

8301 M 8412 770309
MONTHLY REPORT FORM

820308 OhioEPA

REPORTED

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO

TOLEDO EDISON COMPANY

21B00011001 JAN 1984

TF 1 06/14/83 OH000378

DAVIS-BESSE NUCLEAR

POWER STATION - UNIT NO.1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

001 COLLECTION BOX

OAK HARBOR

43449 OTTAWA

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) - ENTER FREQUENCY OF SAMPLING

Toledo Edison Company

R. J. Scott

DAY	(1) (2)	1	3	1	3	3					
		999	1	999	1	1					
		WATER TEMP. F	PH S.U.	CONDUIT FLOW MGD	CHLOR TOT RE MG/L	CHLOR FREE A MG/L					
		REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
		00011	00400	50050	50060	50064					
01		AN	AN	AN	AN	AN					
02		AN	AN	AN	AN	AN					
03		48	8.4	14.7	0.0	0.0					
04		48	8.3	14.6	0.0	0.0					
05		48	8.1	14.8	0.0	0.0					
06		AN	8.2	AN	0.0	0.0					
07		44	AN	15.0	AN	AN					
08		48	AN	16.4	AN	AN					
09		AN	8.4	AN	0.0	0.0					
10		46	8.3	17.7	0.0	0.0					
11		47	7.8	17.0	0.0	0.0					
12		47	7.6	17.0	0.0	0.0					
13		47	7.8	17.0	0.0	0.0					
14		48	AN	16.9	AN	AN					
15		42	AN	17.0	AN	AN					
16		38	8.0	16.3	0.0	0.0					
17		36	8.0	11.9	0.0	0.0					
18		36	7.8	10.9	0.0	0.0					
19		AN	7.8	AN	0.0	0.0					
20		35	7.7	10.7	0.0	0.0					
21		AN	AN	AN	AN	AN					
22		35	AN	10.6	AN	AN					
23		AN	7.8	AN	0.0	0.0					
24		AN	7.8	AN	0.1	0.0					
25		53	8.1	16.2	0.0	0.0					
26		46	7.8	17.2	0.0	0.0					
27		47	7.8	14.3	0.0	0.0					
28		45	AN	14.2	AN	AN					
29		48	AN	14.4	AN	AN					
30		AN	7.8	AN	0.0	0.0					
31		60	AD	13.5	AD	AD					
TOTAL		992	--	528.3	0.1	0.0					
AVG.		45	--	14.9	0.0	0.0					
MAX.		60	8.4	17.7	0.1	0.0					
MIN.		35	7.6	10.6	0.0	0.0					

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

8402220334 840131
PDR ADCK 05000346
R PDR

IE25
11

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY
THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I
AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

SIGNATURE OF REPORTER

TITLE OF REPORTER

2/3/84

T. D. Murray TD. Murray / smg

Station Superintendent

FORM NO. EPA-4500 (10-80)
FORMERLY EPA-SUR-1

8501 8412 770309
MONTHLY REPORT FORM

820308 OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

REPORTED DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO

TOLEDO EDISON COMPANY

2IB00011002 JAN 1984

PF 1 06/14/83 OH000378

DAVIS-BESSE NUCLEAR

POWER STATION - UNIT NO.1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

002 AREA RUNOFF

OAK HARBOR

43449 OTTAWA

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) - ENTER FREQUENCY OF SAMPLING

Toledo Edison Co.

