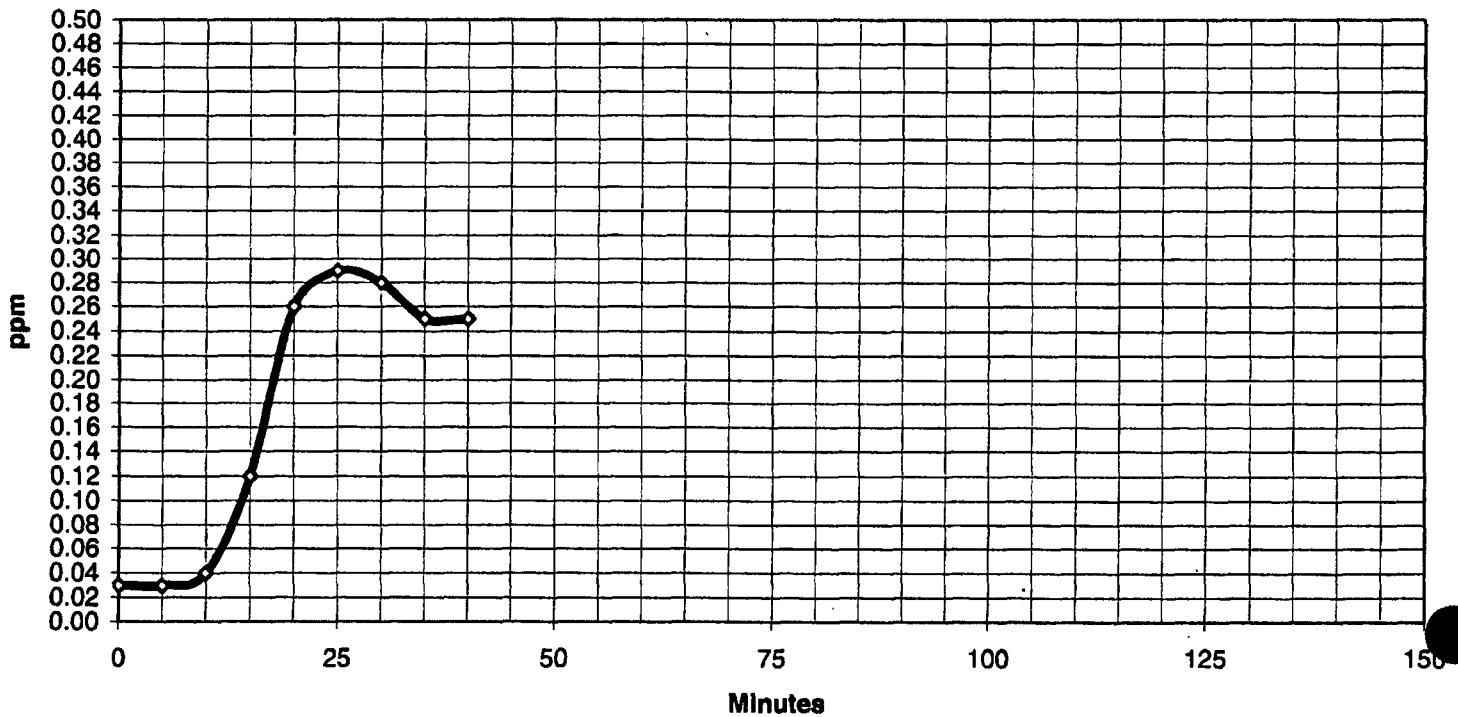
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/03/08
Time: 11:04

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
11/10/08	25	25
11/11/08	25	25
11/12/08	25	25
11/13/08	25	25
11/14/08	25	27
11/15/08	27	25
11/16/08	25	25

HALOGEN DOSING CURVE

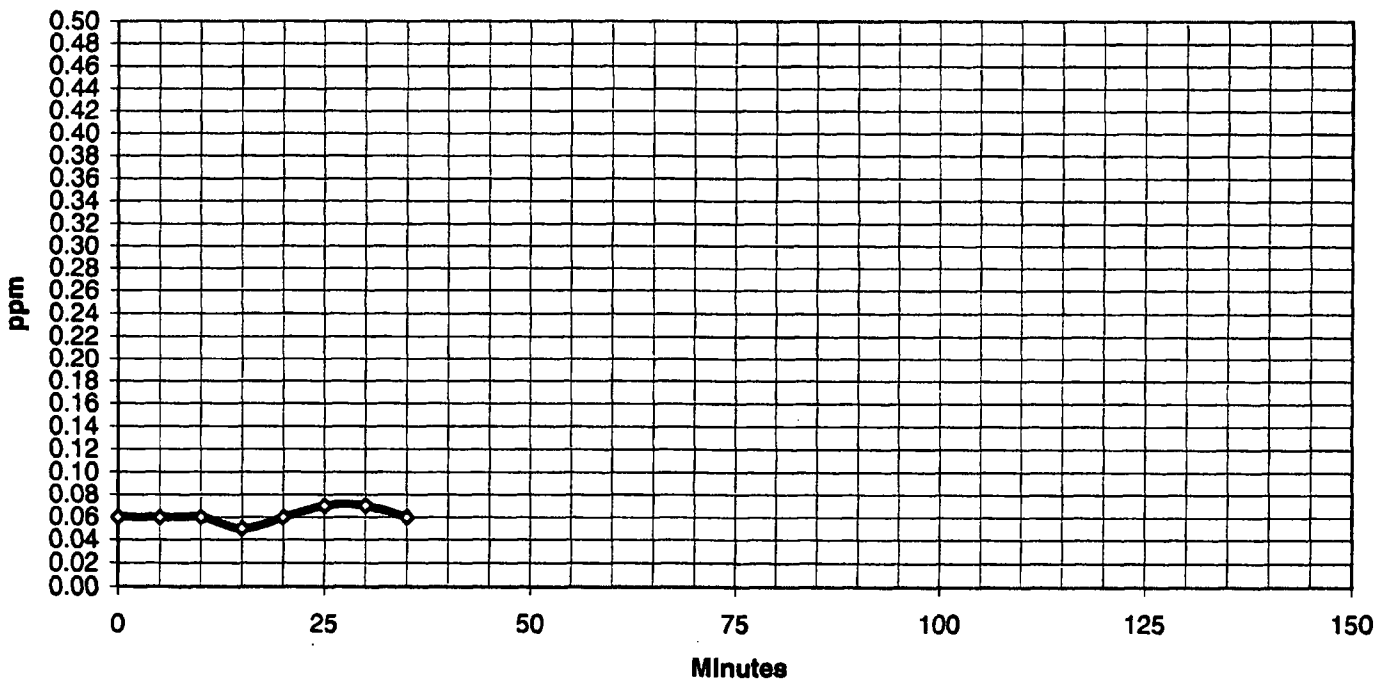
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/10/08
Time: 11:07

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

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
11/17/08	28	28
11/18/08	25	25
11/19/08	27	25
11/20/08	25	25
11/21/08	25	25
11/22/08	25	25
11/23/08	25	25

HALOGEN DOSING CURVE

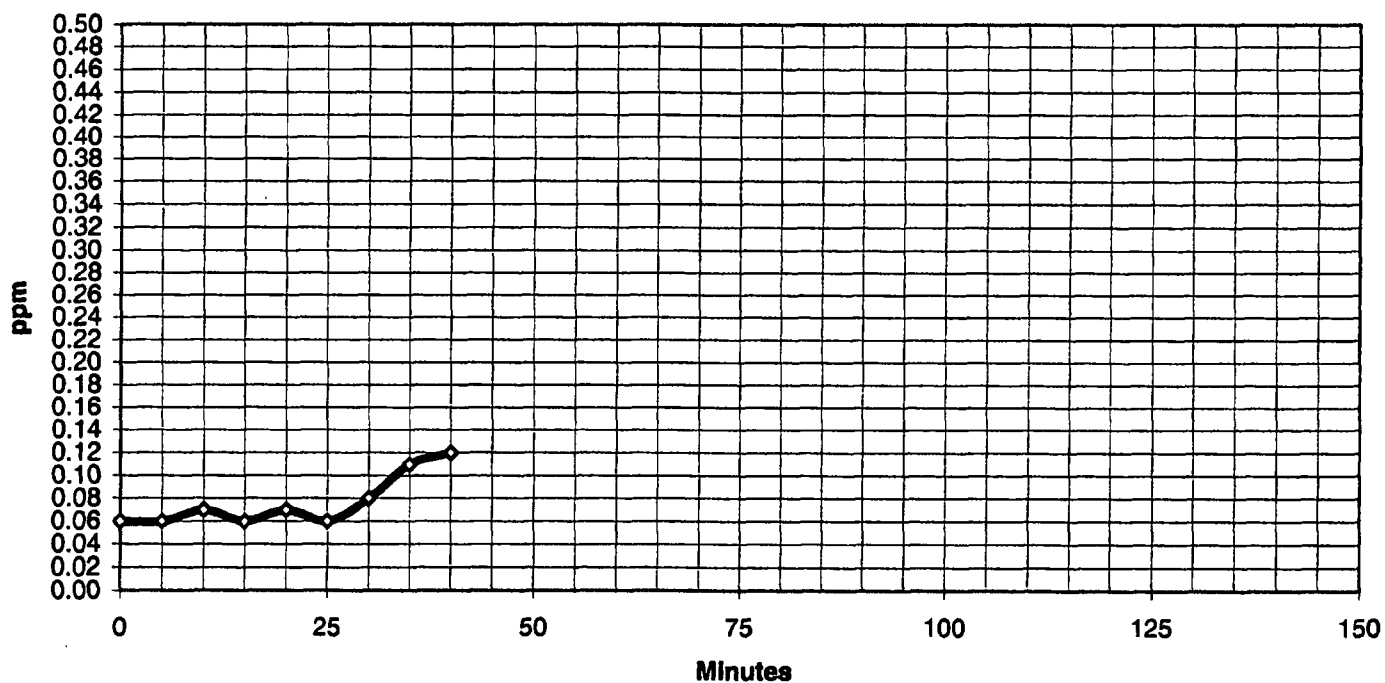
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/17/08
Time: 10:20

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
11/24/08	25	25
11/25/08	25	25
11/26/08	25	25
11/27/08	25	25
11/28/08	25	25
11/29/08	25	25
11/30/08	25	25

HALOGEN DOSING CURVE

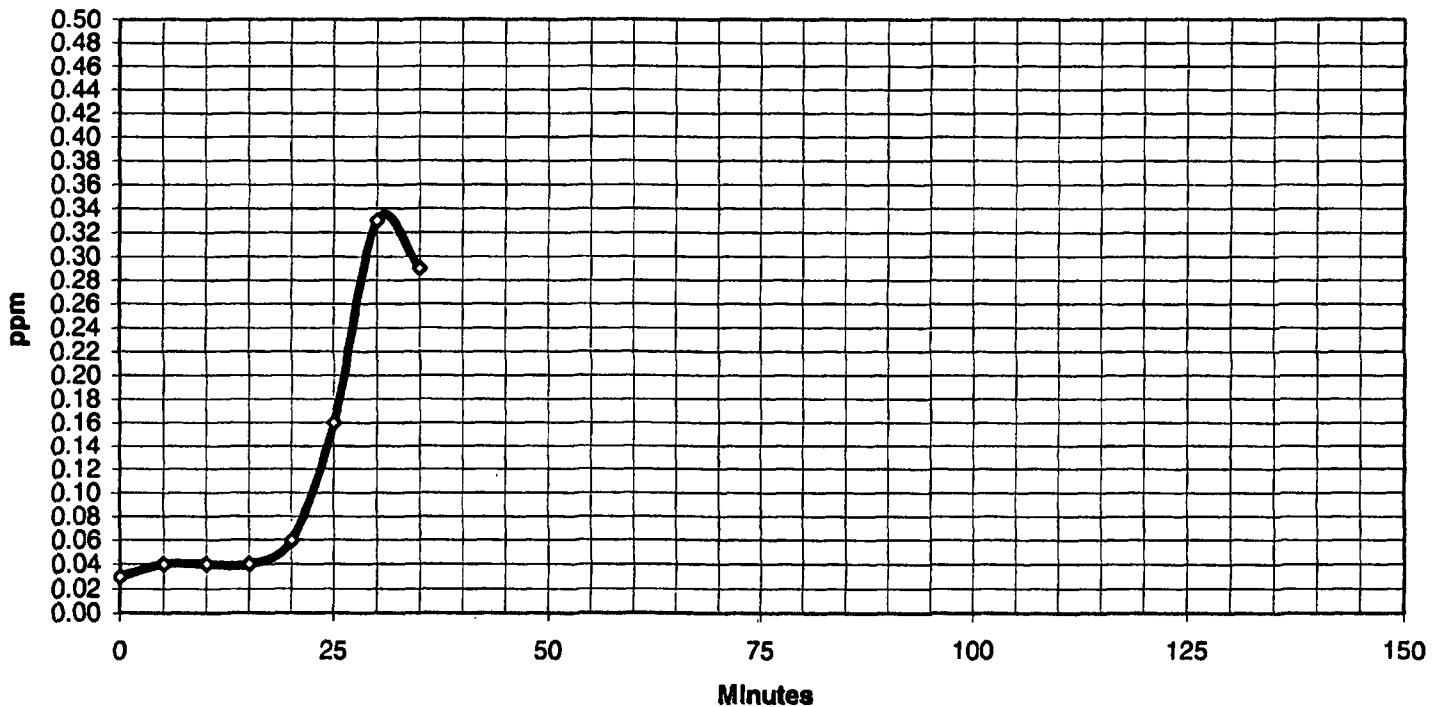
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 11/24/08
Time: 13:09

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

www.exeloncorp.com

January 20, 2009

LTR: BYRON 2009-0008
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, 2008 through December 31, 2008.

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 3, 2008. The anodes of the OA copper ion skid were removed and weighed on December 18, 2008. The anodes of the OB copper ion skid were removed and weighed on December 18, 2008. The total mass of copper used for zebra mussel control was 192 pounds.

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

bcc: J. Bolte – Environmental – Cantera
Z. Cox – Chemistry - Byron

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DEMINEALIZER REGENERATE (001A)

EFFLUENT

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	8	1	2	0	1	To:	0	8	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			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.5	< 0.5	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		ONCE/ MONTH	COMP-8
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1	0.2	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2	0.4	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	09	01	20
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. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 25 of 31 days during this month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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


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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	8	1	2	0	1	To:	0	8	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			
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	0.016	0.066	(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 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		
				815	406-3700	09	01	20
		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER


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

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

MONITORING PERIOD													
YEAR		MONTH		DAY			YEAR		MONTH		DAY		
From:	0	8	1	2	0		1	To:	0	8	1	2	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	< 0.11	0.09	(26)	-----	< 2.1	2.2	(19)	0	290	DC	
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY		30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24	
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.47	-----	7.65	(12)	0	290	GR	
	PERMIT REQUIREMENT			---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB	
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.04	0.05	(26)	-----	< 0.8	1.1	(19)	0	290	DC	
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY		30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	0.018	(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	09	01	20		
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 28 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	8	1	2	0	1	0	8	1	2	3	1

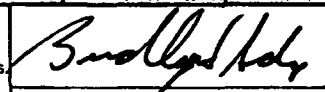
From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.7	1.2	(19)	0	240	DC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.			TELEPHONE		DATE		
Bradley J. Adams				815	406-3700	09	01	20
Plant Manager		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		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 17 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER


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

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

MONITORING PERIOD													
YEAR			MONTH		DAY			YEAR		MONTH		DAY	
From:	0	8	1	2	0	1		To:	0	8	1	2	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					
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		
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	MG/L		WEEKLY	GRAB		
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.033	0.064	(03)	-----	-----	-----	---	0	135	TM		
50050 1 0 0	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	09	01	20			
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		
0	8	1	2	0	1	0	8	1	2	3	1


From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.5	0.7	(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)	-----	< 1.6	2.2	(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	0.024	(03)	-----	-----	-----	-----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER Bradley J. Adams Plant Manager TYPED OR PRINTED	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE		
				815	406-3700	09	01	20
				AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

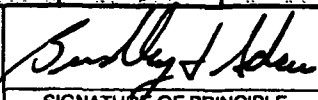
MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

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

MONITORING PERIOD													
YEAR		MONTH		DAY			YEAR		MONTH		DAY		
From:	0	8	1	2	0		1	To:	0	8	1	2	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	---	9.0 MAXIMUM	SU		SEE PERMIT	GRAB				
SOLIDS, TOTAL	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500					
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500					
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500					
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500					
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500					
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500					
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE B15 406-3700		DATE 09 01 20					
Bradley J. Adams						AREA CODE		NUMBER		YEAR		MONTH		DAY	
Plant Manager															
TYPED OR PRINTED															

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

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	8	1	2	0	1	To:	0	8	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			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.4	< 1.4	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.681	1.304	(03)	-----	-----	-----	----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	01	20	
Plant Manager						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR	
TYPED OR PRINTED										DAY	

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD														
YEAR			MONTH		DAY			YEAR			MONTH		DAY	
From:	0	8	1	2	0	1		To:	0	8	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			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.56	-----	8.99	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.007	(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)	-----	-----	0.029	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	20.11	26.94	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.18	0.39	(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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	01	20	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment											
SEE ATTACHED EPA Form 3320-1 (Rev 3/99)											

SD

PAGE 1 OF 1

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0	8	1	2	0	1	To: 0	8	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			
PH	SAMPLE MEASUREMENT	-----	-----	---	-----	-----	-----	(12)			
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	408-3700	09	01	20
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY

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

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

**MAJOR
(SUBR 01)**

F - FINAL

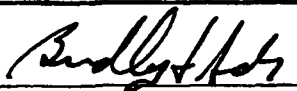
**STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER**

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

MONITORING PERIOD											
From:				To:							
YEAR	MONTH	DAY		YEAR	MONTH	DAY					
0	8	1	2	0	8	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						
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)						
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)						
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB			
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)						
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB			
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	----						
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ			
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
	SAMPLE MEASUREMENT													
	PERMIT REQUIREMENT													
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE				
Bradley J. Adams								815	406-3700	09	01	20		
Plant Manager								AREA CODE	NUMBER	YEAR	MONTH	DAY		
TYPED OR PRINTED														
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)														

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
December 2008

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
12/06/08	120	77.4
12/13/08	120	74.0
12/20/08	120	69.0
12/27/08	120	80.6

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

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of December 2008.

