

0504 P 5003 5002
MONTHLY REPORT FORM

AGENCY COPY

OnCEPA

REPORTED

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION N

TOLEDO EDISON COMPANY

2IH00011001

JAN 1986

PF 1 05/25/85 0H00037

DAVID-EDSSE NUCLEAR

POWER STATION - UNIT NO.1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

001 DISCHARGE TO LAKE ERIE

CAK FARRER 43442 CATAWA

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 Company

P. J. McCloskey

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT	(1)	(2)	(1)	(2)							
	1	3	1	3							
	999	1	999	1							
	WATER	PH	CONCUI	CHLOR							
	TEMP.		FLOW	FREE A							
	F	S.U.	MGD	MG/L							
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
DAY	00011	00400	50050	50064							
01	35	AN	0.4	AN							
02	36	7.8	17.4	0.0							
03	35	7.8	11.6	0.0							
04	35	AN	0.4	AN							
05	36	AN	0.5	AN							
06	36	7.8	0.4	0.0							
07	36	8.3	0.4	0.0							
08	37	8.8	0.4	0.0							
09	38	8.8	0.4	0.0							
10	38	9.0	0.4	0.0							
11	39	AN	0.4	AN							
12	39	AN	0.4	AN							
13	39	9.0	7.3	0.0							
14	35	AH	21.5	AH							
15	34	7.8	27.8	0.0							
16	34	7.8	4.9	0.0							
17	35	7.9	1.9	0.0							
18	34	AN	25.2	AN							
19	34	AN	0.4	AN							
20	36	8.7	0.8	0.0							
21	35	7.6	13.9	0.0							
22	34	8.1	30.9	0.0							
23	34	8.0	22.6	0.0							
24	34	7.8	30.8	0.0							
25	34	AN	22.6	AN							
26	34	AN	22.6	AN							
27	33	7.6	22.5	0.0							
28	33	8.1	22.6	0.0							
29	33	7.8	22.4	0.0							
30	33	7.8	40.1	0.0							
31	33	8.2	41.8	0.0							
TOTAL	1091	--	415.3	0.0							
AVG.	35	--	13.4	0.0							
MAX.	39	9.0	41.8	0.0							
MIN.	33	7.6	0.4	0.0							

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

AH: Sampling System was inoperable due to electrical maintenance of sampling station.

B602240397 B60131
PDR ADOCK 05000346
R PDR

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

2/12/86

SIGNATURE OF REPORTER

L. F. Storz

TITLE OF REPORTER

Plant Manager

REPORTED

PAGE PRINTING DATE APPLICATION N

PF 1 05/25/85 CH00057

CAK HARBOR 03445 OTTAWA

P. J. McCloskey

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

Plant Manager

MONTHLY REPORT FORM

REPORTED

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION N

TOLEDO EDISON COMPANY

21B00011003

JAN 1986

PF 1 05/25/85 0H000378

DAVIS-BESSE NUCLEAR

POWER STATION - UNIT NO. 1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE

ROUTE 2

003 OUTFALL NAVARRE MARSH

OAK HARBOR

43445 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 Company

P. J. McCloskey

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT	(1)	(2)	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	DAY																			
	3	1																		
	1	999																		
	RESIDU	CONDUIT																		
	T. AFL	FLOW																		
	MG/L	MED																		
	00000	50000																		
01		0.222																		
02		0.222																		
03		0.222																		
04		0.222																		
05		0.222																		
06	20	0.222																		
07		0.222																		
08		0.222																		
09		0.222																		
10		0.222																		
11		0.222																		
12		0.222																		
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16		0.222																		
17		0.222																		
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25		0.222																		
26		0.222																		
27		0.222																		
28		0.222																		
29		0.222																		
30		0.222																		
31		0.222																		
TOTAL	20	6.822																		
AVG.	20	0.222																		
MAX.	20	0.222																		
MIN.	20	0.222																		

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

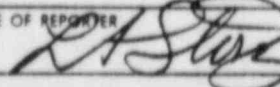
DISTRIBUTION
 WHITE - AGENCY
 YELLOW - AGENCY
 GREEN - REPORTER
 FORM NO. EPA-4500 (10-80)
 FORMERLY EPA-SUR-1

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

DATE REPORT COMPLETED

2/12/86

SIGNATURE OF REPORTER



TITLE OF REPORTER

Plant Manager

8504 M 0003 0032
MONTHLY REPORT FORM

AGENCY COPY

OnoEPA

REPORTED

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO

TOLEDO EDISON COMPANY

21 00011601 JAN 1986

P 1 05/25/85 14000378

DAVENPORT, IOWA

POWER STATION - UNIT NO. 1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUT. 2 401 DISCHARGE STR