R. J. Scott

DAY	CONDUIT FLOW MGD	PH S.U.	RESIDU T. NFL MG/L	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	50050	00400	00530							
01	0.000									
02	0.000									
03	0.000	8.2	9							
04	0.000									
05	0.005									
06	0.000									
07	0.000									
08	0.000									
09	0.099	8.2	9							
10	0.000									
11	0.000									
12	0.000									
13	0.009									
14	0.000									
15	0.000									
16	0.000	8.2	9							
17	0.000									
18	0.024									
19	0.005									
20	0.000									
21	0.000									
22	0.000									
23	0.009	AH	AH							
24	0.061									
25	0.000									
26	0.000									
27	0.000									
28	0.000									
29	0.005									
30	0.075	8.2	7							
31	0.000									
TAL	0.292	--	34							
G.	0.009	--	8							
X.	0.099	8.2	9							
N.	0.000	8.2	7							

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

AH - Sample site frozen

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER
FORM NO. EPA-4500 (10-80)
FORMERLY EPA-SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

SIGNATURE OF REPORTER

TITLE OF REPORTER

2/3/84

T. D. Murray T.D. Murray/SMQ

Station Superintendent

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO.

TOLEDO EDISON COMPANY

21800011003 JAN 1984

PF 1 06/14/83 0H0003786

DAVIS-BESSE NUCLEAR

POWER STATION - UNIT NO.1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

003 SCREENWASH

OAK HARBOR

43449 OTTAWA

NOTE: THIS FORM MUST BE TYPED

N(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

N(2) - ENTER FREQUENCY OF SAMPLING

Toledo Edison Co.

R. J. Scott

(1)	1	3									
(2)	999	1									
	CONDUIT FLOW MGD	RESIDU T. NFL MG/L									
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	50050	00530									
1	0.222										
2	0.222										
3	0.222	15									
4	0.222										
5	0.222										
6	0.222										
7	0.222										
8	0.222										
9	0.222										
0	0.222										
1	0.222										
2	0.222										
3	0.222										
4	0.222										
5	0.222										
6	0.222										
7	0.222										
8	0.222										
9	0.222										
0	0.222										
1	0.222										
2	0.222										
3	0.222										
4	0.222										
5	0.222										
6	0.222										
7	0.222										
8	0.222										
9	0.222										
0	0.222										
1	0.222										
TOTAL	6.882	15									
G.	0.222	15									
X.	0.222	15									
N.	0.222	15									

ADDITIONAL REMARKS (AM REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTERFORM NO. EPA-4500 (10-80)
PREVIOUS EDITIONS

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

2/3/84

SIGNATURE OF REPORTER

T. D. Murray T. D. Murray / smq

TITLE OF REPORTER

Station Superintendent

8301 M 8412 770309
MONTHLY REPORT FORM

820308 OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

REPORTED DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION N

TOLEDO EDISON COMPANY

21800011601 JAN 1984

PF 1 06/14/83 OH000378

DAVIS-BESSE NUCLEAR

POWER STATION - UNIT NO.1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

601 SANITARY

OAK HARBOR

43449 CTTAWA

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) - ENTER FREQUENCY OF SAMPLING

Toledo Edison Co.

R. J. Scott

(1)	3	3	3	1	3	3	3	3	3	
(2)	1	1	1	999	1	1	1	1	1	
	COLOR SEVER UNITS	ODOR SEVER UNITS	TURBID SEVER UNITS	CONDUIT FLOW MGD	CHLOR TOT RE MG/L	BOD 5 DAY MG/L	PH S.U.	RESIDU T. NFL MG/L	FEC CO MF-FCB #/100M	
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
AY	00083	01330	01350	50050	50060	00310	00400	00530	31616	
01	AN	AN	AN	0.009	AN					
02	AN	AN	AN	0.009	AN					
03	2	1	2	0.009	1.0					
04	2	1	2	0.009	1.0					
05	2	1	2	0.009	1.0					
06	2	1	2	0.009	0.5					
07	AN	AN	AN	0.009	AN					
08	AN	AN	AN	0.009	AN					
09	2	1	2	0.009	0.5					
10	2	1	2	0.009	1.0					
11	2	1	2	0.009	2.0	3	7.0	20	1	
12	2	1	2	0.009	0.6					
13	2	1	2	0.009	0.6					
14	AN	AN	AN	0.009	AN					
15	AN	AN	AN	0.009	AN					
16	2	1	2	0.009	1.0					
17	2	1	2	0.009	1.0					
18	2	1	2	0.009	1.0					
19	2	1	2	0.009	0.0					
20	2	1	2	0.009	0.0					
21	AN	AN	AN	0.009	AN					
22	AN	AN	AN	0.009	AN					
23	2	1	2	0.009	1.0					
24	2	1	2	0.009	1.0					
25	2	1	2	0.009	1.0					
26	2	1	2	0.009	1.0					
27	2	2	2	0.009	1.9					
28	AN	AN	AN	0.009	AN					
29	AN	AN	AN	0.009	AN					
30	2	2	2	0.009	0.0					
31	2	2	2	0.009	0.3					

