

INSTRUCTIONS FOR DISCHARGER

1. Remove COPY 4 (dark yellow) and use for your worksheet.
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3. Provide dates for beginning and ending in reporting period blocks.
4. Provide data as specified under column headings.
5. Enter monthly summary data (MONTHLY AVERAGE, MONTHLY HIGH, etc.).
6. Appropriate signature is required at the bottom of the form.
7. Remove COPY 3 and retain for your records.
8. Send COPY 2 to EPA, Region 9, San Francisco and COPY 1 to

CALIFORNIA STATE WATER RESOURCES CONTROL BOARD

DISCHARGER SELF MONITORING REPORT

CALIFORNIA REGIONAL WATER QUALITY
CONTROL BOARD
CENTRAL VALLEY REGION
3443 ROUTIER ROAD
SACRAMENTO, CA 95827-3098

SACRAMENTO M.U.D.
RANCHO SECO

BOX 15830
SACRAMENTO
95813

CALIF

YOUR REPORTING PERIOD IS **MONTHLY** AND YOUR REPORTS MUST
BE SUBMITTED BY **15** DAYS FOLLOWING THIS PERIOD.

Transaction Code ☐ Facility I.D. **5A342008001** Year Month for this report **88/02** Reporting Period Beginning **88/02/01** Ending **88/02/29** State Code **06** NPDES Permit Number **CA00047** Date form was computer printed **88/02/29** PAGE 1

STATION DESCRIPTION		SUPPLY WATER		EFFLUENT		EFFLUENT		EFFLUENT		EFFLUENT		EFFLUENT		EFFLUENT		EFFLUENT	
CONSTITUENT NAME		PH		TDS		SUSP MATTER		CHROMIUM		ZINC		SPEC COND		OIL & GREASE		PH	
UNITS		NUMBER		MG/L		MG/L		MG/L		MG/L		UMHOS/CM		MG/L		NUMBER	
SAMPLE TYPE		GRAB		GRAB		8-HR COMP.		GRAB		GRAB		MEAN & RANGE		GRAB		MEAN & RANGE	
FREQUENCY		WEEKLY		WEEKLY		WEEKLY		MONTHLY		MONTHLY		CONTINUOUS		WEEKLY		CONTINUOUS	
MONTH	DAY	*		*		*		*		*		*		*		*	
02	01	*		*		1	1.9	1	<0.1	1	<0.1	*		1	4.1	*	
02	02	1	7.5			1	3.4							1	7.6		
02	03					1	1.0							1	1.6		
02	04					1	12.0							1	3.3		
02	05					1	2.4							1	0.2		
02	06					1	3.0							1	2.8		
02	07					1	2.4							1	0.4		
02	08			1	55.0	1	2.2							1	0.4		
02	09					1	2.0							1	0.5		
02	10	1	7.5			1	3.8							1	3.5		
02	11					1	2.3							1	1.5		
02	12					1	2.3							1	0.6		
02	13					1	1.8							1	2.0		
02	14					1	1.8							1	0.9		
02	15					1	2.1							1	5.8		
02	16	1	7.25			1	2.6							1	0.9		
02	17	1	7.70			1	3.8							1	1.9		
02	18					1	3.5							1	2.4		
02	19			1	78.9	1	4.1							1	2.0		
02	20					1	3.1							1	3.3		
02	21			1	52.8	1	2.6							1	2.0		
02	22					1	2.6							1	1.1		
02	23	1	7.63			1	6.3							1	1.0		
02	24					1	3.0							1	1.1		
02	25					1	2.6							1	1.1		
02	26					1	2.5							1	2.5		
02	27					1	2.2							1	1.6		
02	28					1	2.8							1	2.2		
02	29			1	29.7	1	3.5							1	4.5		