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 2008**

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

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
12/01/08	20	20
12/02/08	20	20
12/03/08	20	20
12/04/08	20	20
12/05/08	20	20
12/06/08	20	20
12/07/08	21	23

HALOGEN DOSING CURVE

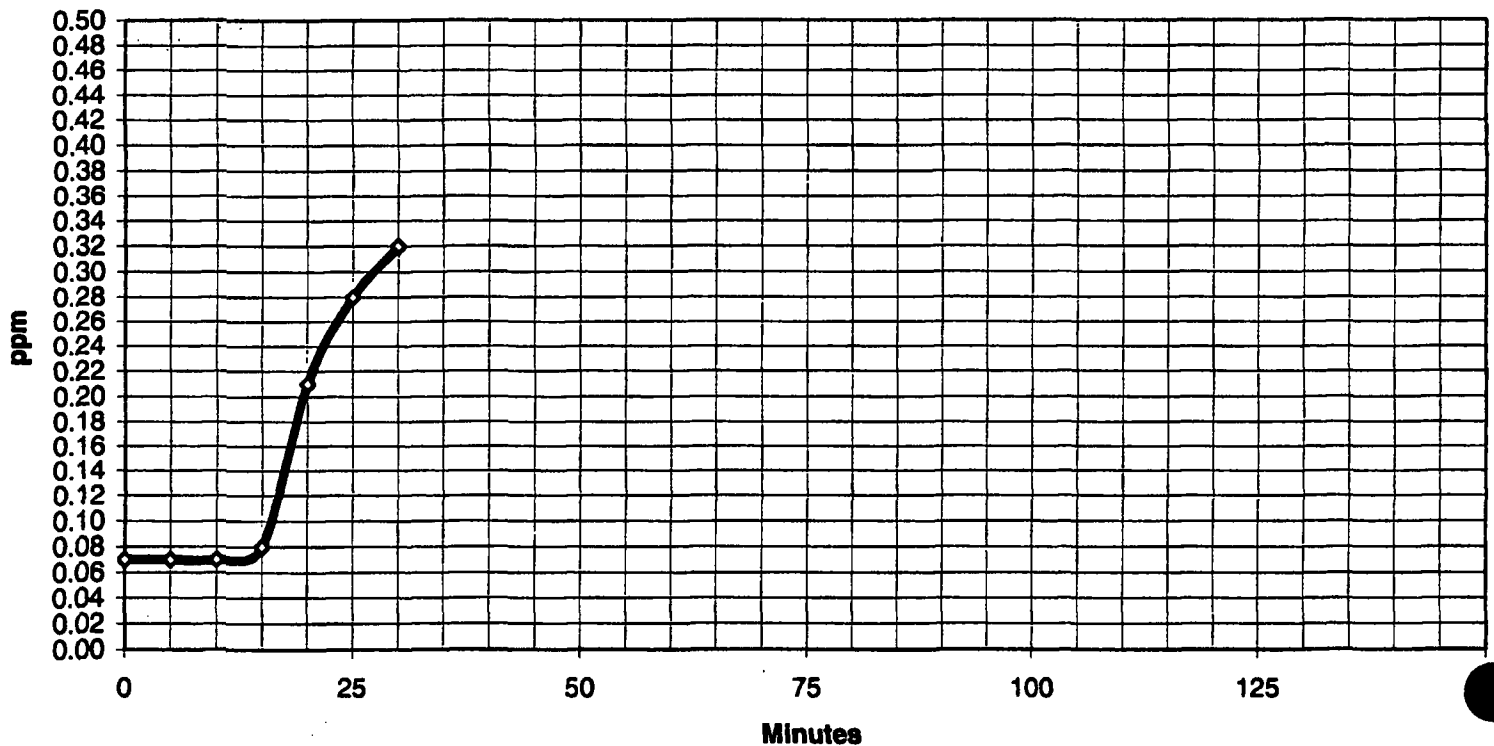
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/02/08
Time: 10:49

Analyzed by: T.B.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
12/08/08	20	20
12/09/08	20	20
12/10/08	19	19
12/11/08	23	20
12/12/08	20	21
12/13/08	20	20
12/14/08	20	20

HALOGEN DOSING CURVE

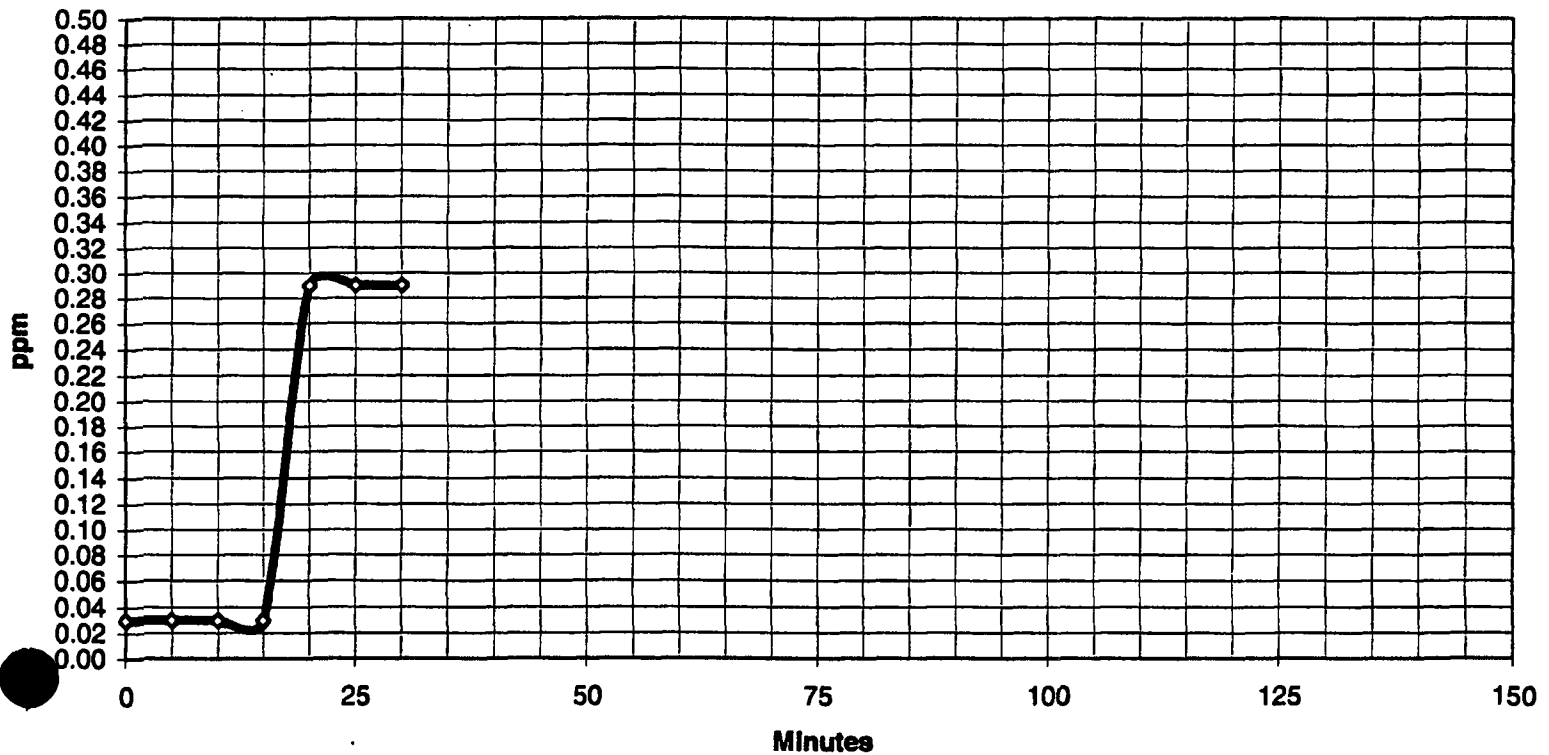
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/08/08
Time: 12:09

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
12/15/08	20	20
12/16/08	20	20
12/17/08	25	20
12/18/08	30	25
12/19/08	20	20
12/20/08	20	20
12/21/08	20	20

HALOGEN DOSING CURVE

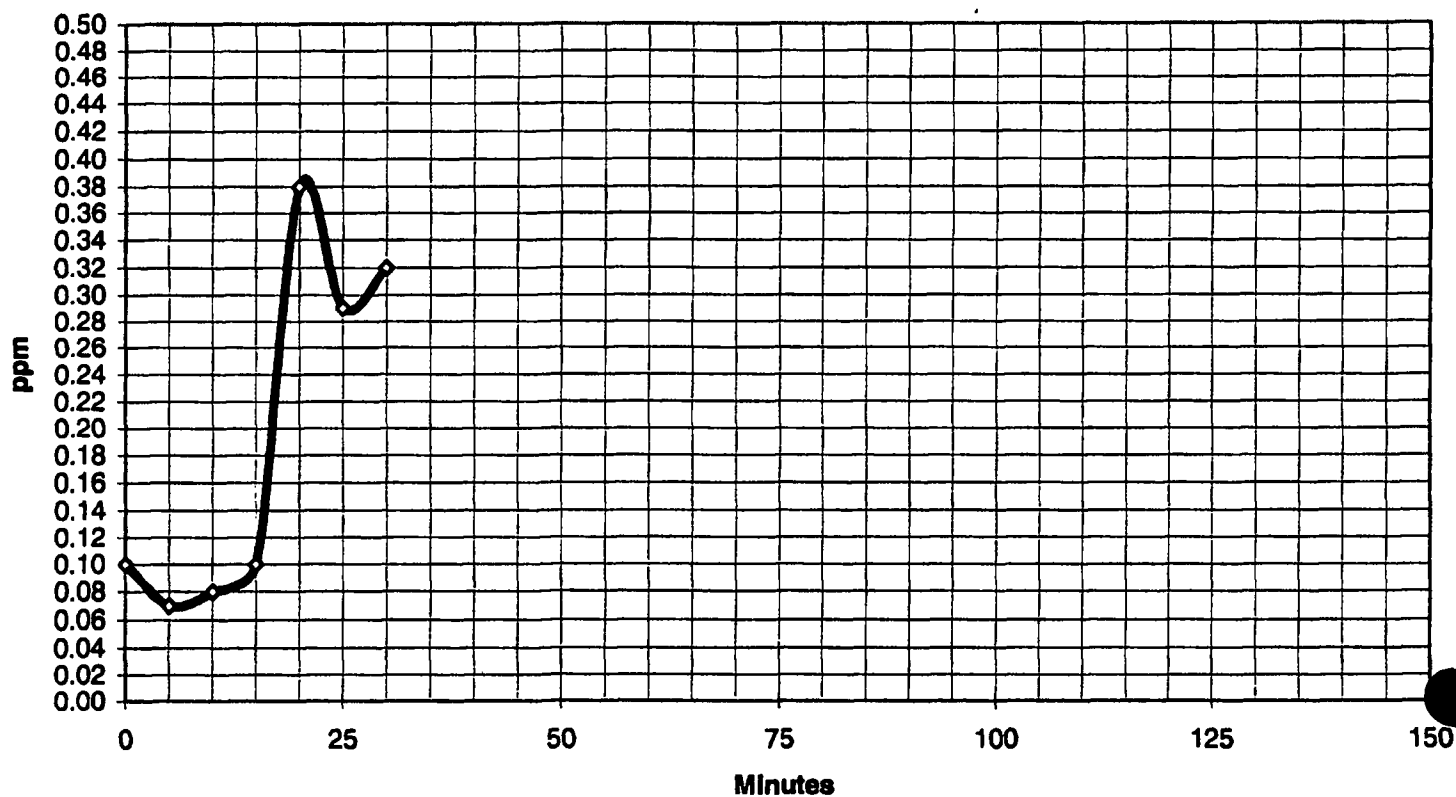
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/15/08
Time: 10:40

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
12/22/08	20	20	12/29/08	23	24
12/23/08	20	20	12/30/08	23	21
12/24/08	23	20	12/31/08	20	20
12/25/08	20	20			
12/26/08	20	20			
12/27/08	20	21			
12/28/08	22	21			

HALOGEN DOSING CURVE

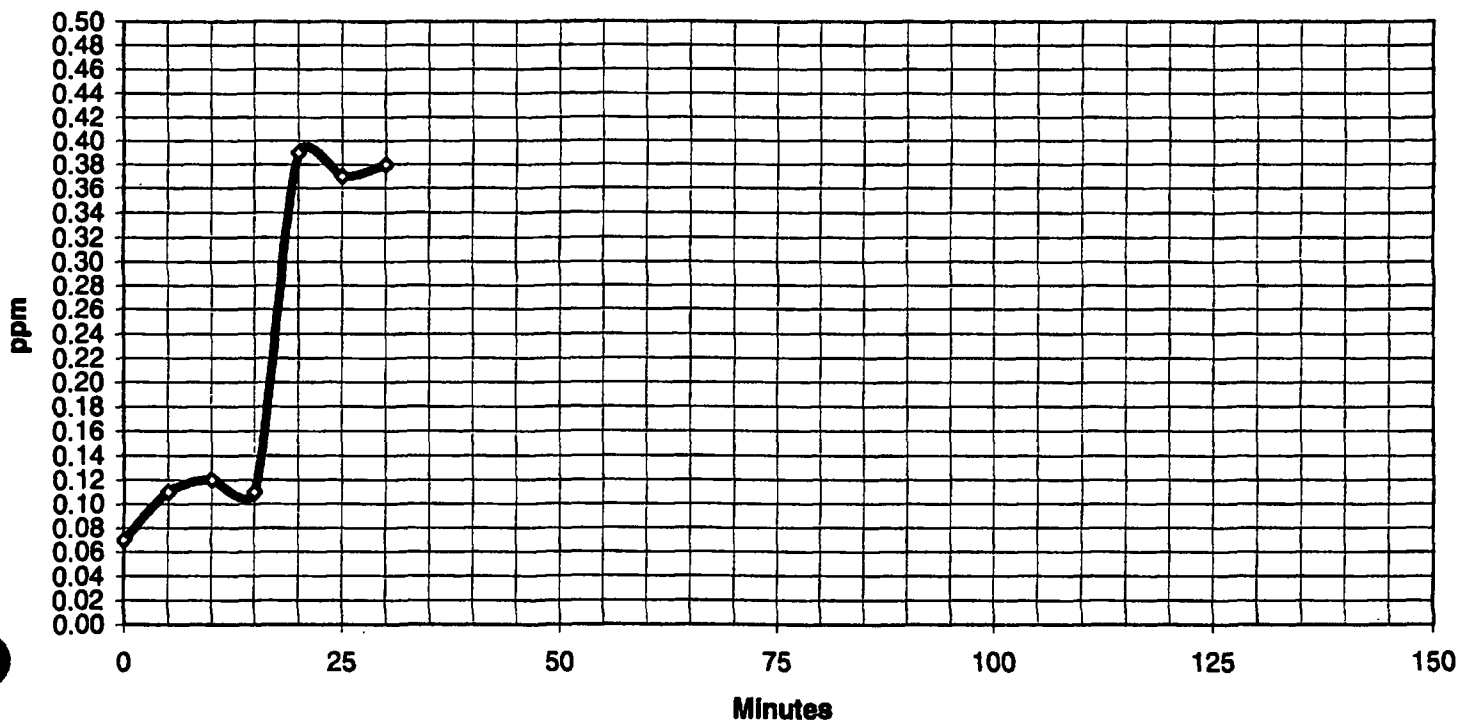
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 12/22/08
Time: 11:08

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

Unit: l

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



Byron Environmental Audit – Request for Additional Information Response

Question #: HH-1 **Category:** Human Health

Statement of Question:

Provide NPDES monthly discharge monitoring reports for the past five years.

Response:

The NPDES monthly discharge monitoring reports for all months of years 2008 through 2012 and January through July 2013 are provided.

List Attachments Provided:

1. NPDES monthly discharge monitoring reports for January 1, 2013 through July 31, 2013.
2. NPDES monthly discharge monitoring reports for January 1, 2012 through December 31, 2012
3. NPDES monthly discharge monitoring reports for January 1, 2011 through December 31, 2011
4. NPDES monthly discharge monitoring reports for January 1, 2010 through December 31, 2010
5. NPDES monthly discharge monitoring reports for January 1, 2009 through December 31, 2009
6. NPDES monthly discharge monitoring reports for January 1, 2008 through December 31, 2008

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

www.exeloncorp.com

Joe Cox

ExelonSM

Nuclear

February 19, 2009

LTR: BYRON 2009-0022
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 January 1, 2009 through January 31, 2009.

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

Respectfully,

Bradley J. Adams

Bradley J. Adams
Plant Manager
Byron Nuclear Generating Station

BJA/ZC/sdk

Attachments

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

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
DEMNERALIZER 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
09	01	01	09	01	31

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	<div></div>	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	1.2	1.2	(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	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01061 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE		DATE		
815	406-3700	09	02	19
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 31 of 31 days during this month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

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

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


MONITORING PERIOD

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.031	0.077	(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			815 408-3700	09	02	19
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)**

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

STP EFFLUENT (FORMER 001B)

EFFLUENT

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.07	< 0.12	(26)	-----	< 2.0	< 2.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	6.87	-----	7.56	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	8.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.02	< 0.03	(26)	-----	< 0.5	< 0.5	(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
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.006	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										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	02	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

1. Flow existed through this outfall 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 60655

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 9	0 1	0 1	0 9	0 1	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 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 0.9	1.6	(19)	0	240	DC
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR) 01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR) 01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU) 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE) 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI) 01057 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 406-3700	09	02	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 through this outfall 12 of 31 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(18)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 1.4	< 1.4	(18)	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	0.036	0.065	(03)	-----	-----	-----	----	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	TOTALZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	02	10	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

RADWASTE TREATMENT (FORMER 001D)

EFFLUENT

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	01	01	09	01	01

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 0.5	< 0.5	(19)	0	240	CP
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	30.0	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 1.4	< 1.4	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.022	0.023	(03)	-----	-----	-----	-----	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	-----		DAILY	CONTIN
EFFLUENT GROSS VALUE		30 DAY AVG	DAILY MAX								
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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	09	02	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)

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

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MONITORING PERIOD

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

From: To:

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	02	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

1. 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. 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

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	01	01	09	01	31

From:

To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
	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 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	-----		500	
	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

AREA
CODE

NUMBER

09

YEAR

DATE

02

MONTH

19

DAY

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.40	-----	8.77	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	8.0 MINIMUM	-----	8.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
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)	-----	-----	0.025	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	19.65	24.93	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
CHLORINE, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.08	0.43	(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.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	02	19	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED											
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment SEE ATTACHED											

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

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

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

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

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

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE

815 408-3700

AREA
CODE

NUMBER

DATE

09 02 19

YEAR MONTH DAY

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

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 9 0 1	0 1	0 1	0 9 0 1	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			
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) 01062 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L	DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L	TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	-----		
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----	TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
	SAMPLE MEASUREMENT									
	PERMIT REQUIREMENT									
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE		
Bradley J. Adams						815 406-3700		09	02	19
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT									

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

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

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
01/03/09	120	73.2
01/10/09	120	70.8
01/17/09	120	70.2
01/24/09	120	63.9
01/31/09	120	72.4

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 January 2009.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

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

COMMENTS:

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

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
01/01/09	20	20
01/02/09	20	20
01/03/09	19	19
01/04/09	20	19

HALOGEN DOSING CURVE

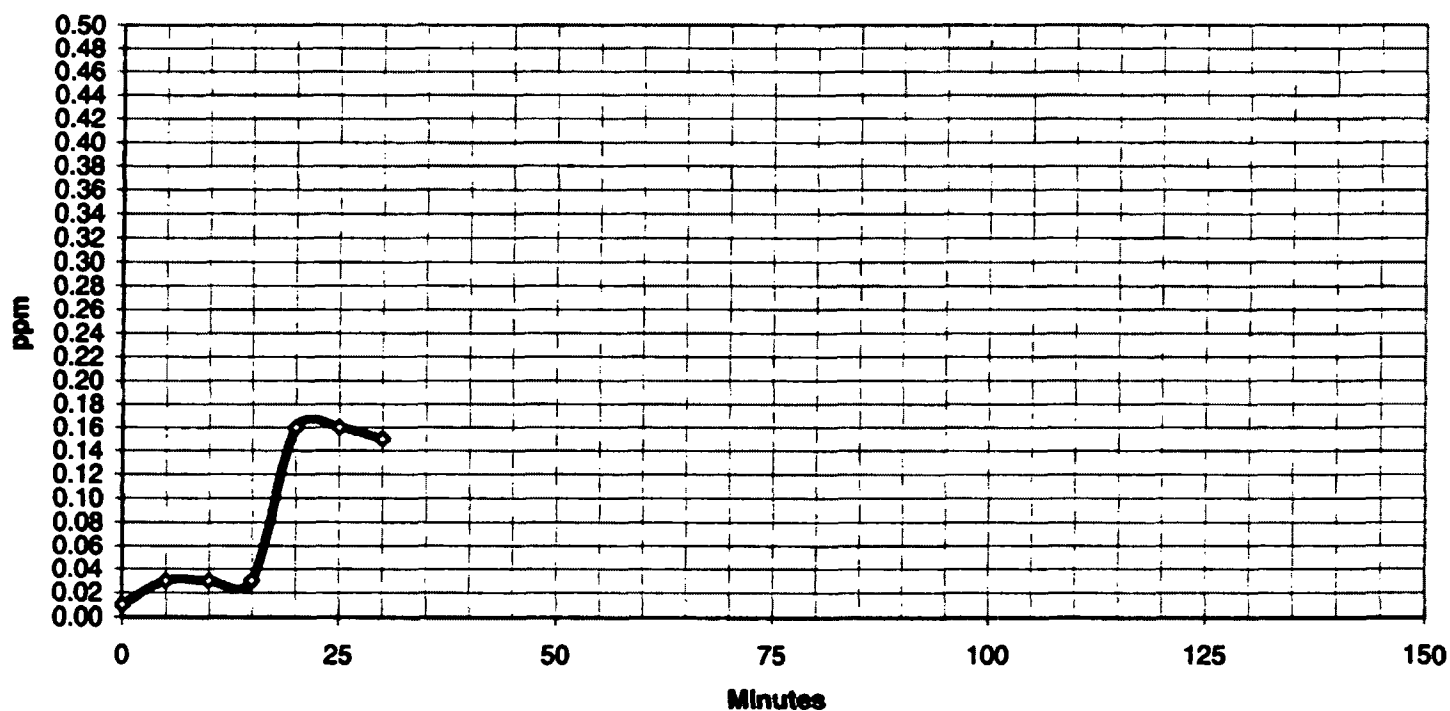
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/02/09
Time: 12:31

Analyzed by: M.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
01/05/09	20	20
01/06/09	20	22
01/07/09	20	20
01/08/09	20	20
01/09/09	19	18
01/10/09	19	20
01/11/09	20	20

HALOGEN DOSING CURVE

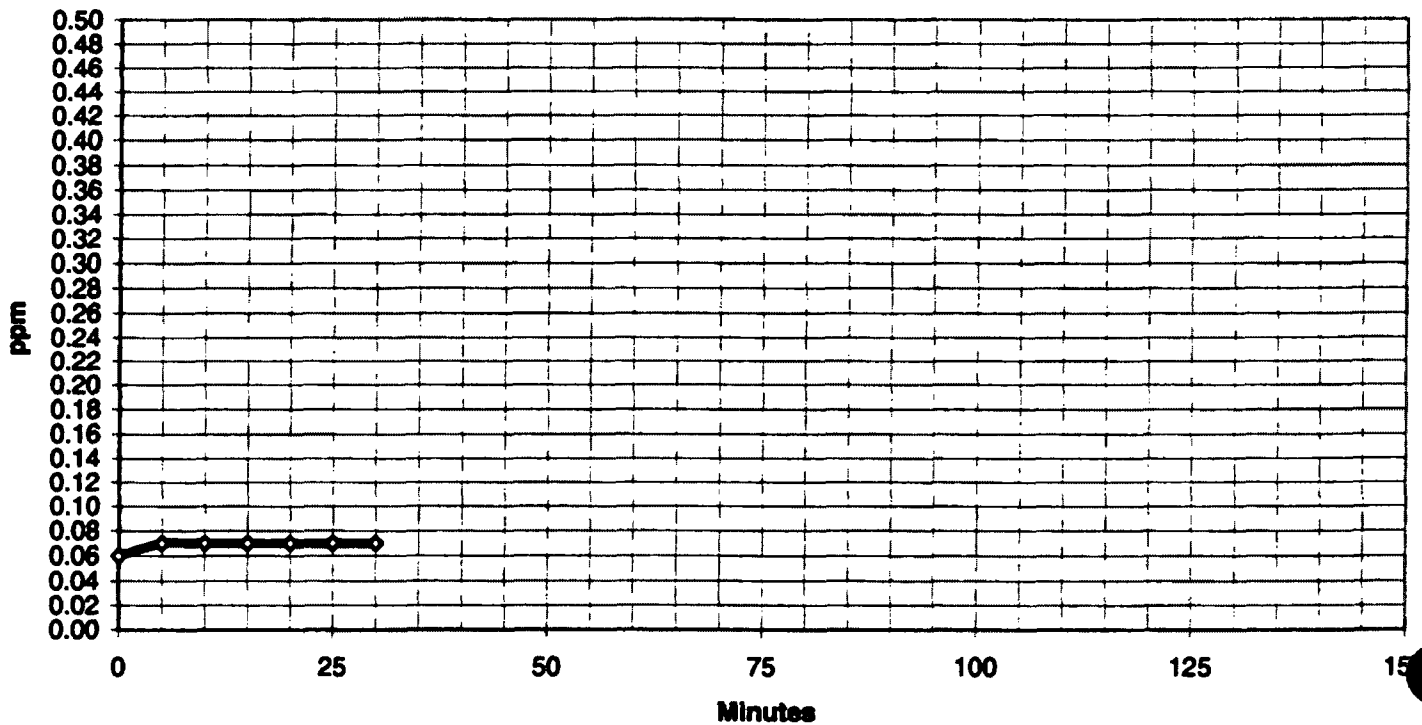
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/08/09
Time: 10:07