TOTAL	42	24	42	0.279	17.4	3	--	20	1	
AVG.	2	1	2	0.009	0.8	3	--	20	1	
MAX.	2	2	2	0.009	2.0	3	7.0	20	1	
MIN.	2	1	2	0.009	0.0	3	7.0	20	1	

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

SIGNATURE OF REPORTER

TITLE OF REPORTER

2/3/84

T. D. Murray T.D. Murray ISM

Station Superintendent

8301 M 8412 770309
MONTHLY REPORT FORM

REPORTED

820308 OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO.

TOLEDO EDISON COMPANY
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1
5501 NORTH STATE ROUTE 2
OAK HARBOR 43449 OTTAWA

2IB00011602 JAN 1984

SAMPLING STATION DESCRIPTION

602 LOW VOLUME WASTES

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) - ENTER FREQUENCY OF SAMPLING

Toledo Edison Company

R. J. Scott

DAY	AND CODE NO. AT RIGHT	(1)	(2)	PH	RESIDU T. NFL MG/L	O&G TOTAL MG/L	CONDUIT FLOW MGD	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
		3	3	S.U.	MG/L	MG/L	MGD	00400	00530	00550	50050		
01							0.245						
02							0.245						
03		8.4	4			0	0.245						
04							0.245						
05							0.245						
06							0.245						
07							0.245						
08							0.245						
09		AH	AH			AH	0.245						
10							0.245						
11							0.245						
12							0.245						
13							0.245						
14							0.245						
15							0.245						
16		AH	AH			AH	0.245						
17							0.245						
18							0.245						
19							0.245						
20							0.245						
21							0.245						
22							0.245						
23		AH	AH			AH	0.245						
24							0.245						
25							0.245						
26							0.245						
27							0.245						
28							0.245						
29							0.245						
30		AH	AH			AH	0.245						
31							0.245						
TOTAL		--	4			0	7.595						
AVG.		--	4			0	0.245						
MAX.		8.4	4			0	0.245						
MIN.		8.4	4			0	0.245						

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

AH - Sample Size Frozen

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER
FORM NO. EPA 4500 (10-80)
FORMERLY EPA-SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY
THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE ACCURATE AND COMPLETE. I
AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

2/3/84

SIGNATURE OF REPORTER

T. D. Murray T.D. Murray / Smc

TITLE OF REPORTER

Station Superintendent

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

REPORTED

DATE (MONTH, YEAR)

820308

OhioEPA

PAGE PRINTING DATE APPLICATION NO

OF 1 06/14/83 OH0003786

TOLEDO EDISON COMPANY
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1
5501 NORTH STATE ROUTE 2
OAK HARBOR 43449 OTTAWA

SAMPLING STATION DESCRIPTION
603, REGENERATES

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB

ANALYST

NOTE: THIS FORM MUST BE TYPED

(1)	3	3	1							
(2)	1	1	999							
	PH	RESIDU	CONDUIT							
	S.U.	T. NFL	FLOW							
		MG/L	MGD							
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	00400	00530	50050							
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ADDITIONAL REMARKS (AM REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
SITE - AGENCY
HOW - AGENCY
WHEN - REPORTER
NO. EPA-4500 (10-80)
ONLY EPA-SUR-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