+ MONTHLY AVERAGE												100					
MONTHLY HIGH												250					7.1
MONTHLY LOW												75					7.7
TOTAL RECORDINGS MO																	6.7
REQUIREMENT #1		SAMPLE WHEN		30-D AVG 800		30-D AVG 30		30-D AVG 0.2		30-D AVG 2.0		NO CHECK		30-D AVG 15		MIN 6.5	
Times Exceeded		0		0		0		0		0		0		0		0	
REQUIREMENT #2		EFFLUENT PH		1-D MAX 850		1-D MAX 90		1-D MAX 0.2		1-D MAX 2.0				1-D MAX 20		MAX 8.5	
Times Exceeded				0		0		0		0				0			
REQUIREMENT #3		EXCEEDS 8.5															
Times Exceeded																	

* Enter number of samples
taken during the day

Typed Name of Principal Executive Officer

Yochheim Eric

I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that, based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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.

[Signature]

Signature of Principal Executive
Officer or Authorized Agent

88/02/29
Date

REGIONAL
BOARD COP

IE25 11

REMARKS: Eric Yochheim (916) 452-3211 Ext. 4378

880229 880229
05000312
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ADOCK
DR

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YOUR REPORTING PERIOD IS **MONTHLY** AND YOUR REPORTS MUST
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Transaction Code **Q2** Facility ID **5A342008001** Year Month for this report **88/02** Reporting Period Beginning **88/02/01** Ending **88/02/29** State Code **06** NPDES Permit Number **LA00047** Date form was computer printed **88/02** PAGE **1**

STATION DESCRIPTION		EFFLUENT	EFFLUENT	EFFLUENT	REGEN EFF	REGEN EFF	REGEN EFF	DOM SEWAGE	DOM SEWAGE	
CONSTITUENT NAME		TEMPERATURE	CHLORINE RES	FLOW	SUSP MATTER	HYDRAZINE	OIL & GREASE	BOD5	SUSP MATTER	
UNITS		DEGREES F	MG/L	MG/D	MG/L	MG/L	MG/L	MG/L	MG/L	
SAMPLE TYPE		MEAN & RANGE	GRAB	MEAN & RANGE	GRAB	GRAB	GRAB	8-HR COMP	8-HR COMP	
FREQUENCY		CONTINUOUS	DAILY	CONTINUOUS	SEE WDR	SEE WDR	SEE WDR	WEEKLY	WEEKLY	
MONTH	DAY	*	*	*	*	*	*	*	*	
02	01		1	<0.05						
02	02		1	<0.05	1	8.4	1	<0.02	1	7.6
02	03		1	<0.05						
02	04		1	<0.05						
02	05		1	<0.05					1	10.0
02	06		1	<0.05						
02	07		1	<0.05					1	9.8
02	08		1	<0.05						
02	09		1	<0.05						
02	10		1	<0.05						
02	11		1	<0.05						
02	12		1	<0.05					1	109.9
02	13		1	<0.05						
02	14		1	<0.05					1	5.9
02	15		1	<0.05						
02	16		1	<0.05						
02	17		1	<0.05						
02	18		1	<0.05	1	17.0	1	<0.02	1	0.4
02	19		1	<0.05					1	45.4
02	20		1	<0.05						
02	21		1	<0.05					1	4.2
02	22		1	<0.05	1	38.6	1	<0.02	1	4.9
02	23		1	<0.05						
02	24		1	<0.05						
02	25		1	<0.05						
02	26		1	<0.05	1	2.5	1	<0.02	1	0.4
02	27		1	<0.05					1	12.6
02	28		1	<0.05					1	7.2
02	29		1	<0.05						
+ MONTHLY AVERAGE		50.9		12.6						
MONTHLY HIGH		54.5		13.6						
MONTHLY LOW		48.2		12.4						
TOTAL RECORDINGS MO										
REQUIREMENT #1		MAX 90 DEG F	30-D AVG 0.1	NO CHECK	30-D AVG 30	30-D AVG 0.1	30-D AVG 15	30-D AVG 30	30-D AVG 3	
Times Exceeded		0	0		0	0	0	1		
REQUIREMENT #2		1-D MAX 0.2			1-D MAX 100	1-D MAX 0.5	1-D MAX 20	1-D MAX 45	1-D MAX 45	
Times Exceeded			0		0	0	0	2		
REQUIREMENT #3								1-D MAX 60	1-D MAX 60	
Times Exceeded								1		
* Enter number of samples taken during the day		Typed Name of Principal Executive Officer		I certify under penalty of law that I have personally examined and am familiar with the information submitted in this document and all attachments and that based on my inquiry of those individuals immediately responsible for obtaining the information, I believe that the 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.		Signature of Principal Executive Officer or Authorized Agent		Date		
Form Q2 7-74		Yochheim Eric D				8/3/88		REGIONAL BOARD COP		