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

Unit: 1

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



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

<u>Date</u>	<u>Dosing Time</u> (Minutes)	
	<u>U-1</u>	<u>U-2</u>
01/12/09	20	25
01/13/09	20	19
01/14/09	15	20
01/15/09	20	20
01/16/09	20	20
01/17/09	20	20
01/18/09	20	20

HALOGEN DOSING CURVE

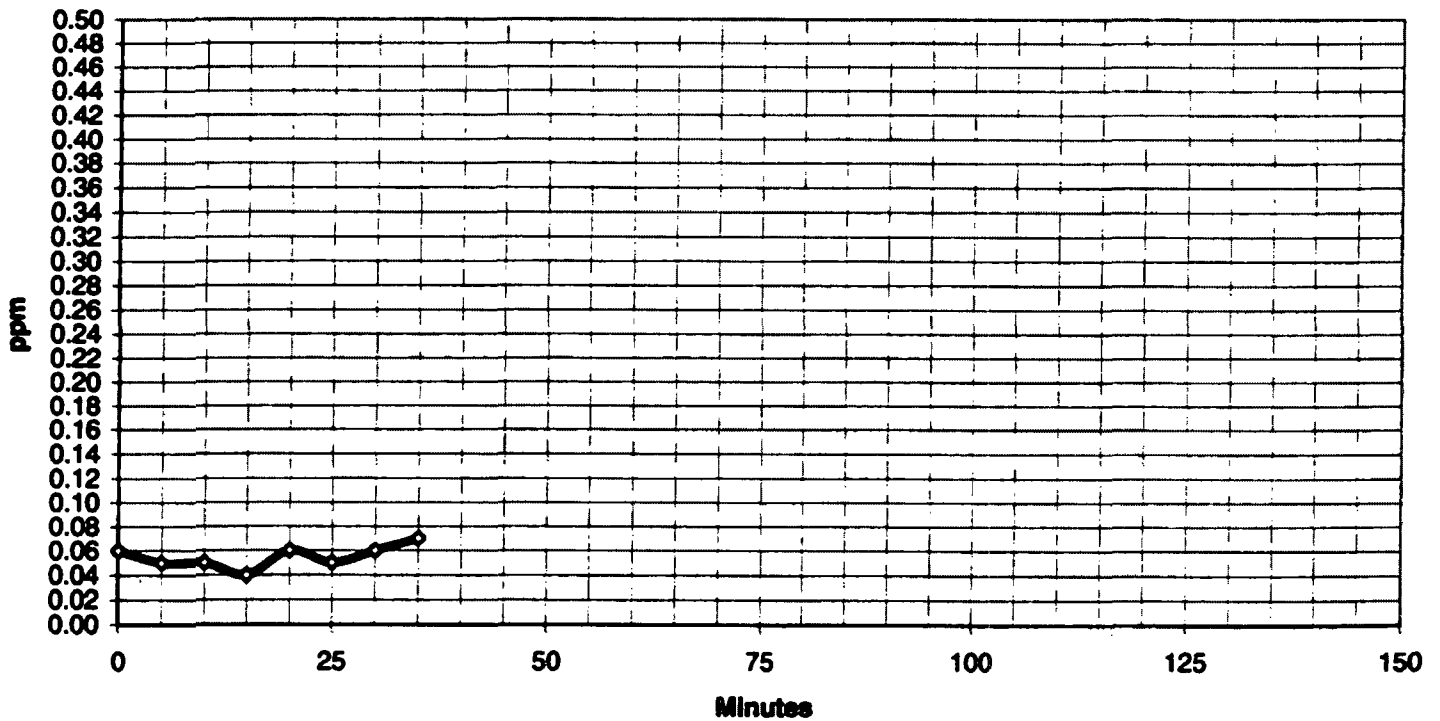
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/12/09
Time: 10:16

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
01/19/09	20	20
01/20/09	20	20
01/21/09	20	20
01/22/09	20	20
01/23/09	20	22
01/24/09	20	20
01/25/09	21	21

HALOGEN DOSING CURVE

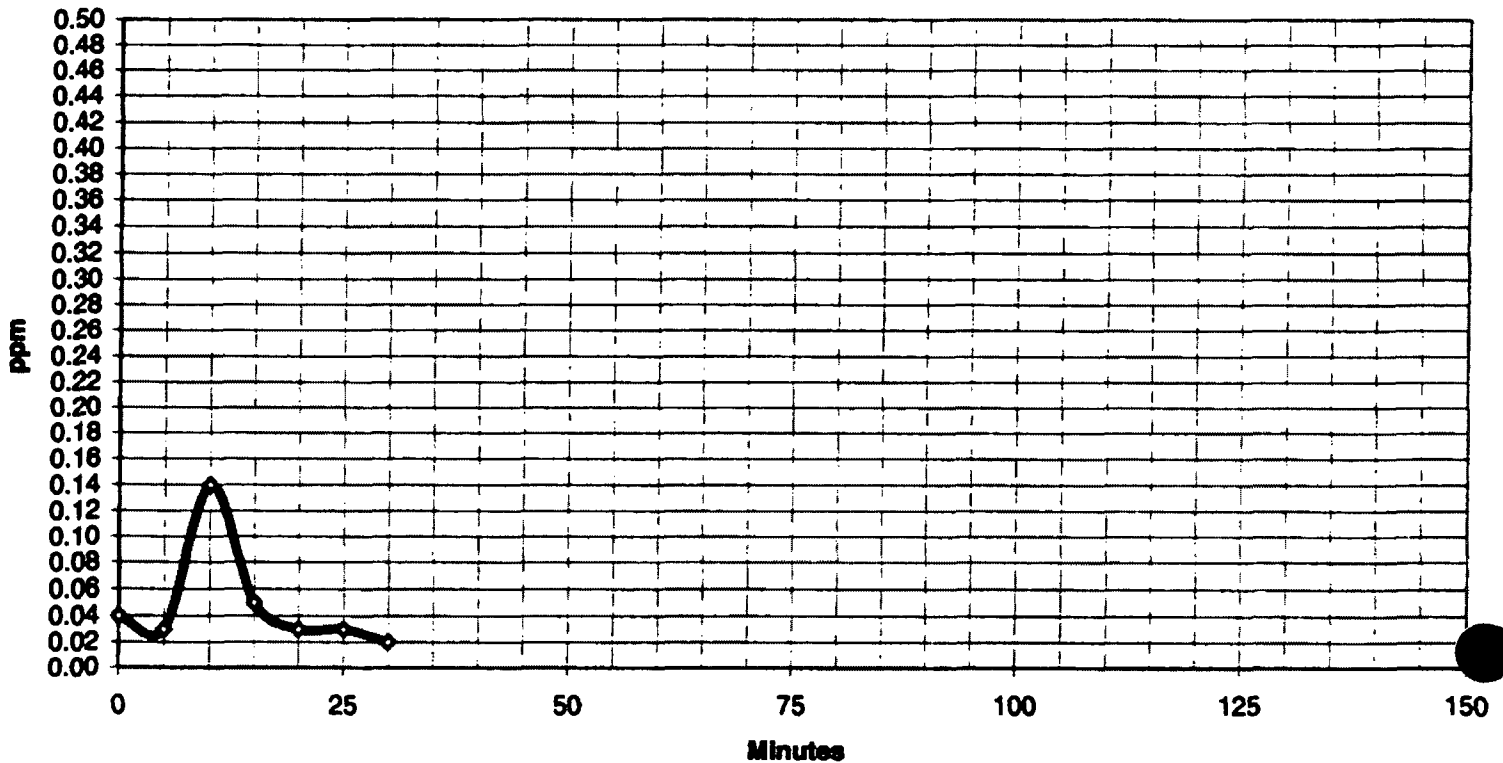
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/21/09
Time: 10:22

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

Unit: I

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
01/26/09	20	20
01/27/09	17	17
01/28/09	20	20
01/29/09	20	20
01/30/09	20	20
01/31/09	20	20

HALOGEN DOSING CURVE

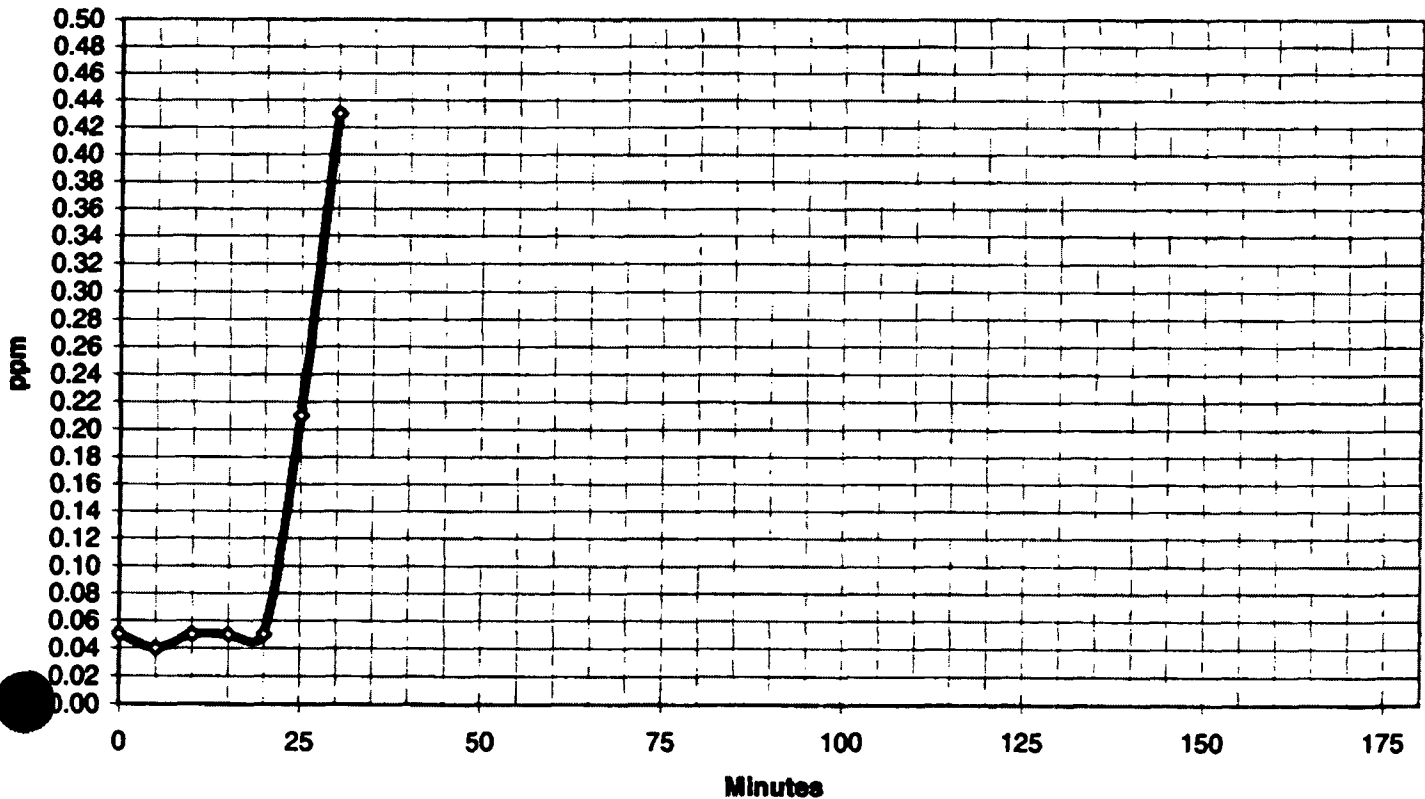
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 01/26/09
Time: 11:10

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.



B. Cox



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

www.exeloncorp.com

March 19, 2009

LTR: BYRON 2009-0032
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 February 1, 2009 through February 28, 2009.

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

Respectfully,

A handwritten signature in black ink, appearing to read "Bradley G. Adams".

**Bradley G. 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
(SUDR 01)
F - FINAL
DEMINERALIZER REGENERATE (001A)
EFFLUENT

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	2	0	1
0	9	0	2	2	8

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	_____	_____	(26)	_____	0.6	0.6	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	15.0 30 DAY AVG.	30.0 DAILY MAX.	MG/L		ONCE/MONTH	COMP-8
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	_____	_____	(26)	_____			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.1 30 DAY AVG.	0.2 DAILY MAX.	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	_____	_____	(26)	_____			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0 30 DAY AVG.	2.0 DAILY MAX.	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	_____	_____	(26)	_____			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.5 30 DAY AVG.	1.0 DAILY MAX.	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	_____	_____	(26)	_____			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0 30 DAY AVG.	1.0 DAILY MAX.	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	_____	_____	(26)	_____			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	0.2 30 DAY AVG.	0.4 DAILY MAX.	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	_____	_____	(26)	_____			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0 30 DAY AVG.	2.0 DAILY MAX.	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	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.	<i>Bradley J. Adams</i> SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	09	03	19
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED							

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 25 of 28 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

IL0046313
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
09	02	01	09	02	08

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)	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	0.026	0.129	(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 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.	<i>Bradley J. Adams</i> SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
Bradley J. Adams			815	406-3700	09	03	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)**

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

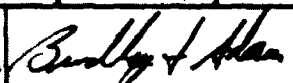
STP EFFLUENT (FORMER 001B)
EFFLUENT

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0	9	0	To: 0	9	0
		2			2
		0			8

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE													
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS																
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.15	0.17	(26)	-----	2.5	2.6	(19)	0	290	DC													
	PERMIT REQUIREMENT	14.2 30 DAY AVG	29.5 DAILY MAX	LBS/DY	-----	39.9 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24													
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.27	-----	7.59	(12)	0	290	GR													
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB													
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.14	0.19	(26)	-----	2.3	2.8	(19)	0	290	DC													
	PERMIT REQUIREMENT	14.2 30 DAY AVG	29.5 DAILY MAX	LBS/DY	-----	39.9 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24													
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 80060 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.				 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE															
Bradley J. Adams							815	408-3700	09	03	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 28 of 28 days during the month.																								

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	02	01	09	02	08

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)	—	< 0.9	2.0	(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.	TELEPHONE		DATE		
Bradley J. Adams		815	408-3700	09	03	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 17 of 28 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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


MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	02	01	09	02	08

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) 01002 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(10)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03682 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.8	3.0	(10)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.024	0.039	(03)	-----	-----	-----	---	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 815 406-3700 AREA CODE NUMBER		DATE 09 03 19 YEAR MONTH DAY	
Bradley J. Adams											
Plant Manager											
TYPED OR PRINTED											

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

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

OCR0501

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

IL0048313
PERMIT NUMBER

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 81010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9 0 2 0 1	To: 0 9 0 2 2 8				

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 0.4	< 0.5	(19)	0	240	CP
00630 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 2.1	4.1	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.021	0.023	(03)	-----	-----	-----	-----	0	135	CN
60060 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	03	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

1. Flow existed through this outfall 8 of 28 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

E01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

STORMWATER (FORMER 001E)
STORMWATER

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0 9 0			2 0 1			To: 0 9 0			2 2 8		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
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	
00630 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)		500	
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)		500	
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)		500	
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)				(19)		500	
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	
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		DATE		
815	406-3700	09	03	19
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 3 of 28 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	2	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			
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 1.6	1.7	(19)	0	290	GR
03582 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.075	0.128	(03)	-----	-----	-----	---	0	290	TM
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		TWICE/MONTH	TOTALIZ.
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	03	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

OCR0501

PERMITTEE NAME/ADDRESS

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

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 81010

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	9	0	2	0	1	To:	0	9	0	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			
PH	SAMPLE MEASUREMENT	-----	-----	---	7.85	-----	8.77	(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)	-----	-----	-----	(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.030	(19)	0	240	GR
01082 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	19.09	25.98	(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)	-----	0.08	0.26	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley J. Adams			815	408-3700	09	03	19
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

**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		
From:	0	9	0	2	0	1	To:	0	9	0	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			
PH	SAMPLE MEASUREMENT	-----	-----	----		-----		(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	----	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
00630 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01032 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	408-3700	09	03	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
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. 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
0	9	0	2	0	1
0	9	0	2	2	8

From: To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(28)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(28)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(28)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	---	---	---	---			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/ MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	408-3700	09	03	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

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

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
02/07/09	120	74.3
02/14/09	120	60.5
02/21/09	120	69.0
02/28/09	120	64.1

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

HYDRAZINE MONITORING:

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

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

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

COMMENTS:

1. The weekly halogen concentration curves and daily halogen dosing time reports are attached.
2. Bromine was not used this month.
3. There was no discharge of steam generator chemical cleaning wastewater containing hydrazine in this month.
4. Flow existed through this outfall 28 of 28 days.

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
02/01/09	20	20
02/02/09	20	20
02/03/09	20	20
02/04/09	20	20
02/05/09	20	20
02/06/09	19	18
02/07/09	18	19
02/08/09	18	15

HALOGEN DOSING CURVE

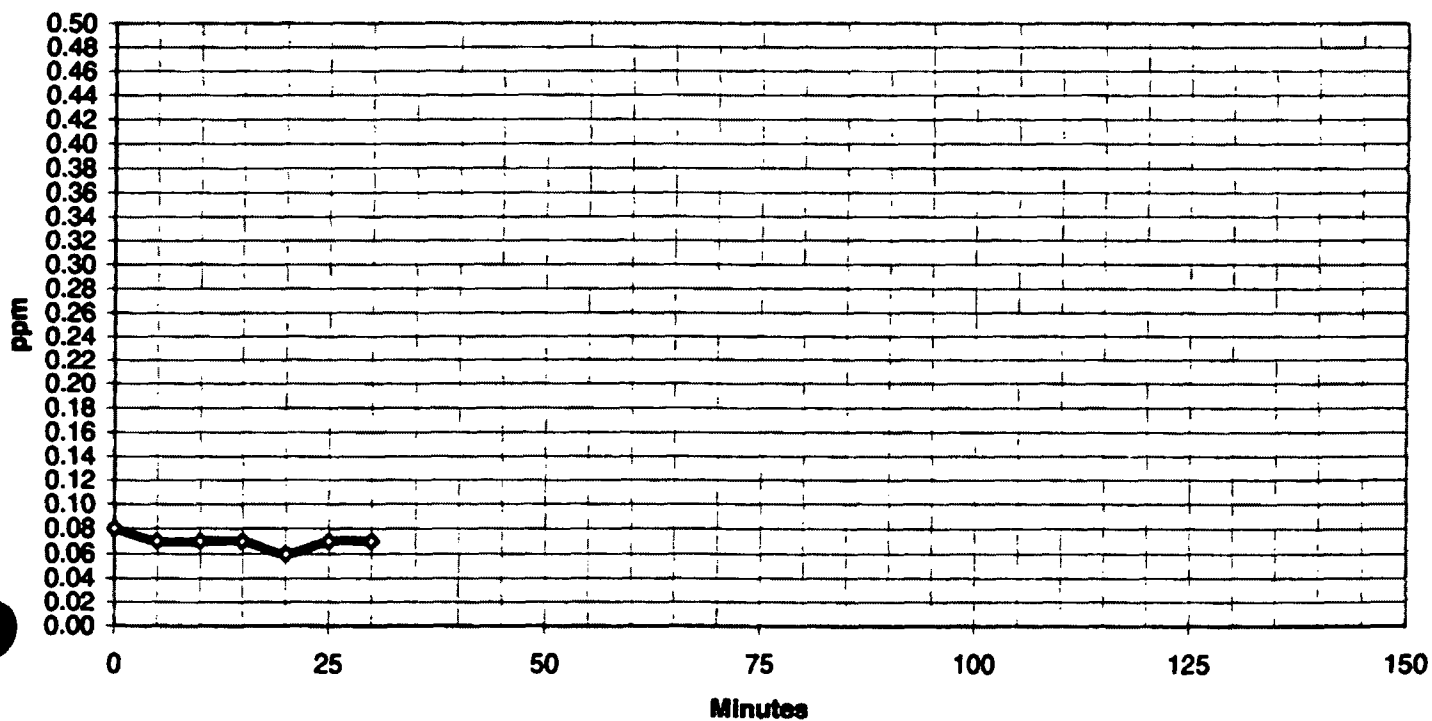
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/02/09
Time: 11:58