CAK HADLEY 43445 OTIAWA

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 Company

P. J. McCloskey

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)	(1)	(2)
	3	3	3	1	3	3						
	1	1	1	999	1	1						
	CELEST	CELEST	CELEST	CELEST	CELEST	CELEST						
	UNIT	UNIT	UNIT	UNIT	UNIT	UNIT						
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE						
DAY	0003	0100	0130	0003	0030	0030						
01	AN	AN	AN	0.035								
02	2	1	1	0.035	2	4						
03	2	1	2	0.035		3						
04	AN	AN	AN	0.035								
05	AN	AN	AN	0.035								
06	1	2	1	0.035		1						
07	1	1	1	0.035	1							
08	1	2	2	0.035								
09	1	2	2	0.035								
10	2	2	2	0.035								
11	AN	AN	AN	0.035								
12	AN	AN	AN	0.035								
13	3	1	2	0.035		6						
14	3	1	2	0.035	8							
15	3	1	2	0.035								
16	2	1	2	0.035								
17	1	1	2	0.035								
18	AN	AN	AN	0.035								
19	AN	AN	AN	0.035		7						
20	1	1	2	0.035								
21	2	1	2	0.035	7							
22	2	1	2	0.035								
23	2	1	2	0.035								
24	2	2	2	0.035								
25	AN	AN	AN	0.035								
26	AN	AN	AN	0.035								
27	2	2	2	0.035		12						
28	3	1	2	0.035	12							
29	3	1	3	0.035								
30	2	1	2	0.035								
31	2	1	2	0.035								
TOTAL	43	28	42	1.085	30	33						
AVG.	2	1	2	0.035	6	6						
MAX.	3	2	3	0.035	12	12						
MIN.	1	1	1	0.035	1	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

2/12/86

Plant Manager

MONTHLY REPORT FORM

AGENCY COPY

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

REPORTED

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION

TOLEDO EDISON COMPANY

21800011602

JAN 1986

PF 1 05/25/85 OH0003

DAVIS-BESSE NUCLEAR

POWER STATION - UNIT NO. 1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

602 LOW VOLUME WW SETTLING BASIN OVERFLOW

OAK HARBOR

43445 CTIAW

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

IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB

Toledo Edison Company

ANALYST

P. J. McCloskey

NOTE: THIS FORM MUST BE

DAY	ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT			REPORTING CODE				REPORTING CODE			
	CONCUI FLOW MED	RESIDU T. AFL MG/L	ORG TOTAL MG/L	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	
01	0.236										
02	0.236										
03	0.236										
04	0.236										
05	0.236										
06	0.236	5.4	0.0								
07	0.236										
08	0.236										
09	0.236										
10	0.236										
11	0.236										
12	0.236										
13	0.236	4.4									
14	0.236										
15	0.236										
16	0.236										
17	0.236										
18	0.236										
19	0.236										
20	0.236	3.6	0.0								
21	0.236										
22	0.236										
23	0.236										
24	0.236										
25	0.236										
26	0.236										
27	0.236	7.6	0.0								
28	0.236										
29	0.236										
30	0.236										
31	0.236										
TOTAL	7.316	21.0	0.0								
AVG.	0.236	5.3	0.0								
MAX.	0.236	7.6	0.0								
MIN.	0.236	3.6	0.0								

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

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. AWARE THAT THERE ARE SIGNIFICANT PENALTIES FOR SUBMITTING FALSE INFORMATION, INCLUDING THE POSSIBILITY OF FINE AND IMPRISONMENT.

DATE REPORT COMPLETED

2/12/86

SIGNATURE OF REPORTER

[Signature]

TITLE OF REPORTER

Plant Manager

MONTHLY REPORT FORM

REPORTED

UICPA

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION N

TOLEDO EDISON COMPANY

21800011801

JAN 1986

PF 1 05/25/85 0H000378

DAVID-BESSE NUCLEAR

POWER STATION - UNIT NO. 1

SAMPLING STATION DESCRIPTION

5501 NORTH STATE ROUTE 2

#01 INTAKE PRIOR COOLING OPERATION

CAK HARBOR

#3445 CTTAWA

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

P. J. Macloskey

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	33										
02	33										
03	33										
04	33										
05	33										
06	33										
07	33										
08	33										
09	33										
10	34										
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21	34										
22	34										
23	33										
24	33										
25	33										
26	33										
27	32										
28	33										
29	32										
30	32										
31	32										
TOTAL	1026										
AVG.	33										
MAX.	34										
MIN.	32										

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

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 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

2/12/86

SIGNATURE OF REPORTER

[Handwritten Signature]

TITLE OF REPORTER

Plant Manager



File: RR 2 P-8-86-01
E 2.40.1.1.3
GA86-095

February 13, 1986

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

50-346

Gentlemen:

Attached is a copy of the January, 1986 Wastewater Report for Davis-Besse Nuclear Power Station, Unit No. 1.

Yours truly,

L. F. Storz
Plant Manager
Davis-Besse Nuclear Power Station
(419) 249-5000, Ext. 7589

LFS/PJM/ym1
encl. (2 copies)
cc: W. Rogers, NRC Resident Inspector
J. F. Stolz, NRC
J. Sullivan
J. Scott-Wasilk
A. Gephart

IE25
1/1