REMARKS: Eric Yochheim (916) 452-3211 Ext. 4378

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STATION DESCRIPTION		DOM SEWAGE		DOM SEWAGE		DOM SEWAGE		REC WATER R1		REC WATER R1		REC WATER R1		REC WATER R1		Effluent	
CONSTITUENT NAME		SETT MATTER		FLOW		TOT COLIFORM		DO		PH		CHLORINE RES		TEMPERATURE		Boron	
UNITS		MG/L		GPD		MPN/100 ML		MG/L		NUMBER		MG/L		DEGREES F		Mg/L	
SAMPLE TYPE		GRAB		MONTHLY MEAN		GRAB		GRAB		GRAB		GRAB		GRAB			
FREQUENCY		2 TIMES/MO		CONTINUOUS		WEEKLY		2 TIMES/MO		2 TIMES/MO		2 TIMES/MO		2 TIMES/MO			
MONTH	DAY	*		*		*		*		*		*		*		*	
02	01					1	<2									1	<0.20
02	02					1	>2400	1	7.7	1	7.60	1	<0.05	1	46.4	1	<0.23
02	03	1	<0.1			1	<2									1	<0.20
02	04					1	<2									1	0.46
02	05					1	<2									1	0.23
02	06															1	0.46
02	07															1	0.46
02	08					1	<2									1	0.23
02	09					1	<2									1	0.23
02	10					1	<2									1	0.23
02	11					1	<2									1	0.23
02	12					1	<2									1	0.23
02	13															1	0.23
02	14															1	0.25
02	15					1	<2									1	0.48
02	16					1	<2	1	8.8	1	7.35	1	<0.05	1	57.2	1	0.45
02	17					1	<2									1	0.23
02	18					1	<2									1	<0.24
02	19					1	<2									1	<0.24
02	20					1	<2									1	<0.23
02	21															1	<0.24
02	22					1	13									1	<0.23
02	23					1	<2									1	0.70
02	24					1	<2									1	0.70
02	25					1	<2									1	0.90
02	26					1	<2									1	0.24
02	27	1	<0.1			1	<2									1	0.23
02	28															1	0.23
02	29					1	<2									1	0.24
																1	<0.23

+	MONTHLY AVERAGE		26,106														
	MONTHLY HIGH																
	MONTHLY LOW																
	TOTAL RECORDINGS MO																
	REQUIREMENT #1	30-D AVG 0.1	30-D MAX	30-D MED 23	MIN 5.0	NO CHECK	MAX 0.02	NO CHECK									
	Times Exceeded	0	0	0	0	0	0	0									
	REQUIREMENT #2	1-D MAX 0.5	36000 GAL	1-D MAX 500													30 D Avg 1.0
	Times Exceeded	0		1													
	REQUIREMENT #3																
	Times Exceeded																

* Enter number of samples
taken during the day

Typed Name of Principal Executive Officer

Yochheim Eric D

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Eric Yochheim
Signature of Principal Executive Officer or Authorized Agent

02/27
Date

REGIONAL
BOARD COPY

REMARKS: Eric Yochheim (916) 452-3211 Ext. 4378
Note 1: Minimum sensitivity of measurement is 0.05 mg/l.