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

Unit: I

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
02/09/09	20	20
02/10/09	20	21
02/11/09	17	18
02/12/09	17	17
02/13/09	20	20
02/14/09	20	20
02/15/09	20	20

HALOGEN DOSING CURVE

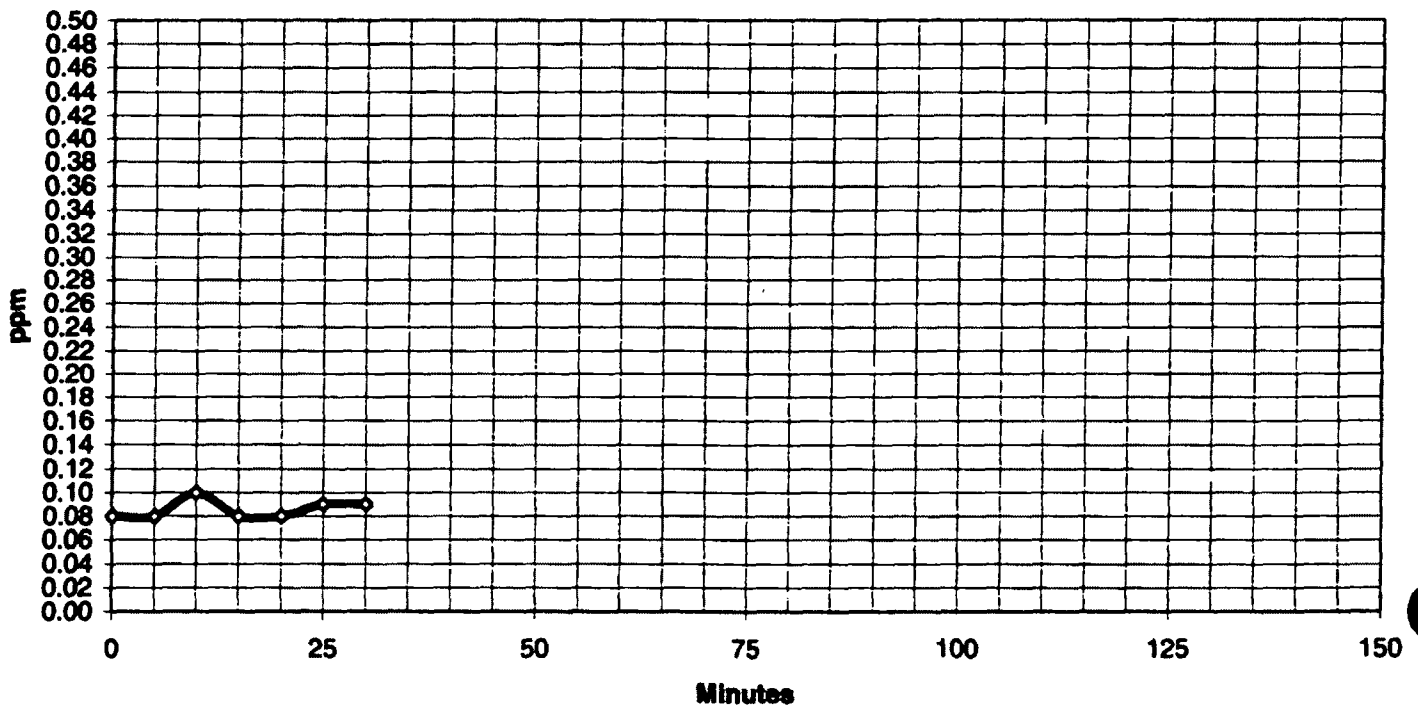
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/09/09
Time: 10:27

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

Unit: 2

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
02/16/09	20	20
02/17/09	16	20
02/18/09	20	20
02/19/09	20	20
02/20/09	20	20
02/21/09	19	18
02/22/09	20	19

HALOGEN DOSING CURVE

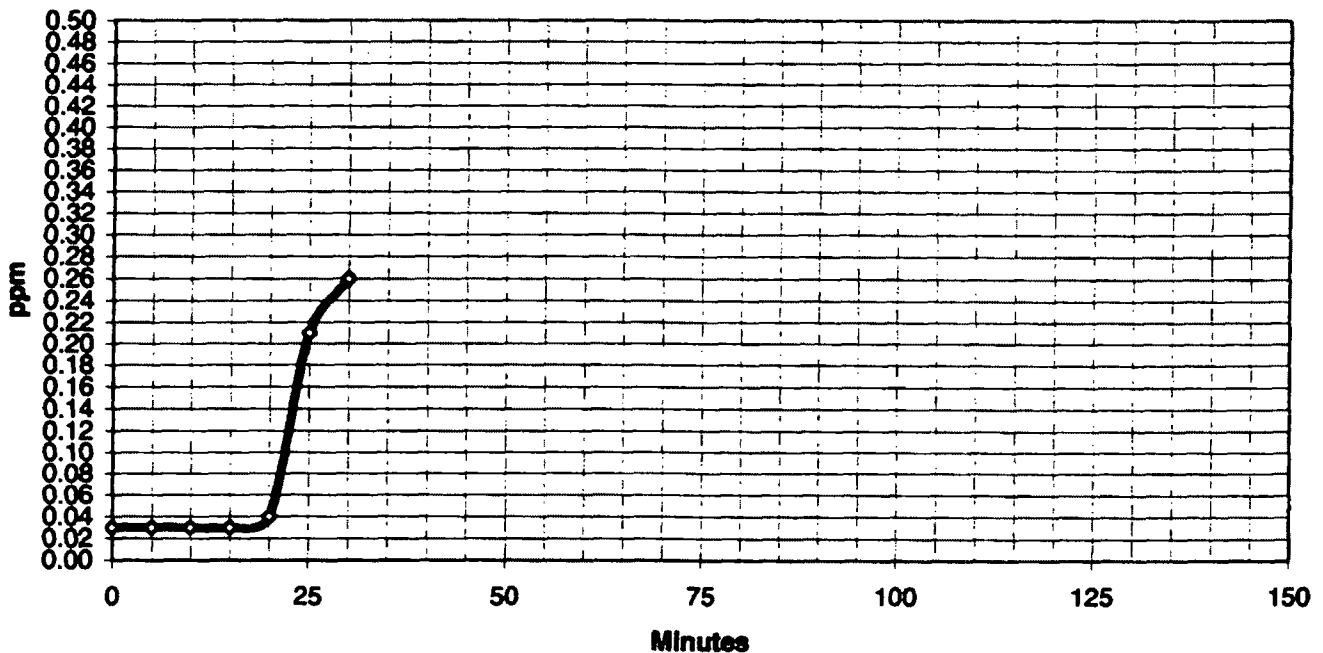
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/16/09
Time: 11:40

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

Unit: 1

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



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

Date	Dosing Time (Minutes)	
	U-1	U-2
02/23/09	25	25
02/24/09	25	25
02/25/09	28	27
02/26/09	27	25
02/27/09	25	25
02/28/09	25	25

HALOGEN DOSING CURVE

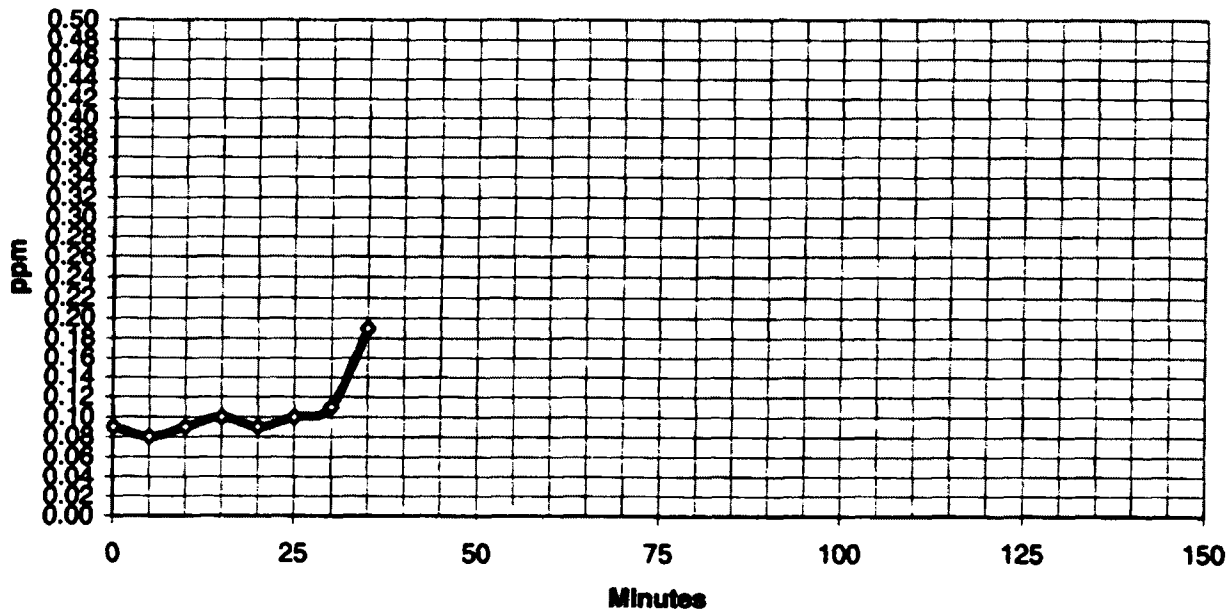
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 02/23/09
Time: 12:40

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

Unit: 2

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



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

www.exeloncorp.com

3. Cox

April 20, 2009

LTR: BYRON 2009-0050
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 March 1, 2009 through March 31, 2009.

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

Respectfully,



Bradley J. Adams
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

(BUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)

EFFLUENT

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


MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	03	01	09	03	01

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---	< 0.7	< 0.7	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0	30.0	MG/L		ONCE/MONTH	COMP-6
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1	0.2	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0	1.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2	0.4	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
01057 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0	2.0	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE						30 DAY AVG	DAILY MAX				
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	04	20	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) 1. There was no discharge of processed steam generator chemical cleaning waste water during this month. 2. Flow existed 27 of 31 days during this month.											

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

OCR0601

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DEMNERALIZER REGENERATE (001A)

EFFLUENT

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

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

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.012	0.086	(03)	-----	-----	-----	----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE

815 406-3700

AREA CODE NUMBER

DATE

09 04 20

YEAR MONTH DAY

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

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME 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	MONTH	DAY
0	9	0	3	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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.14	< 0.20	(28)	-----	< 2.0	< 2.0	(19)	0	280	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.21	-----	7.32	(12)	0	280	GR
	PERMIT REQUIREMENT	8.0 MINIMUM	9.0 MAXIMUM	---	8.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.08	0.09	(28)	-----	< 0.7	0.9	(19)	0	280	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.008	0.015	(03)	-----	-----	-----	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	04	20	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											
1. Flow existed through this outfall 30 of 31 days during the month.											

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	03	01	09	03	01

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.2	3.4	(19)	0	240	DC
00630 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMP24
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COOPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01046 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01067 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	09	04	20
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 20 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	9	0	3	0	1	To:	0	9	0
							3	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	-----	-----	(28)	-----			(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	-----	-----	(28)	-----	< 2.3	2.9	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50080 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.025	0.043	(03)	-----	-----	-----	----	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		DAILY	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	408-3700	09	04	20	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

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

IL0046313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD						
YEAR	MONTH	DAY	YEAR	MONTH	DAY	
0	9	0	3	0	1	To: 0 9 0 3 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 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	< 0.4	< 0.5	(19)	0	240	CP
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		WEEKLY	COMPOS
OIL AND GREASE 03682 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	< 1.4	< 1.4	(19)	0	240	GR
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.022	0.023	(03)	---	---	---	---	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

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

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

TELEPHONE

815 406-3700

AREA
CODE

DATE

09 04 20

YEAR MONTH DAY

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

1. Flow existed through this outfall 3 of 31 days during the month.

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

OCR0501

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

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

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

MONITORING PERIOD

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

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	8.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(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	-----	-----	(28)	-----			(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	-----	-----	(28)	-----			(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	-----	-----	(28)	-----			(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						815 408-3700		09	04	20	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

1. 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

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


From:

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

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE							
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS										
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----			(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	-----	-----	(28)	-----			(19)		500								
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB							
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 1.6	1.8	(19)	0	280	GR							
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB							
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.469	0.784	(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	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE		DATE							
Bradley J. Adams														815	406-3700	09	04	20
Plant Manager														AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED																		

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

1. Flow is based on actual totalizer reading and an estimate due to totalizer malfunction in March. The totalizer was returned to normal on March 25, 2009.

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

OCR0501

PERMITTEE NAME/ADDRESS
NAME Easton 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 4460 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	03	01	09	03	31

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	7.94	-----	8.77	(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)	-----	-----	0.011	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.106	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	19.77	25.40	(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)	-----	0.06	0.31	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	TELEPHONE		DATE		
Bradley J. Adams		815	406-3700	09	04	20
Plant Manager		AREA CODE	NUMBER	YEAR	MONTH	DAY
TYPED OR PRINTED		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT				

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

SEE ATTACHED

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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


MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	03	01	09	03	01

From:

To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
PH	SAMPLE MEASUREMENT	---	---	---	---	---	---	(12)				
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	---	8.0 MINIMUM	---	9.0 MAXIMUM	SU		SEE PERMIT	GRAB	
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)				
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 815 406-3700		DATE 09 04 20		
Bradley J. Adams												
Plant Manager												
TYPED OR PRINTED								AREA CODE		YEAR	MONTH	DAY
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here) 1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month. 2. This discharge point was not used this month.												

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

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

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

From:

To:

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS Ni) 01067 1 0 0	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS Zn) 01062 1 0 0	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03562 1 0 0	SAMPLE MEASUREMENT	---	---	(26)	---			(19)			
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			(03)	---	---	---	---			
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	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	04	20	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
03/07/09	120	70.7
03/14/09	120	67.5
03/21/09	120	75.0
03/28/09	120	65.1

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

HYDRAZINE MONITORING:

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

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

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

COMMENTS:

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

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
03/01/09	25	25
03/02/09	25	25
03/03/09	25	25
03/04/09	25	25
03/05/09	25	25
03/06/09	27	26
03/07/09	27	26
03/08/09	25	25

HALOGEN DOSING CURVE

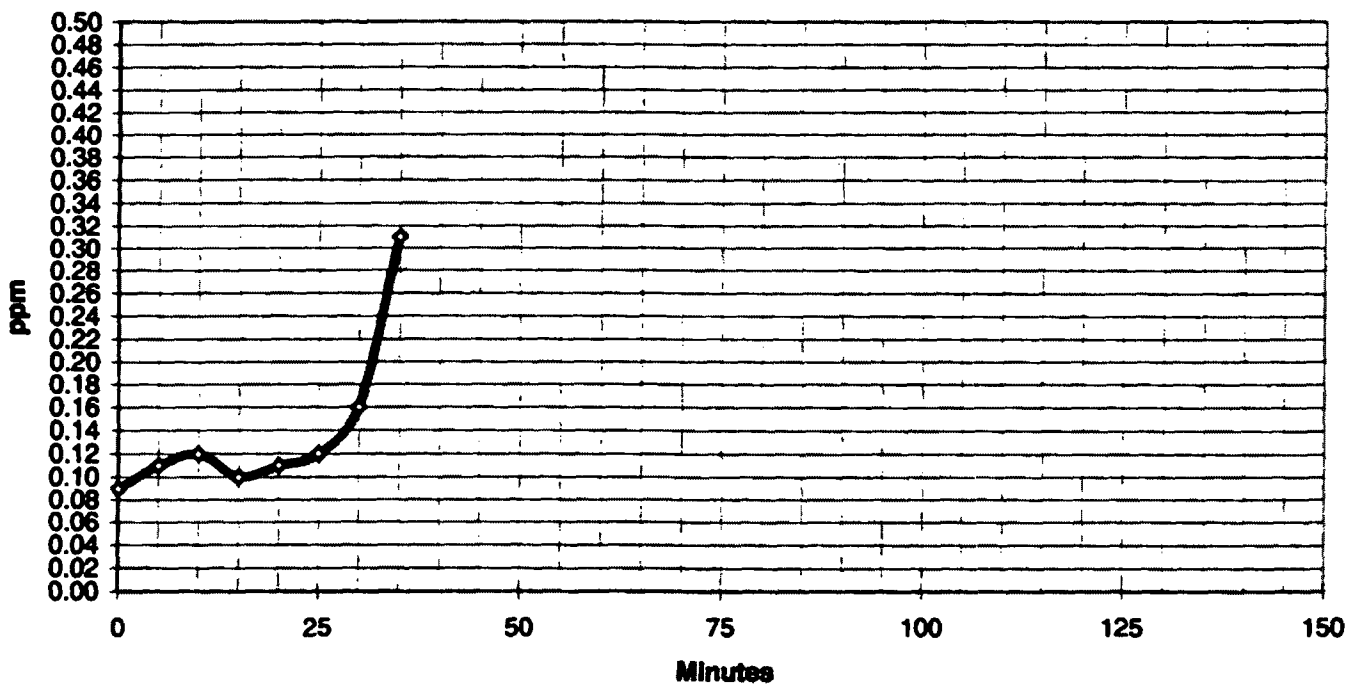
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/02/09
Time: 10:25

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
03/09/09	25	25
03/10/09	25	25
03/11/09	25	25
03/12/09	25	28
03/13/09	25	25
03/14/09	25	25
03/15/09	25	25

HALOGEN DOSING CURVE

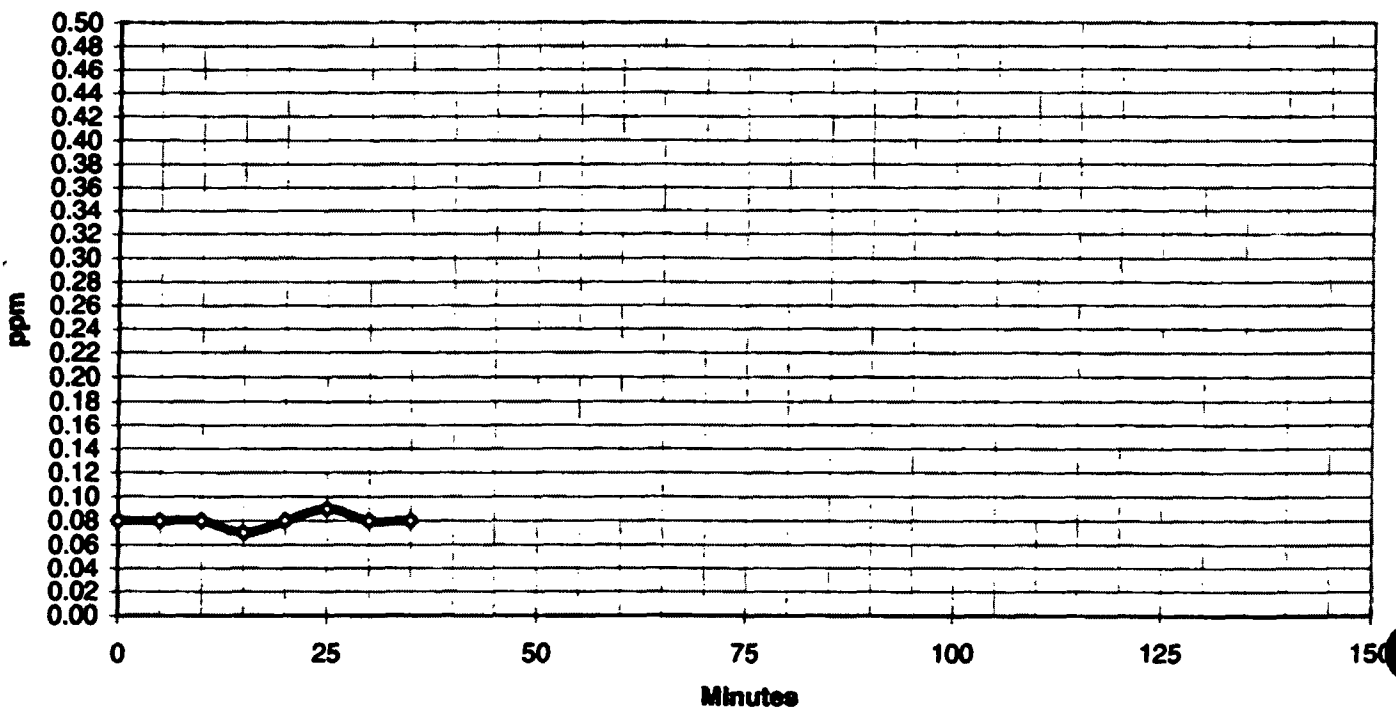
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/09/09
Time: 12:33

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
03/16/09	25	25
03/17/09	25	25
03/18/09	24	25
03/19/09	25	25
03/20/09	25	25
03/21/09	25	27
03/22/09	25	25