2/3/84

SIGNATURE OF REPORTER

T. D. Murray T.D. Murray /smg

TITLE OF REPORTER

Station Superintendent

8301 M 8412 770309
MONTHLY REPORT FORM

820308 OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

REPORTED
DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO.
1 06/14/83 OH0003786

TOLEDO EDISON COMPANY
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1
5501 NORTH STATE ROUTE 2
OAK HARBOR 43449 OTTAWA

SAMPLING STATION DESCRIPTION
604 FLOOR DRAINS

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) - ENTER FREQUENCY OF SAMPLING

Toledo Edison Company

R. J. Scott

(1)	1	3	3							
(2)	999	1	1							
	CONDUIT FLOW MGD	PH S.U.	O&G TOTAL MG/L							
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	50050	00400	00550							
01	0.173									
02	0.173									
03	0.173	8.0	0							
04	0.173									
05	0.173									
06	0.173									
07	0.173									
08	0.173									
09	0.173	8.6	2							
10	0.173									
11	0.173									
12	0.173									
13	0.173									
14	0.173									
15	0.173									
16	0.173	8.0	0							
17	0.173									
18	0.173									
19	0.173									
20	0.173									
21	0.173									
22	0.173									
23	0.173	8.4	0							
24	0.173									
25	0.173									
26	0.173									
27	0.173									
28	0.173									
29	0.173									
30	0.173									
31	0.173	8.1	0							
32	5.363	--	2							
33	0.173	--	0							
34	0.173	8.6	2							
35	0.173	8.0	0							

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY OF THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION, I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

SIGNATURE OF REPORTER

TITLE OF REPORTER

NO. EPA-4500 (10-80)
EPA-SUR-1

2/3/84

T. D. Murray

T.D. Murray Bmq

Station Superintendent

8301 M 8412 770309
MONTHLY REPORT FORM

REPORTED

820308 OhioEPA

NAME: ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO

TOLEDO EDISON COMPANY

2IB00011801 JAN 1984

PF 1 06/14/83 OH000378

DAVIS-BESSE NUCLEAR

POWER STATION - UNIT NO.1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

801 INTAKE STATION

OAK HARBOR

43449 OTTAWA

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) - ENTER FREQUENCY OF SAMPLING

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT	(1)										
	(2)										
	1										
	999										
	WATER TEMP. F										
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
DAY	00011										
01	AN										
02	AN										
03	38										
04	37										
05	37										
06	AN										
07	37										
08	37										
09	AN										
10	35										
11	35										
12	35										
13	35										
14	35										
15	35										
16	35										
17	35										
18	35										
19	AN										
20	34										
21	AN										
22	34										
23	AN										
24	AN										
25	37										
26	37										
27	38										
28	38										
29	38										
30	AN										
31	38										
TOTAL	795										
AVG.	36										
MAX.	38										
MIN.	34										

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER
FORM NO. EPA-4500 (10-80)

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED AND BASED ON MY INQUIRY THOSE INDIVIDUALS IMMEDIATELY RESPONSIBLE FOR OBTAINING THE INFORMATION. I BELIEVE THE SUBMITTED INFORMATION IS TRUE, ACCURATE AND COMPLETE. I AM AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

2/3/84

SIGNATURE OF REPORTER

T. D. Murray

T. D. Murray

TITLE OF REPORTER

Station Superintendent



File: RR 2 P-8-84-01
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G84 092AL

February 15, 1984

Ohio Environmental Protection Agency
Technical Records Section
P.O. Box 1049
Columbus, Ohio 43216

Gentlemen:

Attached is a copy of the January, 1984 Wastewater Report for Davis-Besse Nuclear Power Station, Unit No. 1.

Yours truly,

Terry D. Murray /smq

Terry D. Murray
Station Superintendent
Davis-Besse Nuclear Power Station

TDM/KLN/ym1
encl.

cc: J. E. Sullivan
W. G. Rogers
J. L. Scott-Wasilk
J. F. Stolz

IE25
1/1