SCE&G
A SCANA Company

South Carolina Electric & Gas Company
Virgil C. Summer Nuclear Station.
P.O. Box 88
Jenkinsville, SC 29065
(803) 345-5209
(803) 634-2011

Stephen A. Byrne
General Manager,
Nuclear Plant Operations

July 23, 1997
RC-97-0147

Ms. Sandra Hursey
Environmental Quality Manager
Water Quality Assessments and
Enforcement Division
South Carolina Department of Health
and Environmental Control
2600 Bull Street
Columbia, SC 29201

Dear Ms. Hursey:

Subject: VIRGIL C. SUMMER NUCLEAR STATION
MONTHLY DISCHARGE MONITORING REPORTS
NPDES PERMITS NO. SC0030856 & SC0038407 (MON 3000-06)

Enclosed are the Monthly Discharge Monitoring Reports (DMRs), with one (1) additional copy of each, submitted in accordance with the subject NPDES permits. These reports cover the period of June 1 to June 30, 1997. As a requirement of NPDES Permit No. SC0030856, the results of the toxicity testing at Outfalls 001, 012, and 014 are also included.

All parameters were within specification during the month with the exception of pH at Outfall 014, toxicity at Outfall 001 and lead at Outfall 007. Written notification for the pH noncompliance was included in the May submittal of the DMRs dated June 26, 1997. Telephone notification for the toxicity failure at Outfall 001 was made to the Central Midlands District Office on June 18, 1997. At this time the cause for the toxicity failure is still being evaluated. Telephone notification for the lead noncompliance was made to the Central Midlands District Office on June 24, 1997. A sample collected and analyzed on June 23, 1997, indicated a concentration of 0.061 mg/l. A backup sample collected and analyzed on June 24, 1997, indicated a concentration of 0.087 mg/l. This exceeds the NPDES permit limit of 0.050 mg/l. The noncompliances had no adverse impact on the environment and were short in duration.

Should you have any questions, please call Ms. Susan B. Reese at 345-4591.

Very truly yours,

Stephen A. Byrne

SBR:nkk
Enclosures

c: R. J. White (w/o enclosures)
L. M. Ragsdale (SCDHEC) (w/o enclosures)
RTS (MON 3000, CER 970584) (w/o enclosures)
G. A. Montondo (P40)
NRC Resident Inspector
J. W. Preston (175)
W. F. Bacon
DMS (RC-97-0147)
File (818.03-11, 818.05)

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR TRAINING
ADDRESS P.O. Box 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR TRAINING
LOCATION JUNCTION SC HWY 213 & 16

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) SC0038407 PERMIT NUMBER

(17-19) 001 1 DISCHARGE NUMBER

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM INTERIM LIMITS
DMR VALID: 06 / 01 / 1997 - 06 / 30 / 1998
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) MINIMUM	QUANTITY OR CONCENTRATION (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00300 LAB ID: 20001 Dissolved Oxygen	SAMPLE MEASUREMENT	**********	**********	*******	**********	7.2	7.2	MG/L	0	01/30	GR
MLOC = 1	PERMIT REQUIREMENT	**********	**********	*******	**********	REPORT MO AVG	REPORT DAILY MX	MG/L		01/30	GR
00310 LAB ID: 20001 BOD - 5 Day (20 Degrees C)	SAMPLE MEASUREMENT	**********	**********	*******	**********	4.1	4.5	MG/L	0	02/30	24
MLOC = 1	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	45 DAILY MX	MG/L		01/30	24
00400 LAB ID: 20001 pH Standard Units	SAMPLE MEASUREMENT	**********	**********	*******	6.1	**********	6.1	SU	0	01/30	GR
MLOC = 1	PERMIT REQUIREMENT	**********	**********	*******	6.0 MINIMUM	**********	9.0 MAXIMUM	SU		01/30	GR
00530 LAB ID: 20001 Total Suspended Solids (TSS)	SAMPLE MEASUREMENT	**********	**********	*******	**********	7.2	7.2	MG/L	0	01/30	24
MLOC = 1	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	45 DAILY MX	MG/L		01/30	24
50050 LAB ID: 20001 Flow in Conduit	SAMPLE MEASUREMENT	0.000300	0.000400	MGD	**********	**********	**********	*******	0	02/30	IN
MLOC = 1	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/30	IN
50060 LAB ID: 20001 Total Residual Chlorine	SAMPLE MEASUREMENT	**********	**********	*******	**********	1.6	1.6	MG/L	0	01/30	GR
MLOC = 1	PERMIT REQUIREMENT	**********	**********	*******	**********	REPORT MO AVG	REPORT DAILY MX	MG/L		01/30	GR
74055 LAB ID: 20001 Fecal Coliform General	SAMPLE MEASUREMENT	**********	**********	*******	**********	<1.0	<1.0	# PER 100 ML	0	01/30	GR
MLOC = 1	PERMIT REQUIREMENT	**********	**********	*******	**********	200 30DAVGEO	400 DAILY MX	# PER 100 ML		01/30	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; 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 SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (Penalties under these statutes may include fines up to $10,000 and / or maximum imprisonment of between 6 months and 5 years.)