HALOGEN DOSING CURVE

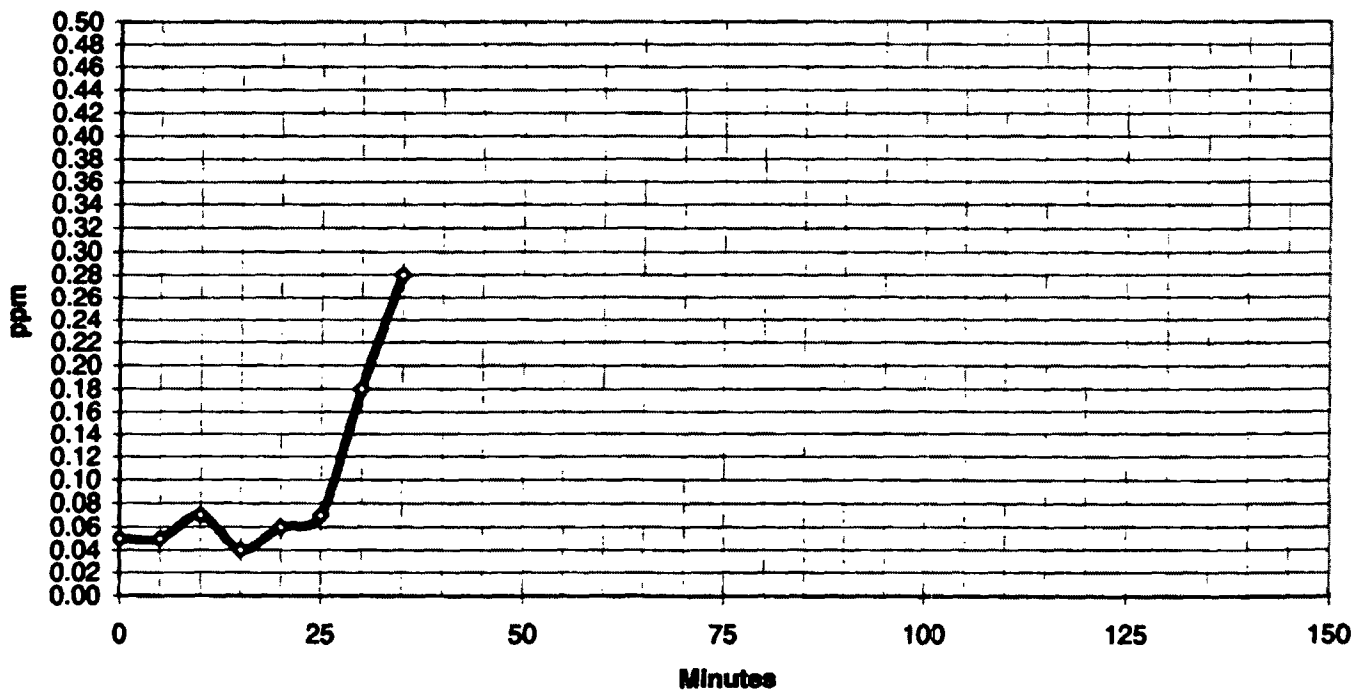
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/16/09
Time: 11:19

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

Unit: 1

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



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
03/23/09	25	25
03/24/09	25	25
03/25/09	25	25
03/26/09	26	25
03/27/09	25	25
03/28/09	25	25
03/29/09	25	25

HALOGEN DOSING CURVE

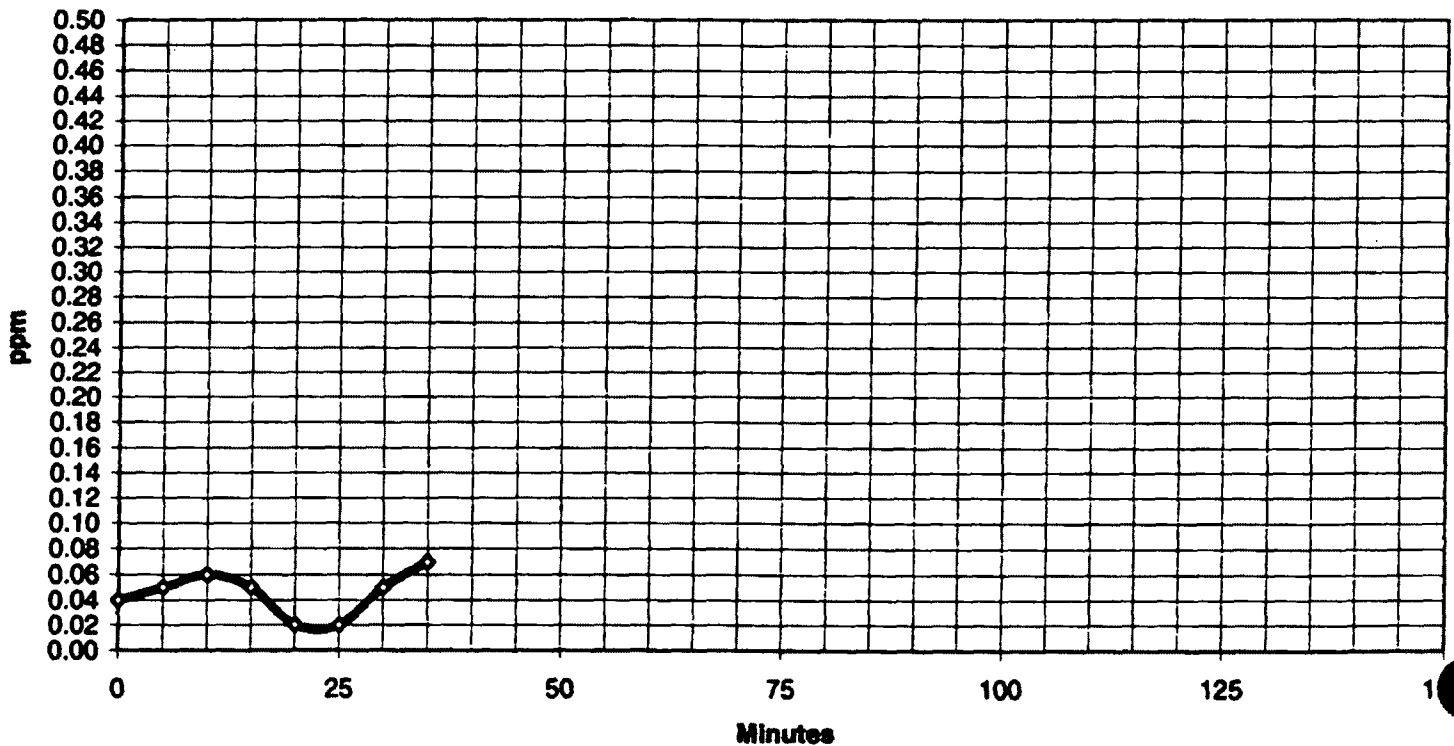
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/24/09
Time: 12:56

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
03/30/09	25	25
03/31/09	25	25

HALOGEN DOSING CURVE

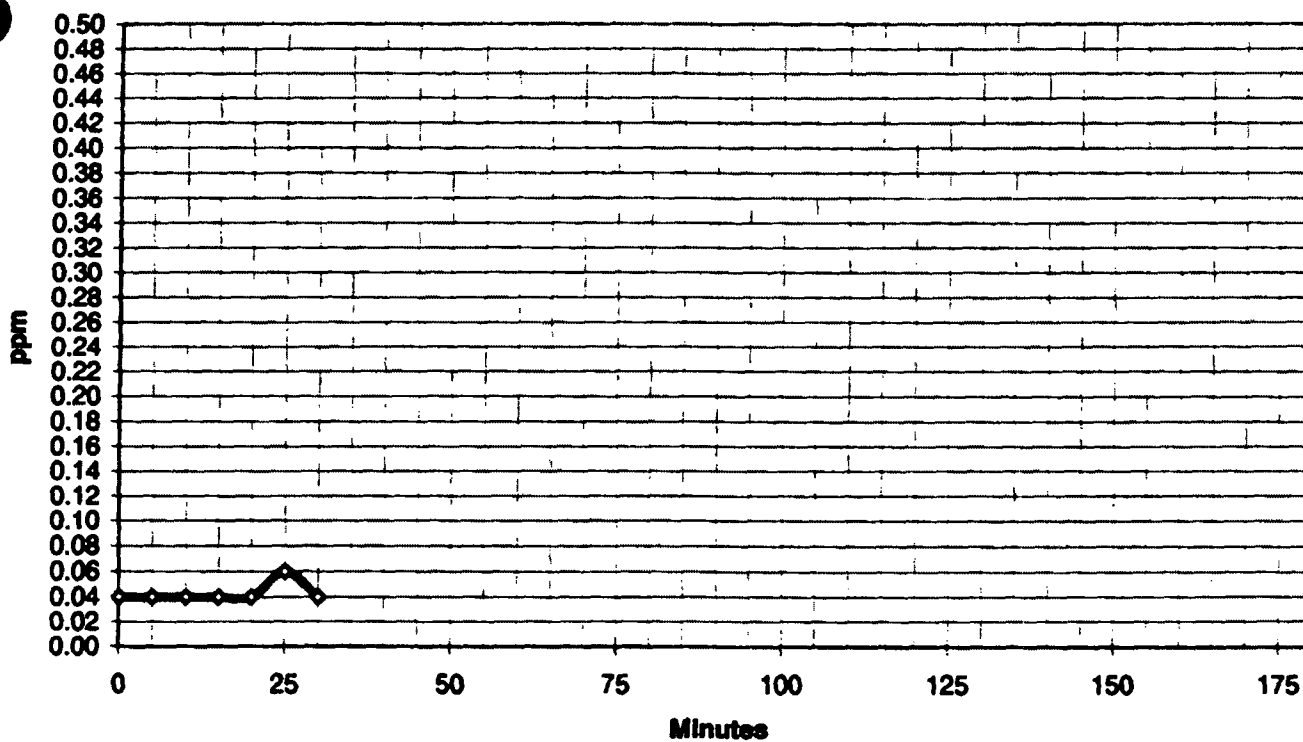
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 03/30/09
Time: 11:35

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

www.exeloncorp.com

Joe
Exelon
Nuclear

May 18, 2009

**LTR: BYRON 2009-0058
File: 2.09.0411
1.10.0101**

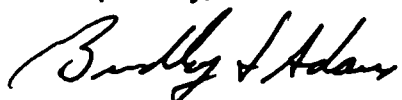
**Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276**

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 April 1, 2009 through April 30, 2009.

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

Respectfully,



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

BJA/ZC/sdk

Attachments

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

DEMINERALIZER REGENERATE (001A)

EFFLUENT

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

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
0	9		0	4		0	1		0	9	

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	0.8	0.8	(19)	0	285	EC
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-6
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0 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	0.5 DAILY MAX	MG/L		DAILY	GRAB
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01057 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 406-3700		09	05	18	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR

(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		
0	9	0	4	0	1	0	9	0	4	3	0

From:

To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(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											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.027	0.110	(03)	-----	-----	-----	---	0	135	CN
50050 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	CONTIN
EFFLUENT GROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	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											
Bradley J. Adams						815	408-3700	09	05	18	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0046313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL

STP EFFLUENT (FORMER 001B)
EFFLUENT

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

MONITORING PERIOD									
YEAR	MONTH	DAY	YEAR	MONTH	DAY				
0	9	0	4	0	1	To:	0	9	0
							4	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			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	< 0.12	< 0.20	(28)	-----	< 2.0	< 2.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	----	7.29	-----	7.56	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	----	6.8 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/ MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00630 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.03	0.05	(28)	-----	0.7	0.8	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/ MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 80060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	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.					TELEPHONE		DATE			
Bradley J. Adams						615	406-3700	09	05	18	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

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

1. Flow existed through this outfall 29 of 30 days during the month.

PARAMETER	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION			NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM			
SOLIDS, TOTAL	SAMPLE								
	MEASUREMENT	(26)			< 0.9	1.2	(19)	0	DC
	PERMIT				15.0	30.0			WEEKLY
SUSPENDED	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT				0.1	0.2			DAILY
CHROMIUM, HEXAVALENT	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
CHROMIUM, TOTAL	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT				1.0	2.0			DAILY
COPPER, TOTAL	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT				0.5	1.0			DAILY
IRON, TOTAL	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT				1.0	1.0			DAILY
LEAD, TOTAL	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT				0.2	0.4			DAILY
NICKEL, TOTAL	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								
	MEASUREMENT	(26)					(19)		
	PERMIT								DAILY
EFFLUENT GROSS VALUE	SAMPLE								

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

OCR0501

PERMITTEE NAME/ADDRESS

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

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

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

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

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	04	01	09	04	30

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)	SAMPLE MEASUREMENT	---	---	(20)	---	---	---	(19)		500	
01092 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
OIL AND GREASE	SAMPLE MEASUREMENT	---	---	(20)	---	< 1.9	3.6	(19)	0	240	GR
03582 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.032	0.062	(03)	---	---	---	---	0	135	TM
60060 1 0 0	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		DAILY	TOTALIZ.
EFFLUENT GROSS VALUE											
	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

615 406-3700

AREA
CODE

DATE

09 05 18

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		
From: 0 9 0 4 0 1						To: 0 9 0 4 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	-----	-----	(28)	-----	<0.5	< 0.5	(19)	0	240	CP									
00630 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG.	20.0 DAILY MAX	MG/L		WEEKLY	COMPOS									
EFFLUENT GROSS VALUE																				
OIL AND GREASE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	< 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	MG/L		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																			
	SAMPLE MEASUREMENT																			
	PERMIT REQUIREMENT																			
	SAMPLE MEASUREMENT																			
	PERMIT REQUIREMENT																			
	SAMPLE MEASUREMENT																			
	PERMIT REQUIREMENT																			
NAME/TITLE	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE										
PRINCIPAL EXECUTIVE OFFICER																				
Bradley J. Adams																				
Plant Manager																				
TYPED OR PRINTED								AREA CODE												
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)**

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

STORMWATER (FORMER 001E)
STORMWATER

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

MONITORING PERIOD														
YEAR			MONTH		DAY			YEAR			MONTH		DAY	
0	9		0	4	0	1		0	9	0	4	3	0	
From:							To:							

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)		500	
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(19)		500	
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB

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	09	05	18
TYPED OR PRINTED		AREA CODE	NUMBER	YEAR	MONTH	DAY

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

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 8 of 30 days during the month.

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

OCR0501

PERMITTEE NAME/ADDRESS

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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MAJOR
(BUBB 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	04	01	09	04	30

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	_____	_____	(28)	_____	_____	_____	(19)		500	
	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	_____	_____	(28)	_____	_____	_____	(19)		500	
	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	_____	_____	(28)	_____	< 1.6	1.6	(19)	0	290	GR
	PERMIT REQUIREMENT	_____	_____	LBS/DY	_____	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.204	0.566	(.03)	_____	_____	_____	_____	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	_____	_____	_____	_____		TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815 408-3700		09	06	18	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
COOLING SYSTEM BLOWDOWN
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
	4	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			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.39	-----	8.74	(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	-----	-----	(28)	-----	-----	0.018	(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	-----	-----	(28)	-----	-----	0.039	(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	-----	-----	(28)	-----	-----		(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	19.43	25.81	(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	-----	-----	(28)	-----	0.15	0.35	(19)	0	240	GR
50080 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	-----	-----	(28)	-----	-----	-----	(19)		500	
81313 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.831 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						815 408-3700		09	05	18	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment

SEE ATTACHED

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	0	4	3

From:

To:

MAJOR

(SUBR 01)


F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)			
00400 1 0 0	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01046 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)			
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		TELEPHONE		DATE		
Bradley J. Adams			815	408-3700	09	05	18
Plant Manager			SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		AREA CODE	NUMBER	YEAR
TYPED OR PRINTED						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

IL0046313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	04	01	09	04	03

From: To:

MAJOR
(SUBR 01)


F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)			
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	-----	-----	-----	----			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	----		TWICE/ MONTH	TOTALIZ.
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		DATE		
			815	408-3700	09	05	18
			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
April 2009

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
04/04/09	120	73.3
04/11/09	120	72.5
04/20/09	120	73.2
04/25/09	120	87.3

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 April 2009.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
April 2009**

COMMENTS:

1. The weekly halogen concentration curves and daily halogen dosing time reports are attached.
2. Bromine was not used this month.
3. There was no discharge of steam generator chemical cleaning wastewater containing hydrazine in this month.
4. Flow existed through this outfall 30 of 30 days.

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)		Date	Dosing Time (Minutes)	
	U-1	U-2		U-1	U-2
04/01/09	25	25	04/08/09	25	25
04/02/09	25	25	04/09/09	25	25
04/03/09	27	25	04/10/09	25	25
04/04/09	25	25	04/11/09	25	25
04/05/09	25	25	04/12/09	25	25
04/06/09	25	25			
04/07/09	25	25			

HALOGEN DOSING CURVE

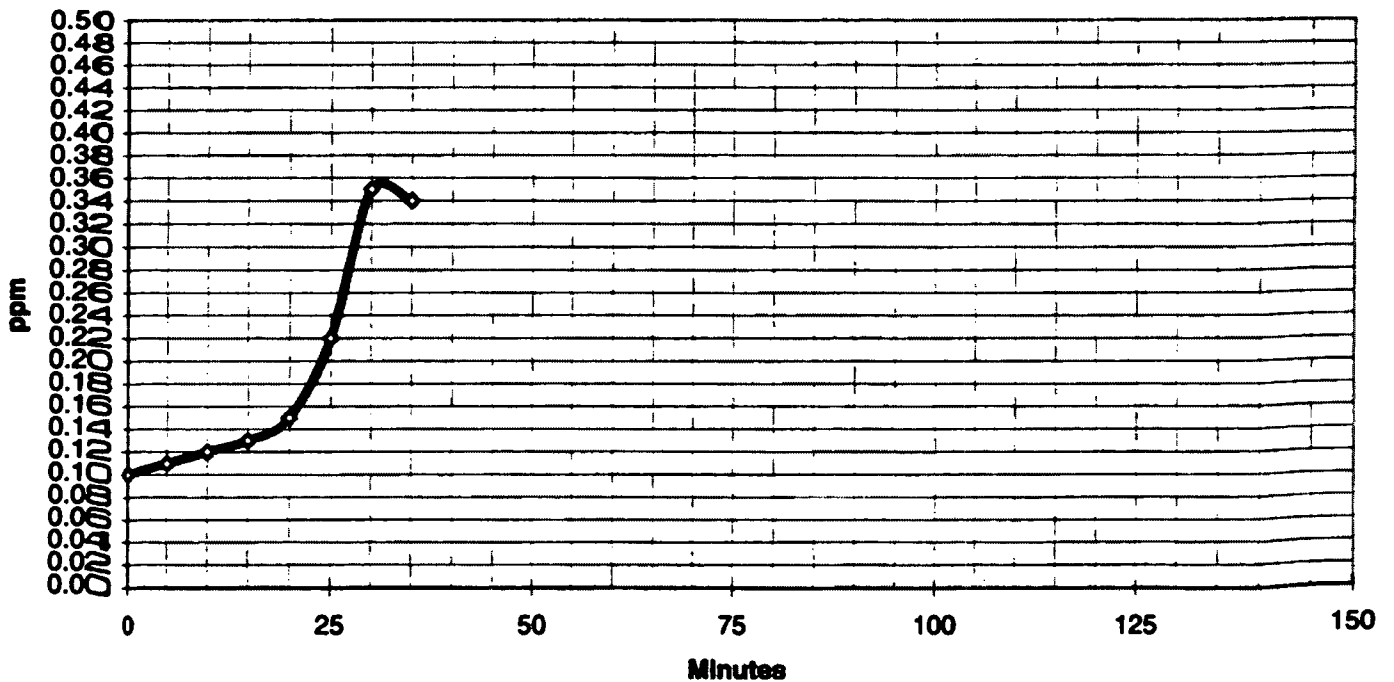
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/06/09
Time: 10:19

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
04/13/09	30	30
04/14/09	30	30
04/15/09	30	30
04/16/09	31	30
04/17/09	30	30
04/18/09	30	31
04/19/09	30	30

HALOGEN DOSING CURVE

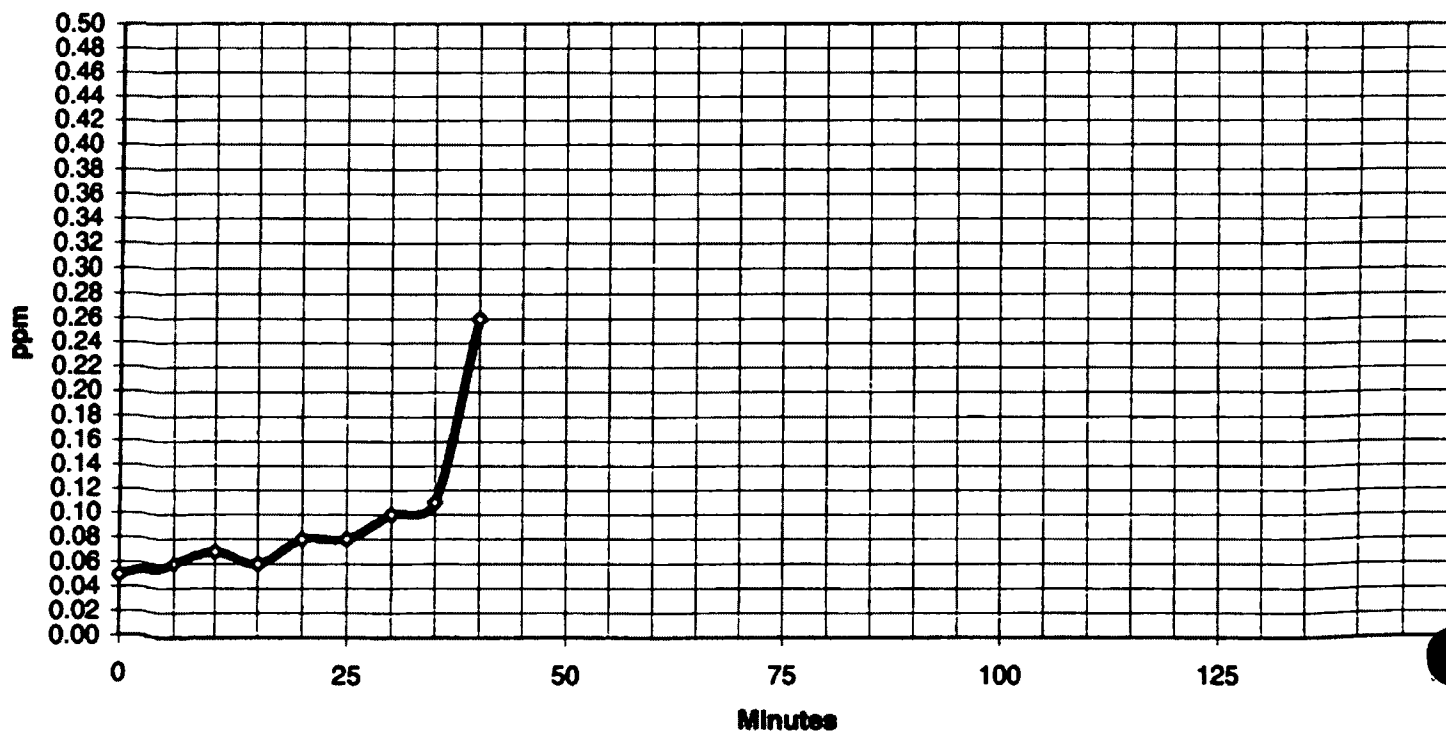
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/13/09
Time: 11:00

Analyzed by: G. S.
Reviewed by: D. M.