SMUD

SACRAMENTO MUNICIPAL UTILITY DISTRICT ☐ 6201 S Street, P.O. Box 15830, Sacramento CA 95852-1830, (916) 452-3211
AN ELECTRIC SYSTEM SERVING THE HEART OF CALIFORNIA

AGM/NPP 88-172

March 8, 1988

DIRECTOR OF NUCLEAR REACTOR REGULATION
TOM MURLEY
11555 ROCKVILLE PIKE
ROCKVILLE MD 20852

Attached is the information requested by John Stolz in his March 11, 1983, letter to J. J. Mattimoe concerning National Pollutant Discharge Elimination System (NPDES) permit.

Further questions may be directed to Mr. George Campbell, who can be reached at (209) 333-2935, extension 4144.

JOSEPH F. FIRLIT
ASSISTANT GENERAL MANAGER,
NUCLEAR POWER PRODUCTION

Attachment

1625
11



SMUD

SACRAMENTO MUNICIPAL UTILITY DISTRICT ☐ 6201 S Street, P.O. Box 15830, Sacramento CA 95852-1830, (916) 452-3211
AN ELECTRIC SYSTEM SERVING THE HEART OF CALIFORNIA

AGM/NPP 88-165

March 7, 1988

REGIONAL ADMINISTRATOR
ENVIRONMENTAL PROTECTION AGENCY
REGION IX
215 FREMONT STREET
SAN FRANCISCO CA 94105

In accordance with reporting requirements of the California Water Quality Control Board, please find enclosed a copy of the report of waste water quality monitoring at Rancho Seco for the month of February 1988.

JOSEPH F. FIRLIT
ASSISTANT GENERAL MANAGER,
NUCLEAR POWER PRODUCTION

Enclosure



SMUD

SACRAMENTO MUNICIPAL UTILITY DISTRICT □ 6201 S Street, P.O. Box 15830, Sacramento CA 95852-1830, (916) 452-3211
AN ELECTRIC SYSTEM SERVING THE HEART OF CALIFORNIA

AGM/NPP 88-166

March 7, 1988

W H CROOKS
CALIFORNIA WATER QUALITY CONTROL BOARD
CENTRAL VALLEY REGION
3443 ROUTIER RD
SACRAMENTO CA 95827-3098

ORDER 85-21C WATER DISCHARGE REQUIREMENTS
SACRAMENTO MUNICIPAL UTILITY DISTRICT
RANCHO SECO NUCLEAR GENERATING STATION UNIT 1

In accordance with the monitoring and reporting requirements of the subject, please find attached a summary of the Water Quality Monitoring Program at the Rancho Seco facility for February 1988.

Additional comments are as follows:

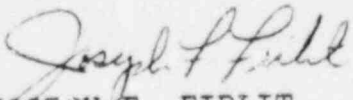
1. Rancho Seco has been shut down since December 26, 1985.
2. Maximum waste water flow rate was greater than 10,000 gpm for 3/4 hour on February 1, 1988.
3. Waste water discharges amounted to 365.9 M gallons.
4. Maximum TDS in waste water discharge was 175 ppm, based on conductivity. That level was experienced during a retention basin release on February 18, 1988.
5. Flow through the sewage plant averaged 26,106 gpd.
6. Visual inspections of site boundary have not indicated any floating or suspended matter, discoloration, or bottom deposits.
7. Due to an oversight, the maximum waste water flow rate was reported in error for January 1988. The correct maximum waste water flow was greater than 10,000 gpm for 3/4 hours on January 22, 1988.

W H CROOKS

-2-

March 7, 1988

8. The high BOD is still under investigation. SMUD has contacted Dewante and Stowell, consulting engineers in Sacramento, for assistance as we have not been able to determine the cause of the high BOD. All other parameters have been normal.


JOSEPH F. FIRLIT
ASSISTANT GENERAL MANAGER,
NUCLEAR POWER PRODUCTION

cc: G. Cranston
RIC
CCF 88-176