Unit: 1

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
04/20/09	30	30
04/21/09	30	30
04/22/09	30	35
04/23/09	30	30
04/24/09	30	30
04/25/09	30	30
04/26/09	30	30

HALOGEN DOSING CURVE

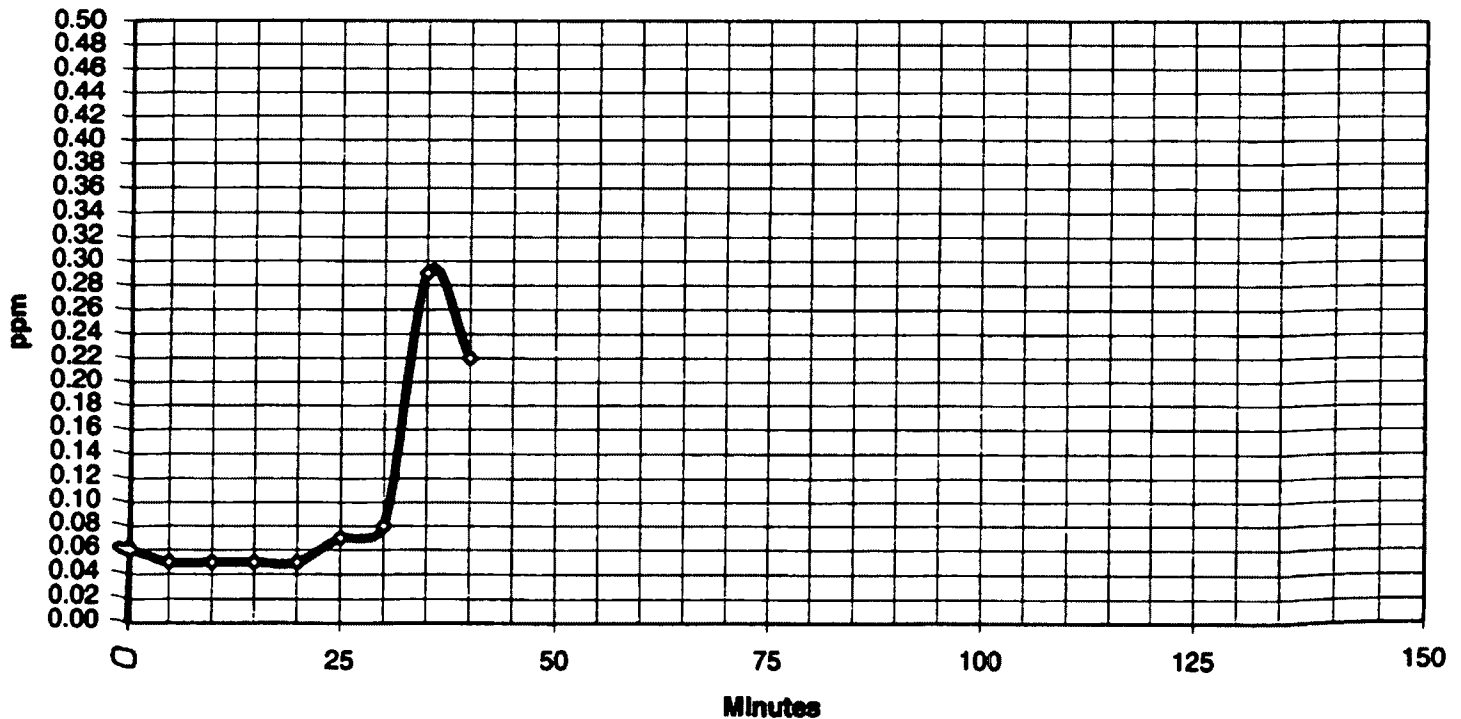
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/20/09
Time: 10:40

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
04/27/09	33	33
04/28/09	31	31
04/29/09	30	30
04/30/09	30	30

HALOGEN DOSING CURVE

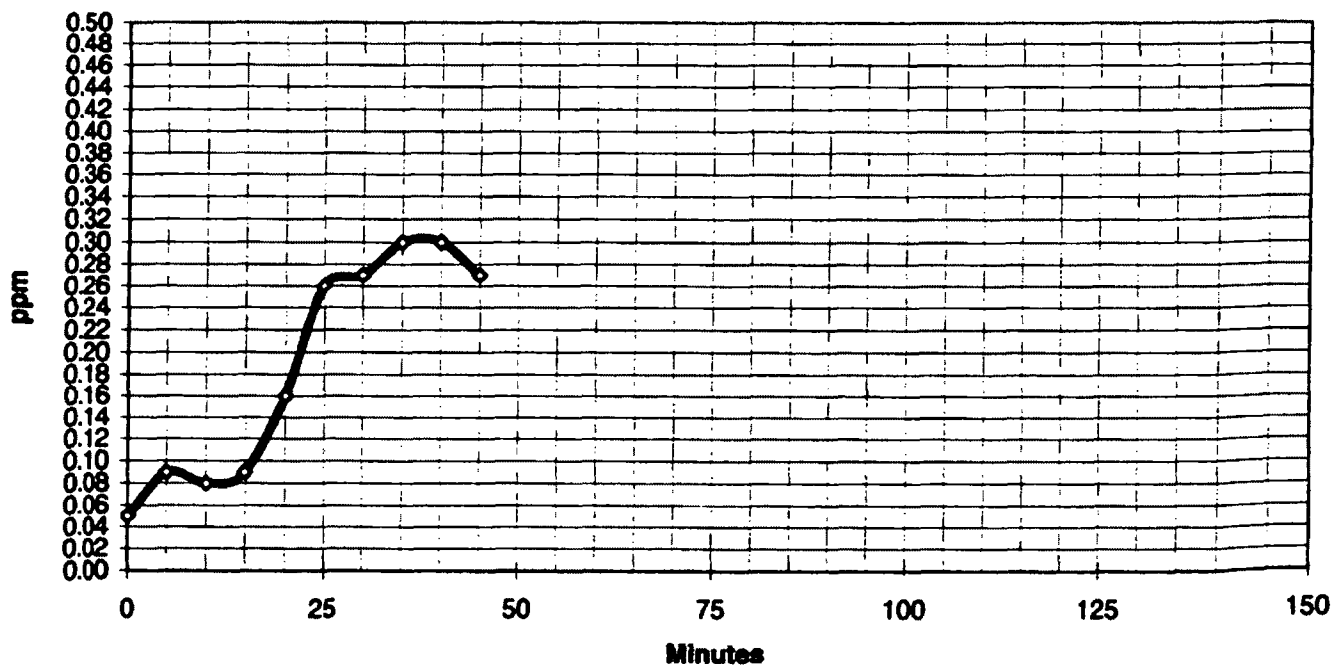
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 04/27/09
Time: 11:20

Analyzed by: D.C.A.
Reviewed by: D. M.

Unit: 1

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



Exelon Generation Company, LLC
Byron Station
4450 North German Church Road
Byron, IL 61010-9794

www.exeloncorp.com

June 19, 2009

LTR: BYRON 2009-0065
File: 2.09.0411
1.10.0101

Illinois Environmental Protection Agency
Water Pollution Control
Compliance Assurance Section #19
1021 North Grand Avenue East
P.O. Box 19276
Springfield, IL 62794-9276

Subject: Byron Station Monthly Discharge Monitoring Report

In accordance with National Pollutant Discharge Elimination System (NPDES) Permit Number IL0048313, issued September 8, 2000, we are submitting the Discharge Monitoring Report for Byron Station, Units 1 and 2. This report covers the period of May 1, 2009 through May 31, 2009.

If there are any questions regarding this report, please contact Mr. Stanley Kerr, Chemistry Manager, at (815) 406-3200.

Respectfully,



Bradley J. Adams
Plant Manager
Byron Nuclear Generating Station

BJA/ZC/sdk

Attachments

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	0	5	1

From: To:

MAJOR
(SUBR 01)
F - FINAL
DEMINEALIZER REGENERATE (001A)
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	2.7	2.7	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-6
EFFLUENT GROSS VALUE											
CHROMIUM, HEXAVALENT (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01032 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
CHROMIUM, TOTAL (AS CR)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01034 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01051 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											
NICKEL, TOTAL (AS NI)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01057 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Bradley J. Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE		DATE		
815	406-3700	09	06	19
AREA CODE	NUMBER	YEAR	MONTH	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1. There was no discharge of processed steam generator chemical cleaning waste water during this month.
2. Flow existed 31 of 31 days during this month.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

NAME/ADDRESS
Exelon Generation Co., LLC
4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

A01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
DEMINERALIZER REGENERATE (001A)
EFFLUENT

Byron Nuclear Power Station
4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
			5				5
			0				1

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

METER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
0 0 ROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(28)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT			LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
NDUIT OR MENT PLANT	SAMPLE MEASUREMENT	0.014	0.080	(03)	-----	-----	-----	-----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
0 0 ROSS VALUE	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

J. Adams

Manager

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.

Billy J. Adams

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 408-3700

AREA
CODE

NUMBER

09

YEAR

DATE

06

MONTH

19

DAY

NO EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

NAME/ADDRESS
elon Generation Co., LLC
100 Winfield Road
Arringtonville, IL 60555

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 0018)
EFFLUENT

Iron Nuclear Power Station
160 North German Church Road
Arrington, IL 61010

MONITORING PERIOD											
From:			To:								
YEAR	MONTH	DAY	YEAR	MONTH	DAY						
0	9	0	0	5	0						
0	5	0	1	0	1						

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

POLLUTANT	SAMPLE MEASUREMENT	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
0 DSS VALUE	SAMPLE MEASUREMENT	< 0.10	< 0.12	(26)	-----	< 2.0	< 2.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
0 DSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.39	-----	7.50	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	8.0 MAXIMUM	SU		TWICE/MONTH	GRAB
0 DSS VALUE	SAMPLE MEASUREMENT	< 0.06	0.06	(26)	-----	< 1.3	2.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
0 DSS VALUE	SAMPLE MEASUREMENT	0.007	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										

TITLE
TYPE OFFICER

Adams

Major

UNITED

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.

Brendley J. Adams

**SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT**

TELEPHONE

815 408-3700

AREA CODE

DATE

09 06 19

YEAR MONTH DAY

EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
w existed through this outfall 30 of 31 days during the month.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0601

NAME/ADDRESS
Exelon Generation Co., LLC
4300 Winfield Road
Warrenville, IL 60555

Byron Nuclear Power Station
4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
	5	0	1		5	3	1

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

METER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
AL	SAMPLE MEASUREMENT	---	---	(26)	---	< 1.0	1.4	(19)	0	240	DC
0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0	30.0	MGL		WEEKLY	COMP24
ROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
HEXAVALENT	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1	0.2	MGL		DAILY	GRAB
0 0	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
ROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0	2.0	MGL		DAILY	GRAB
TOTAL	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5	1.0	MGL		DAILY	GRAB
AL	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0	1.0	MGL		DAILY	GRAB
ROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2	0.4	MGL		DAILY	GRAB
ROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0	2.0	MGL		DAILY	GRAB
ROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2	0.4	MGL		DAILY	GRAB
ROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---			(19)		500	
0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0	2.0	MGL		DAILY	GRAB

TITLE
EXECUTIVE OFFICER

J. Adams

Manager

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.

Bridley J. Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 408-3700

AREA CODE NUMBER

DATE

09 06 19

YEAR MONTH DAY

ND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

here was no discharge of processed steam generator chemical cleaning waste water during this month.
low existed through this outfall 19 of 31 days during the month.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

NAME/ADDRESS
Exelon Generation Co., LLC
4300 Winfield Road
Warrenville, IL 60555

Byron Nuclear Power Station
4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE NUMBER

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
	5	0	1		5	3	1

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

METER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
0 0 ROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
0 0 ROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.5	1.7	(19)	0	240	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
0 0 ROSS VALUE	SAMPLE MEASUREMENT	0.023	0.035	(03)	-----	-----	-----	---	0	135	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	---		DAILY	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

EXECUTIVE OFFICER

J. Adams

Manager

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 Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA
CODE

NUMBER

DATE
09 06 19
YEAR MONTH DAY

NO EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

NAME/ADDRESS
Exelon Generation Co., LLC
4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
RADWASTE TREATMENT (FORMER 001D)
EFFLUENT

Byron Nuclear Power Station
4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD											
From:			To:								
YEAR	MONTH	DAY	YEAR	MONTH	DAY						
0	9	0	0	5	0						
1			1								

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

METER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
AL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.5	< 0.5	(19)	0	240	CP
0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MGL		WEEKLY	COMPOS
ROSS VALUE						30 DAY AVG	DAILY MAX				
ASE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 1.4	< 1.4	(19)	0	240	GR
0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0	20.0	MGL		WEEKLY	GRAB
ROSS VALUE						30 DAY AVG	DAILY MAX				
ADUIT OR	SAMPLE MEASUREMENT	0.023	0.023	(03)	-----	-----	-----	-----	0	135	CN
MENT PLANT	PERMIT REQUIREMENT	REPORT	REPORT	MGD	-----	-----	-----	-----		DAILY	CONTIN
0 0		30 DAY AVG	DAILY MAX								
ROSS VALUE											
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

TITLE
EXECUTIVE OFFICER

J. Adams

Manager

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 J. Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 408-3700

AREA
CODE NUMBER

DATE

09	08	19
YEAR	MONTH	DAY

NO EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

low existed through this outfall 3 of 31 days during the month.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

NAME/ADDRESS
Exelon Generation Co., LLC
4300 Winfield Road
Warrenville, IL 60555

Byron Nuclear Power Station
4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
			5				3
			1				1

MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

METER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS				
0 0	SAMPLE MEASUREMENT	---	---	---	---	---	---	(12)		500		
ROSS VALUE	PERMIT REQUIREMENT	---	---	---	6.0 MINIMUM	---	9.0 MAXIMUM	SU		SEE PERMIT	GRAB	
0 0	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		SEE PERMIT	GRAB	
AL, HEXAVALENT	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
0103 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.1 30 DAY AVG	0.2 DAILY MAX	MG/L		DAILY	GRAB	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
CHROMIUM, TOTAL (AS CR)	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
01034 1 0 0	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.5 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
01042 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB	
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
IRON, TOTAL (AS FE)	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB	
01045 1 0 0	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB	
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)		500		
01051 1 0 0	PERMIT REQUIREMENT	---	---	LBS/DY	---	0.2 30 DAY AVG	0.4 DAILY MAX	MG/L		DAILY	GRAB	
EFFLUENT GROSS VALUE												
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE		DATE	
Bradley J. Adams									815 408-3700		09 06 19	
Plant Manager									AREA CODE NUMBER		YEAR MONTH DAY	
TYPED OR PRINTED												

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. There was no discharge of processed steam generator chemical cleaning wastewater during the month.
3. Flow existed through this outfall 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

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE NUMBER

MAJOR

(SUBR 01)

F - FINAL

STORMWATER (FORMER 001E)

STORMWATER

FACILITY Byron Nuclear Power Station

LOCATION 4450 North German Church Road
Byron, IL 61010

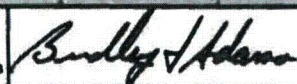
MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	5	0	1

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				
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500		
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
ZINC, TOTAL (AS ZN) 01082 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500		
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB	
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	2.2	2.2	(19)	0	290	GR	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/ MONTH	GRAB	
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.356	0.798	(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						615	406-3700	09	06	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
	0	9	0		0	9	0
	0	5	0		0	5	3
	1				1		

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.53	-----	8.80	(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)	-----	-----	0.015	(19)	0	240	GR
01042 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.071 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
ZINC, TOTAL (AS ZN)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.032	(19)	0	240	GR
01092 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
34044 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	21.10	28.71	(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)	-----	0.16	0.5	(19)	0	240	GR
50060 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	0.2 30 DAY AVG	0.5 DAILY MAX	MG/L		WEEKLY	GRAB
EFFLUENT GROSS VALUE											
HYDRAZINE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----		(19)		500	
81313 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.031 DAILY MAX	MG/L		DAILY WHEN DISCHARGING	GRAB
EFFLUENT GROSS VALUE											

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams

Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Bradley J. Adams
SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE

815 408-3700

AREA
CODE

NUMBER

DATE

09 06 19

YEAR MONTH DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment

SEE ATTACHED

EPA Form 3320-1 (Rev 3/99)

SD

PAGE 1 OF 1

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL

STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From:	0	9	0	5	0	1	To:	0	9	0	5

... NO DISCHARGE ☒ ...

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE					
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS								
PH																
00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT							(12)								
	PERMIT REQUIREMENT				6.0 MINIMUM		9.0 MAXIMUM	SU		SEE PERMIT	GRAB					
SOLIDS, TOTAL SUSPENDED																
00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)								
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	30.0 DAILY MAX	MGL		SEE PERMIT	GRAB					
CHROMIUM, HEXAVALENT (AS CR)																
01032 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)								
	PERMIT REQUIREMENT			LBS/DY		0.1 30 DAY AVG	0.2 DAILY MAX	MGL		DAILY	GRAB					
CHROMIUM, TOTAL (AS CR)																
01034 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)								
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MGL		DAILY	GRAB					
COPPER, TOTAL (AS CU)																
01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)								
	PERMIT REQUIREMENT			LBS/DY		0.5 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB					
IRON, TOTAL (AS FE)																
01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)								
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	1.0 DAILY MAX	MGL		DAILY	GRAB					
LEAD, TOTAL (AS PB)																
01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)								
	PERMIT REQUIREMENT			LBS/DY		0.2 30 DAY AVG	0.4 DAILY MAX	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	408-3700	09	06	19					
Plant Manager							AREA CODE	NUMBER	YEAR	MONTH	DAY					
TYPED OR PRINTED		SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT														

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1. 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

IL0046313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STORMWATER RUNOFF BASIN OVERFLOW
STORMWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
From: 0 9 0 5 0 1	To: 0 9 0 5 3 1				

*** NO DISCHARGE ☒ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	---	---	(26)	---	---	---	(19)			
	PERMIT REQUIREMENT	---	---	LBS/DY	---	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)	---	---	---	---			
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	---	---	---	---		TWICE/MONTH	TOTALZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	06	19	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
May 2009**

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
05/02/09	120	77.8
05/09/09	120	83.1
05/16/09	120	80.1
05/23/09	120	89.0
05/30/09	120	86.2

Note: Station procedures derive the *Calculated Maximum Allowable Blowdown Temperature* based on existing Rock River temperature and a calculated maximum river temperature increase. When the arithmetic sum of these values exceeds 120 degrees Fahrenheit, the *Calculated Maximum Allowable Temperature* limit defaults to 120 degrees Fahrenheit.

HYDRAZINE MONITORING:

There were no steam generator chemical cleaning solutions (or associated rinses) containing hydrazine discharged to the Cooling System Blowdown during the month of May 2009.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
May 2009**

COMMENTS:

1. **The weekly halogen concentration curves and daily halogen dosing time reports are attached.**
2. **Bromine was not used this month.**
3. **There was no discharge of steam generator chemical cleaning wastewater containing hydrazine in this month.**
4. **Flow existed through this outfall 31 of 31 days.**

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
05/01/09	30	30
05/02/09	30	32
05/03/09	30	30
05/04/09	30	30
05/05/09	30	30
05/06/09	37	30
05/07/09	30	30
05/08/09	30	32
05/09/09	32	30
05/10/09	30	30

HALOGEN DOSING CURVE

Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/04/09

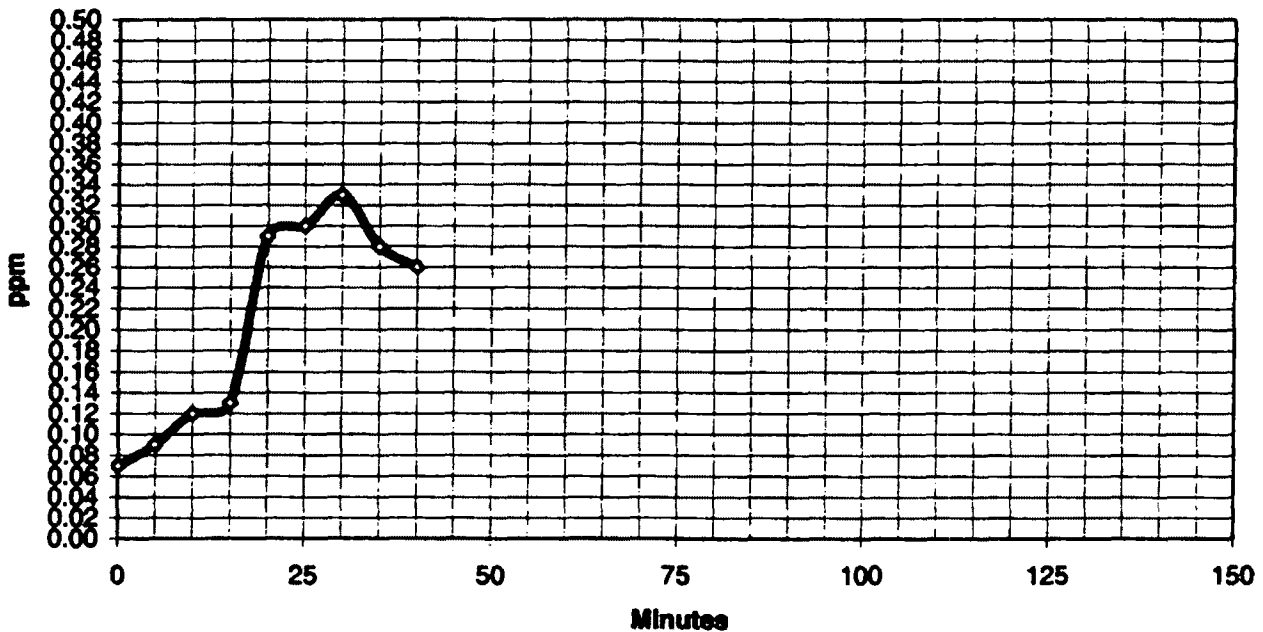
Analyzed by: M. P.

Unit: 2

Time: 11:42

Reviewed by: D. M.

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



**EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION**

Date	Dosing Time (Minutes)	
	U-1	U-2
05/11/09	40	40
05/12/09	40	40
05/13/09	40	40
05/14/09	30	30
05/15/09	30	30
05/16/09	30	30
05/17/09	30	30

HALOGEN DOSING CURVE

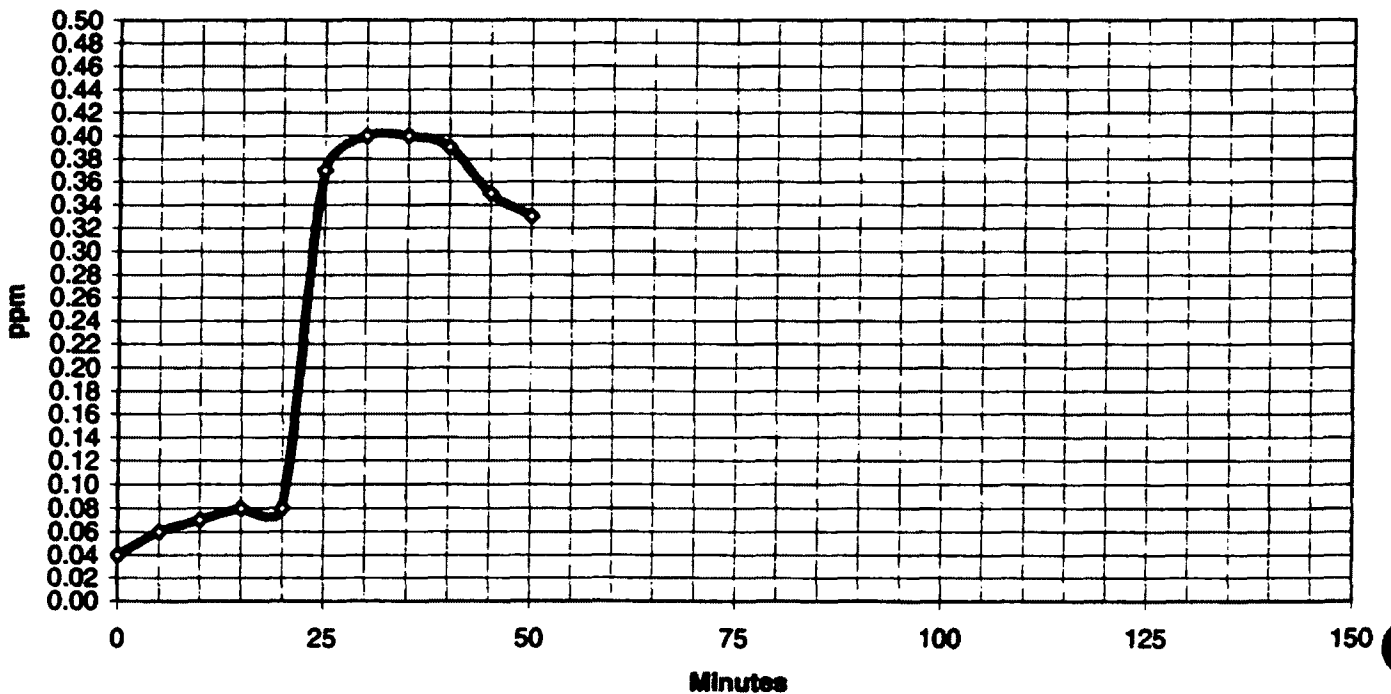
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/11/09
Time: 11:08

Analyzed by: T. M.
Reviewed by: D. M.

Unit: I

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
05/18/09	30	30
05/19/09	22	23
05/20/09	25	25
05/21/09	25	24
05/22/09	25	25
05/23/09	25	25
05/24/09	25	25

HALOGEN DOSING CURVE

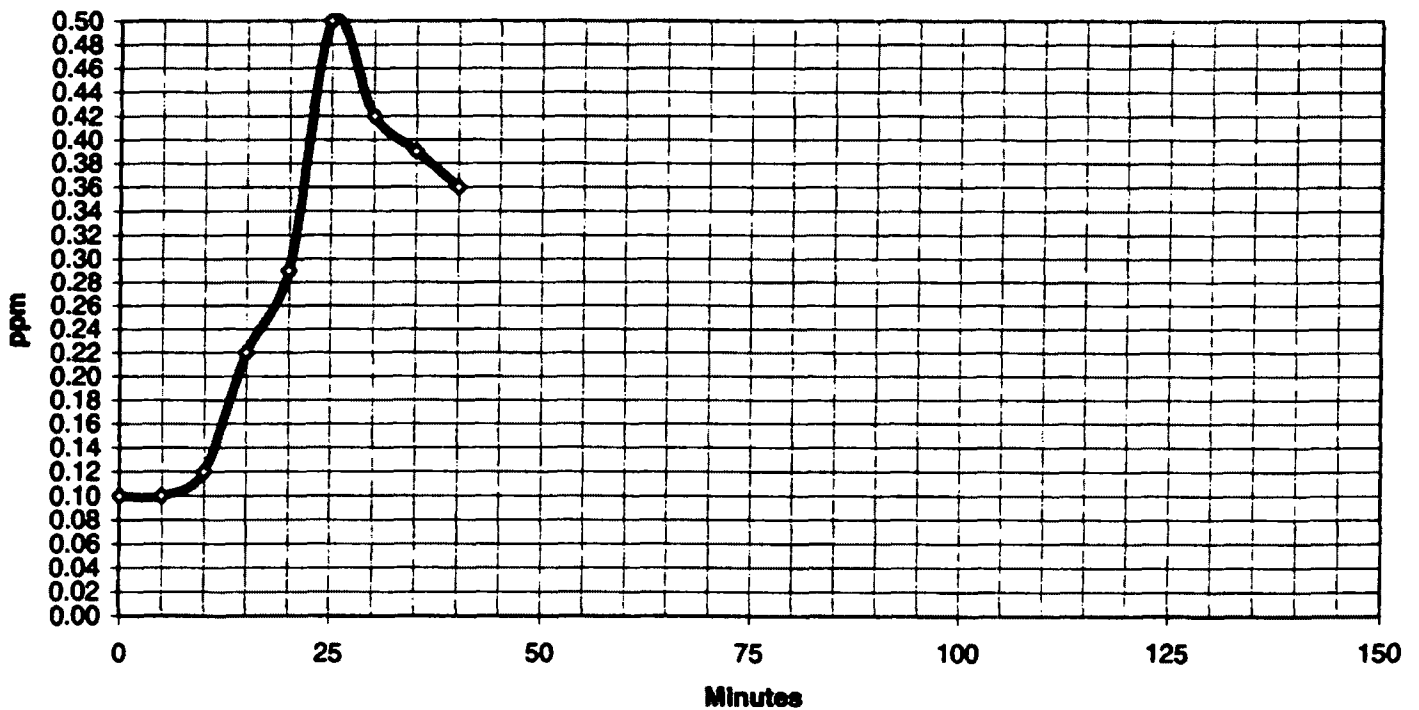
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/18/09
Time: 12:23

Analyzed by: M. P.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



**EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION**

Date	Dosing Time (Minutes)	
	U-1	U-2
05/18/09	30	30
05/19/09	22	23
05/20/09	25	25
05/21/09	25	24
05/22/09	25	25
05/23/09	25	25
05/24/09	25	25

HALOGEN DOSING CURVE

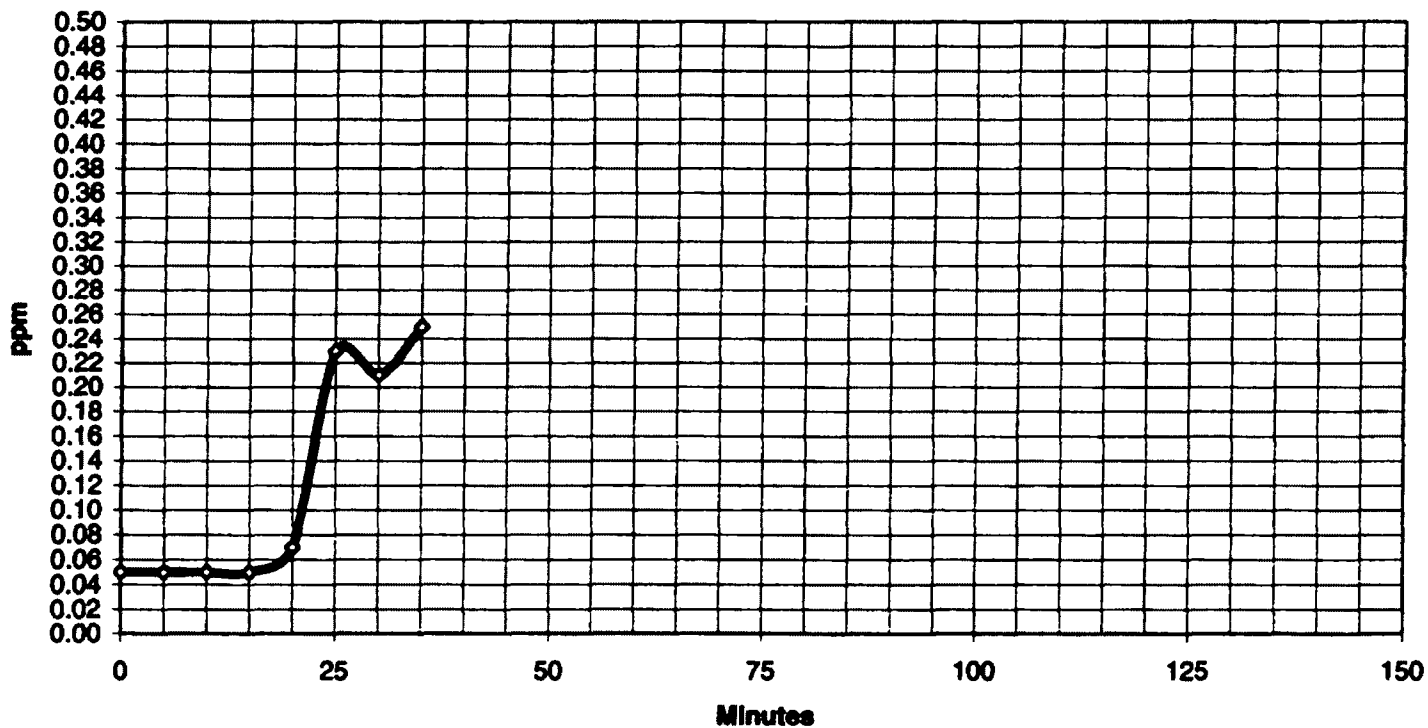
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/19/09
Time: 10:11

Analyzed by: M. P.
Reviewed by: Z. C.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
05/18/09	30	30
05/19/09	22	23
05/20/09	25	25
05/21/09	25	24
05/22/09	25	25
05/23/09	25	25
05/24/09	25	25

HALOGEN DOSING CURVE

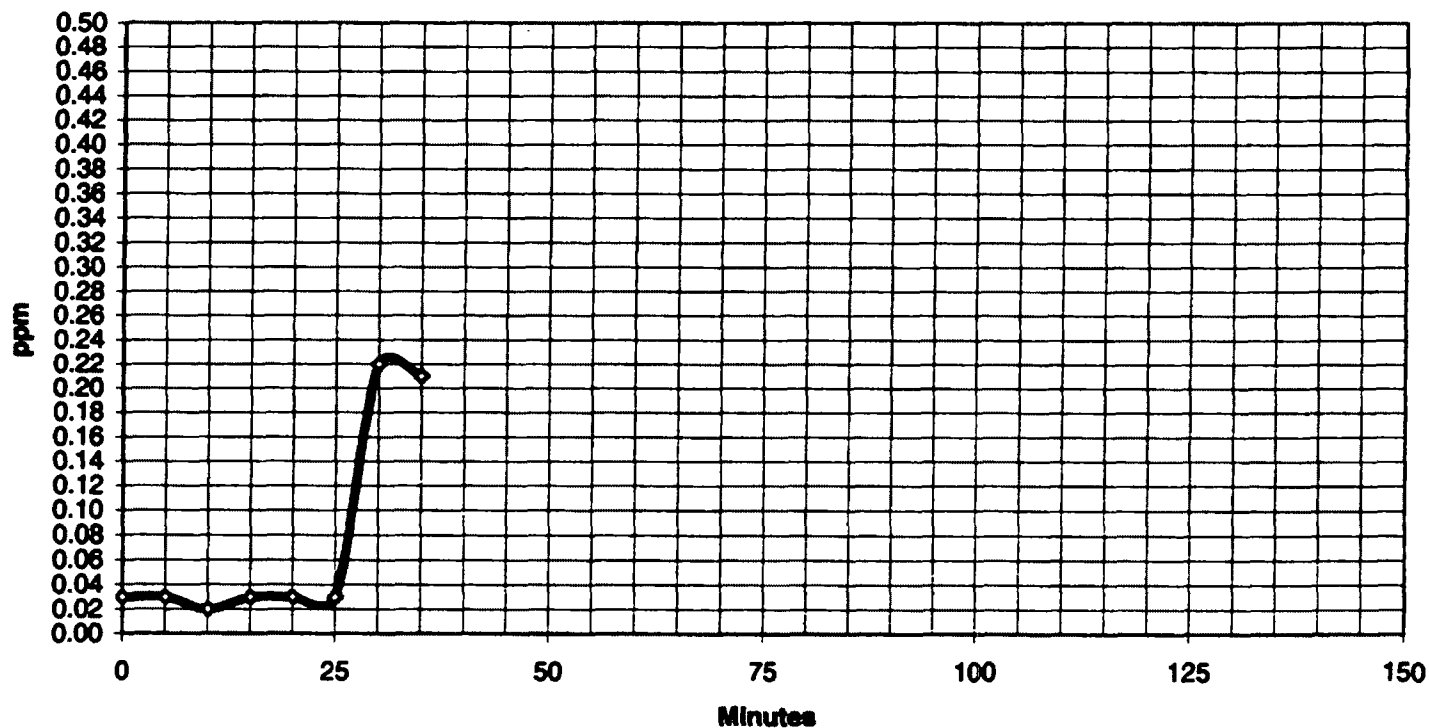
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/20/09
Time: 10:25

Analyzed by: M. P.
Reviewed by: Z. C.

Unit: 1

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
05/25/09	25	25
05/26/09	20	20
05/27/09	24	25
05/28/09	25	25
05/29/09	25	26
05/30/09	27	27
05/31/09	25	25

HALOGEN DOSING CURVE

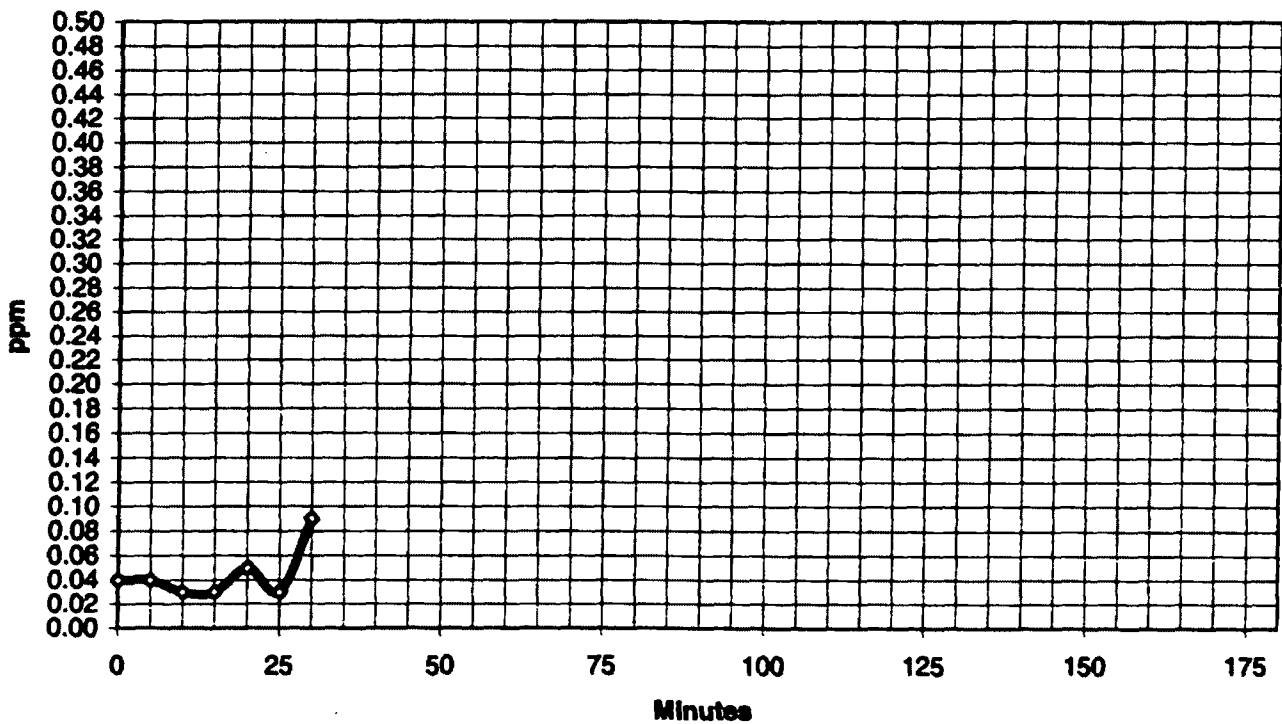
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 05/26/09
Time: 14:10

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 Generation Company LLC
Byron Station
4450 North German Church Road
Byron, IL 61010-9794
www.exeloncorp.com

July 21, 2009

LTR: BYRON 2009-0079
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 June 1, 2009 through June 30, 2009.

If there are any questions regarding this report, please contact M. Stanley Kerr, Chemistry Manager, at (815) 406-3200.

Respectfully,



Bradley J. Adams
Plant Manager
Byron Nuclear Generation Station

BJA/ZC/sdk

Attachments

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

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

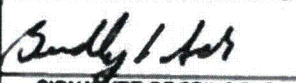
MONITORING PERIOD

From:	YEAR	MONTH	DAY	To:	YEAR	MONTH	DAY
	0	9	0		0	9	0
	6	0	1		6	3	0

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.3	1.3	(19)	0	285	EC
00530 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	30.0 DAILY MAX	MG/L		ONCE/MONTH	COMP-6
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	MG/L		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	MG/L		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	MG/L		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	MG/L		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	MG/L		DAILY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01045 1 0 0	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	1.0 DAILY MAX	MG/L		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
LEAD, TOTAL (AS PB)	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
01051 1 0 0	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
EFFLUENT GROSS VALUE	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
EFFLUENT GROSS VALUE											

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			615 406-3700	09	07	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH
TYPED OR PRINTED						

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 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

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:	0	9	0	8	0	1	To:	0	9	0	8	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)	SAMPLE MEASUREMENT	-----	-----	(26)	-----			(19)		500	
01092 1 0 0	PERMIT REQUIREMENT			LBS/DY		10	20	MGL		DAILY	GRAB
EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.011	0.069	(03)	-----	-----	-----	-----	0	135	CN
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
60050 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					TELEPHONE		DATE			
PRINCIPAL EXECUTIVE OFFICER						815 406-3700		09	07	21	
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

IL0048313
PERMIT NUMBER

B01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STP EFFLUENT (FORMER 001B)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	0	9	0

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
BOD, 5-DAY (20 DEG. C) 00310 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.36	0.40	(26)	-----	6.4	8.0	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
PH 00400 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	---	7.26	-----	7.46	(12)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	---	6.0 MINIMUM	-----	9.0 MAXIMUM	SU		TWICE/MONTH	GRAB
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.39	0.59	(26)	-----	7.3	11.7	(19)	0	290	DC
	PERMIT REQUIREMENT	14.2 30 DAY AVG	28.5 DAILY MAX	LBS/DY	-----	30.0 30 DAY AVG	60.0 DAILY MAX	MG/L		TWICE/MONTH	COMP24
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.007	0.012	(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 ensure 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						816	406-3700	09	07	21	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1. Flow existed through this outfall 29 of 30 days during the month.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

C01 0
DISCHARGE

MAJOR
(SUBR 01)
F - FINAL
WWTP (FORMER 001C)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD																	
YEAR			MONTH			DAY			YEAR			MONTH			DAY		
From:	0	9	0	6	0	1	To:	0	9	0	6						

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER	X	QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)		25	3.7	(19)	0	240	DC
	PERMIT REQUIREMENT			LBS/DY		15.6 30 DAY AVG	30.3 DAILY MAX	MG/L		WEEKLY	COMP 24
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) 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
Brodley 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.

Brodley J. Adams
SIGNATURE OF PRINCIPAL
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE		DATE		
815	406-3700	09	07	21
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 17 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		
0	9	0	6	0	1				0	9	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) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)		500	
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)		1.8	2.3	(19)	0	240	GR
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.028	0.056	(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
815 406-3700
AREA CODE NUMBER
DATE
09 07 21
YEAR MONTH DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60655

IL0048313
PERMIT NUMBER

D01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)

F - FINAL
RADIWASTE TREATMENT (FORMER 001D)
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 9 0 6 0 1	To:	0 9 0 6 3 0			

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
SOLIDS, TOTAL SUSPENDED 00530 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	< 0.3	< 0.5	(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 50060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.021	0.023	(03)	-----	-----	-----	-----	0	135	CN
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		DAILY	CONTIN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE
PRINCIPAL EXECUTIVE OFFICER

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Bradley J. Adams

SIGNATURE OF PRINCIPLE
EXECUTIVE OFFICER OR
AUTHORIZED AGENT

TELEPHONE		DATE		
815	408-3700	09	07	21
AREA CODE	NUMBER	YEAR	MONTH	DAY

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1. 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

E01 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STOREWATER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
0 9	0 6	0 1	0 9	0 6	3 0

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---		-----		(12)		500	
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6.8 LITHIUM	-----	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 - 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						615 406-3700		09	07	21	
Plant Manager						AREA CODE NUMBER		YEAR	MONTH	DAY	
TYPED OR PRINTED	SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT										

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

- 1 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 passed 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

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

IL0048313
PERMIT NUMBER

E01 0
DISCHARGE R

MAJOR
(SUBR 01)
F - FINAL
STORMWATER (FORMER 001E)
STORMWATER

MONITORING PERIOD											
YEAR			MONTH			DAY			YEAR		
From: 0	9	0	6	0	1	To: 0	9	0	6	3	0

... NO DISCHARGE ☐ ...

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
NICKEL, TOTAL (AS NI) 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03682 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	-----	-----	(26)	-----	1.8	1.9	(19)	0	290	GR
	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 60060 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.253	1.449	(03)	-----	-----	-----	-----	0	290	TM
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD	-----	-----	-----	-----		TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.					TELEPHONE		DATE			
Bradley J. Adams						815	406-3700	09	07	21	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					
COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)											

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

001 0
DISCHARGE NUMBER

MAJOR
(SUBR 01)
F - FINAL
COOLING SYSTEM BLOWDOWN
EFFLUENT

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD					
YEAR	MONTH	DAY	YEAR	MONTH	DAY
0	9	0	6	0	1

From: To:

*** NO DISCHARGE ☐ ***

NOTE: Read instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUANTITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	-----	-----	---	8.45	-----	8.76	(12)	0	240	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	---	6 MINIMUM	-----	9.0 MAXIMUM	SU		WEEKLY	GRAB
COPPER, TOTAL (AS CU)	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	0.016	(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)	-----	-----	0.046	(19)	0	240	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	1.0 DAILY MAX	MG/L		WEEKLY	GRAB
OXIDANTS, TOTAL RESIDUAL	SAMPLE MEASUREMENT	-----	-----	(26)	-----	-----	-----	(19)		500	
34044 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	-----	-----	LBS/DY	-----	-----	0.05 DAILY MAX	MG/L		WEEKLY	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	21.47	29.26	(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)	-----	0.11	0.33	(19)	0	240	GR
50080 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

Bradley J. Adams
Plant Manager

TYPED OR PRINTED

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SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE

815 406-3700

AREA CODE NUMBER YEAR MONTH DAY

09 07 21

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

Per Special Condition 4C., the maximum allowable blowdown temperature calculation results are provided on the attachment

SEE ATTACHED

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCRO501

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		
From: 0	9	0	6	0	1	To: 0	9	0	6	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			
PH	SAMPLE MEASUREMENT							(12)			
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT				50 MINIMUM		80 MAXIMUM	SU		SEE PERMIT	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT			(26)				(19)			
00630 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT			LBS/DY		150 30 DAY AVG	300 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		AIL	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)			
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	09	07	21	
Plant Manager						AREA CODE	NUMBER	YEAR	MONTH	DAY	
TYPED OR PRINTED						SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT					

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

1. No Turbine building wastewater was discharged to the Stormwater Runoff Basin during the month.
2. This discharge point was not used this month.

**NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)**

OCR0501

PERMITTEE NAME/ADDRESS

NAME Exelon Generation Co., LLC
ADDRESS 4300 Winfield Road
Warrenville, IL 60555

IL0048313
PERMIT NUMBER

002 0
DISCHARGE NUMBER

FACILITY Byron Nuclear Power Station
LOCATION 4450 North German Church Road
Byron, IL 61010

MONITORING PERIOD

YEAR	MONTH	DAY	YEAR	MONTH	DAY
09	06	01	09	06	30

From: To:

MAJOR
(SUBR 01)


F - FINAL

STOREWATER RUNOFF BASIN OVERFLOW
STOREWATER

*** 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	MG/L		DAILY	GRAB
ZINC, TOTAL (AS ZN) 01092 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)			
	PERMIT REQUIREMENT			LBS/DY		1.0 30 DAY AVG	2.0 DAILY MAX	MG/L		DAILY	GRAB
OIL AND GREASE 03582 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(26)				(19)			
	PERMIT REQUIREMENT			LBS/DY		15.0 30 DAY AVG	20.0 DAILY MAX	MG/L		TWICE/MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT			(03)							
	PERMIT REQUIREMENT	REPORT 30 DAY AVG	REPORT DAILY MAX	MGD						TWICE/MONTH	TOTALIZ
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPLE EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE	DATE		
Bradley J. Adams			815 408-3700	09	07	21
Plant Manager			AREA CODE	NUMBER	YEAR	MONTH

COMMENTS AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)

ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT
For Exelon Byron Station
Permit IL0048313
June 2009

BLOWDOWN TEMPERATURE MONITORING:

Date	Calculated Maximum Allowable Blowdown Temp. (Degrees F)	Maximum Actual Blowdown Temp. (Degrees F)
06/06/09	120	84.5
06/13/09	120	83.7
06/20/09	120	91.1
06/27/09	120	94.4

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 June 2009.

TOTAL QUANTITY DISCHARGED: N/A

TOTAL DURATION OF DISCHARGE: N/A

**ATTACHMENT TO
COOLING SYSTEM BLOWDOWN LINE (Outfall 001)
DISCHARGE MONITORING REPORT (Page 2)
For Exelon Byron Station
Permit IL0048313
June 2009**

COMMENTS:

1. The weekly halogen concentration curves and daily halogen dosing time reports are attached.
2. Bromine was not used this month.
3. There was no discharge of steam generator chemical cleaning wastewater containing hydrazine in this month.
4. Flow existed through this outfall 30 of 30 days.

EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
06/01/09	38	40
06/02/09	36	37
06/03/09	35	36
06/04/09	37	37
06/05/09	40	35
06/06/09	40	40
06/07/09	40	40

HALOGEN DOSING CURVE

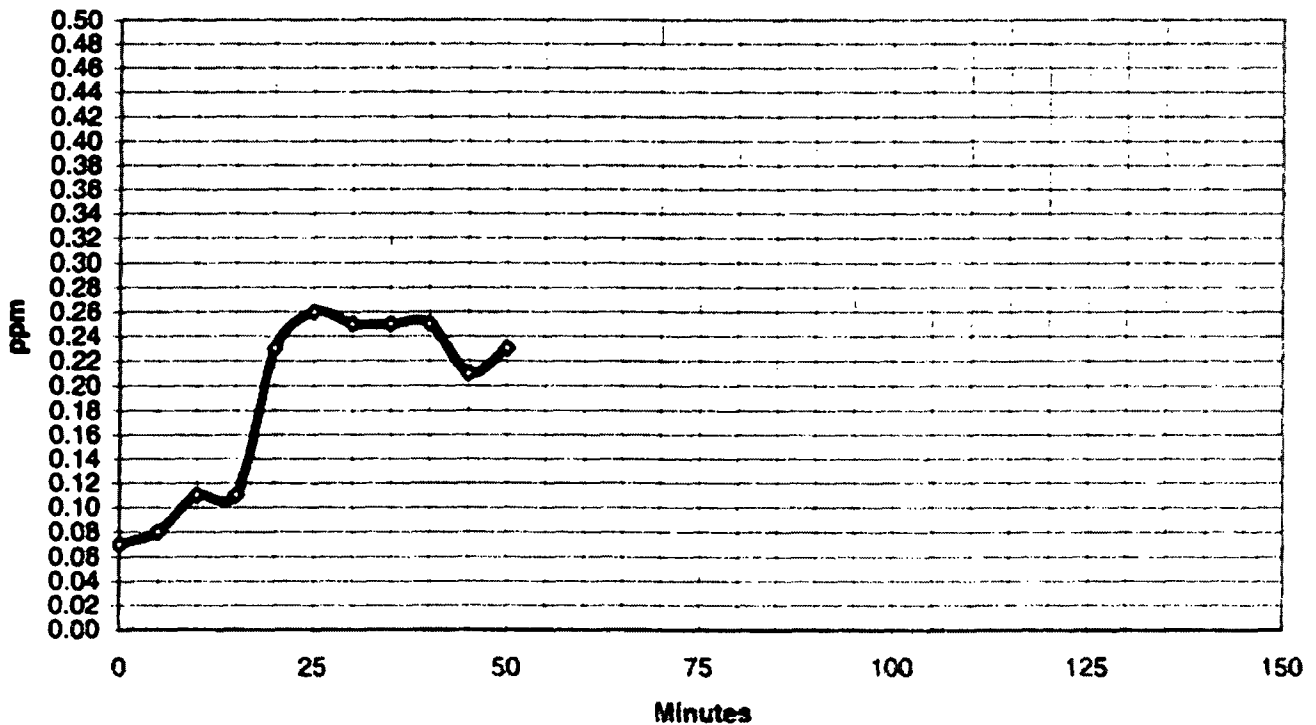
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/01/09
Time: 09:34

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
06/08/09	40	41
06/09/09	40	41
06/10/09	48	40
06/11/09	37	36
06/12/09	49	40
06/13/09	37	34
06/14/09	38	40

HALOGEN DOSING CURVE

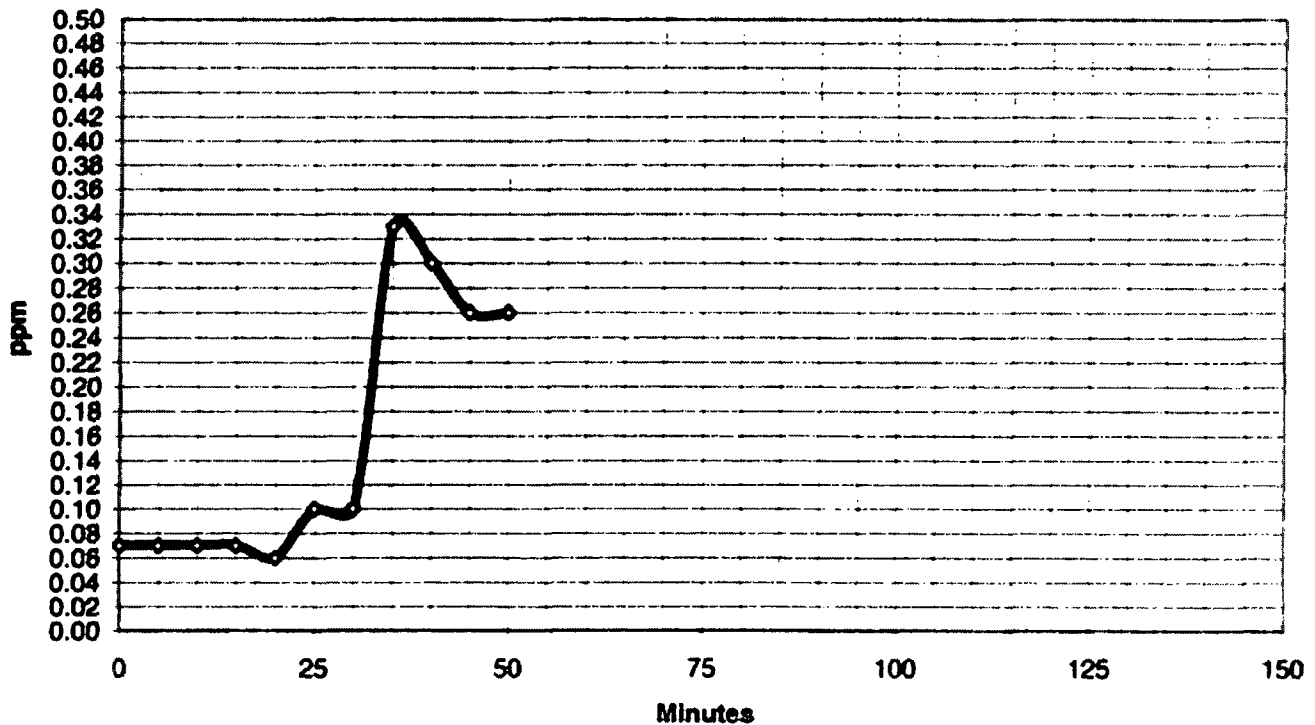
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/09/09
Time: 12:13

Analyzed by: J. W.
Reviewed by: D. M.

Unit: I

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
06/15/09	40	40
06/16/09	40	40
06/17/09	38	40
06/18/09	40	37
06/19/09	37	40
06/20/09	40	40
06/21/09	40	40

HALOGEN DOSING CURVE

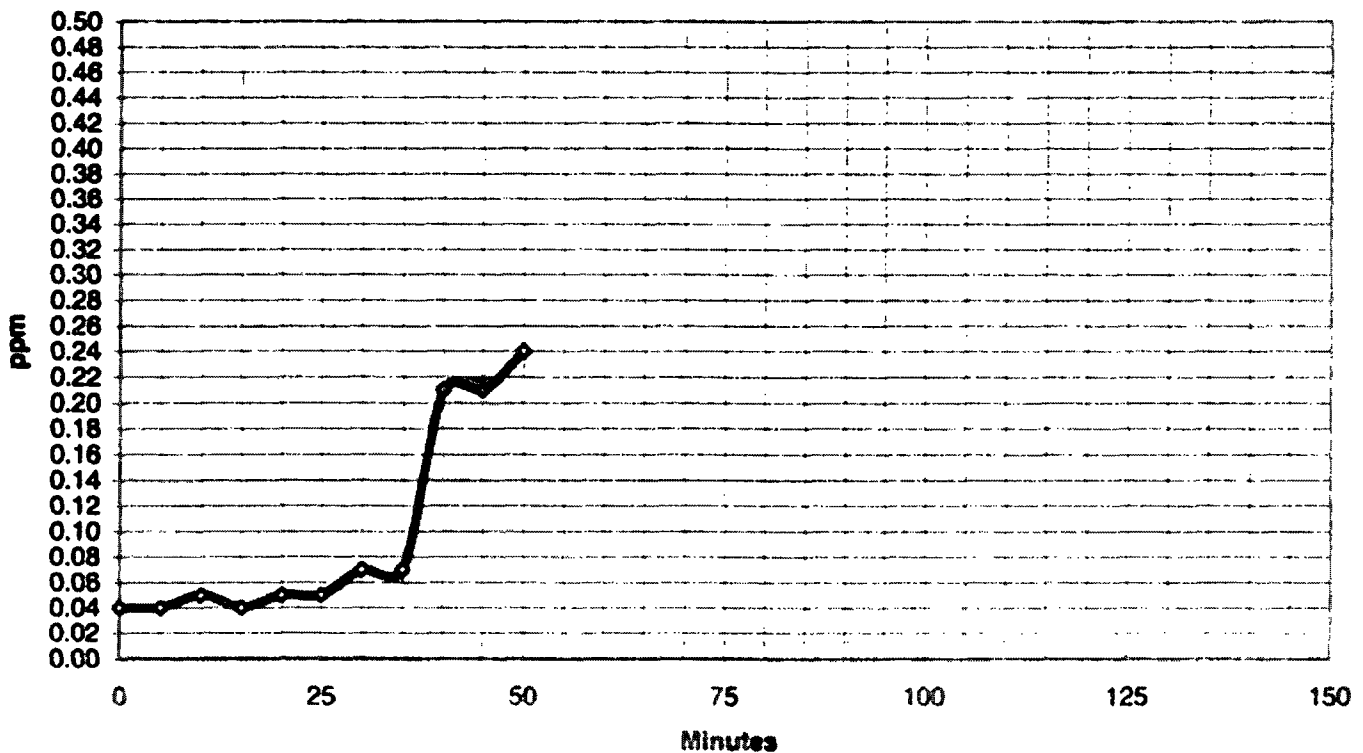
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/15/09
Time: 12:52

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
06/22/09	35	40
06/23/09	37	36
06/24/09	40	40
06/25/09	35	34
06/26/09	36	40
06/27/09	38	39
06/28/09	35	40

HALOGEN DOSING CURVE

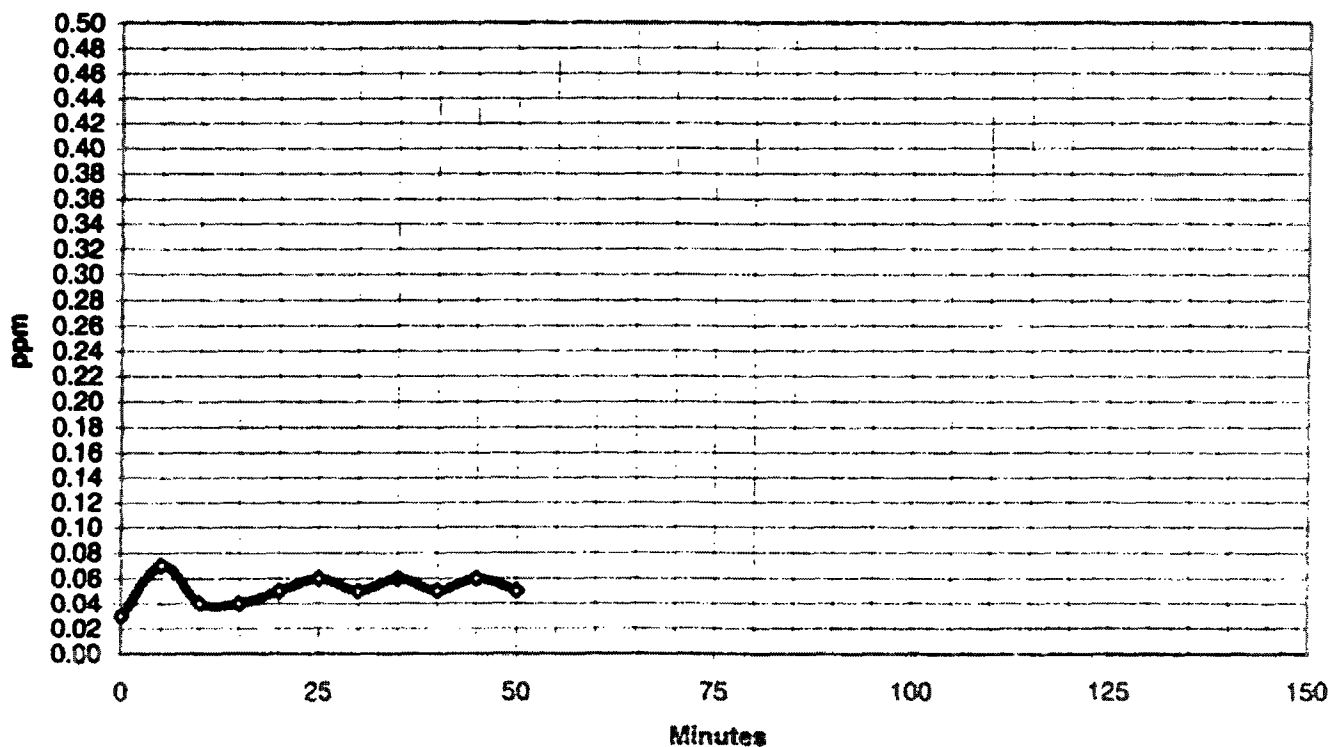
Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/23/09
Time: 11:39

Analyzed by: M. H.
Reviewed by: D. M.

Unit: l

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.



EXELON
BYRON STATION
Permit IL0048313
WEEKLY HALOGEN DOSING INFORMATION

Date	Dosing Time (Minutes)	
	U-1	U-2
06/29/09	35	34
06/30/09	34	33

HALOGEN DOSING CURVE

Concentration of total residual chlorine/halogen
vs. minutes of chlorination period.

Date: 06/29/09
Time: 13:42

Analyzed by: M. P.
Reviewed by: D. M.

Unit: 2

Note: The limit of detection for the instrument as tested in the Station Laboratory is 0.02 mg/L. All values less than this limit are reported for information only.