W. Frank Jamison

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

BOD-5 analysis for 6/4 - blank and QC unsatisfactory. Analysis for 6/18 - blank unsat, QC sat.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)	
SC0030856	001 1	MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
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PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00011 LAB ID: 20001	SAMPLE	**********	**********	*******	**********			DEG.			
Water Temperature	MEASUREMENT	**********	**********	*******	**********	97.3	105.5	FAR.	0	99/99	CN
(Fahrenheit)	PERMIT	**********	**********	*******	**********	REPORT	113	DEG.			
MLOC = 1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	FAR.		99/99	CN
00011 LAB ID: 20001	SAMPLE	**********	**********	*******	**********			DEG.			
Water Temperature	MEASUREMENT	**********	**********	*******	**********	79.3	88.1	FAR.	0	99/99	CN
(Fahrenheit)	PERMIT	**********	**********	*******	**********	REPORT	REPORT	DEG.			
MLOC = 6	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	FAR.		99/99	CN
00011 LAB ID: 20001	SAMPLE	**********	**********	*******	**********			DEG.			
Water Temperature	MEASUREMENT	**********	**********	*******	**********	72.5	80.6	FAR.	0	99/99	CN
(Fahrenheit)	PERMIT	**********	**********	*******	**********	REPORT	REPORT	DEG.			
MLOC = 7	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	FAR.		99/99	CN
00011 LAB ID: 20001	SAMPLE	**********	**********	*******	**********			DEG.			
Water Temperature	MEASUREMENT	**********	**********	*******	**********	77.7	87.0	FAR.	0	99/99	CN
(Fahrenheit)	PERMIT	**********	**********	*******	**********	90	REPORT	DEG.			
MLOC = T	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	FAR.		99/99	CN
01022 LAB ID: 20001	SAMPLE	**********	**********	*******	**********						
Boron, Total	MEASUREMENT	**********	**********	*******	**********	<0.5	0.5	MG/L	0	02/30	GR
	PERMIT	**********	**********	*******	**********	REPORT	REPORT				
MLOC = 1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	MG/L		02/30	GR
01092 LAB ID: 20001	SAMPLE	**********	**********	*******	**********						
Zinc, Total	MEASUREMENT	**********	**********	*******	**********	<0.002	<0.002	MG/L	0	01/30	GR
	PERMIT	**********	**********	*******	**********	REPORT	REPORT				
MLOC = 1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	MG/L		01/30	GR
50050 LAB ID: 20001	SAMPLE				**********	**********	**********	*******			
Flow in Conduit	MEASUREMENT	738.7	738.7	MGD	**********	**********	**********	*******	0	99/99	ES
	PERMIT	REPORT	REPORT		**********	**********	**********	*******			
MLOC = 1	REQUIREMENT	MO AVG	DAILY MAX	MGD	**********	**********	**********	*******		99/99	ES

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

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W. Frank Ba

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (Reference all attachments here)
MLOC=1=TEMPERATURE MONITOR AT OUTLET CORRESPONDING TO INDIVIDUAL UNIT
MLOC=6=PLUME TEMP DOWNSTREAM.
MLOC=7=INLET TEMP MEASURED ON INLET SIDE OF MAIN CONDENSER
MLOC=N=PLUME TEMPERATURE RISE A MINUS B
MLOC=T=PLUME TEMP TAKEN AT INTAKE STRUCTURE OF FAIRFIELD PUMPED FAC.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) SC0030856 PERMIT NUMBER
(17-19) 001 1 DISCHARGE NUMBER

MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
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61576 LAB ID: 20001 Temp. Diff. Between Intake and Discharge MLOC = N	SAMPLE MEASUREMENT	**********	**********	*******	**********	1.43	6.2	DEG. FAR.	0	99/99	CN
	PERMIT REQUIREMENT	**********	**********	*******	**********	3.0 MO AVG	REPORT INST MAX	DEG. FAR.		99/99	CN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

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SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

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AREA CODE	NUMBER	YEAR	MO	DAY

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MLOC=N=PLUME TEMPERATURE RISE A MINUS B
MLOC=T=PLUME TEMP TAKEN AT INTAKE STRUCTURE OF FAIRFIELD PUMPED FAC.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER	
SC0030856	001 2	MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
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PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TGP3B LAB ID: 36001	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********		0=PASS			
7 Day Chronic Static		**********	**********	*******	**********	**********	1	1=FAIL	1	02/30	GR
Toxicity C. Dubia PF	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	REPORT	0=PASS			
MLOC=1		**********	**********	*******	**********	**********	DAILY MX	1=FAIL		01/30	GR
	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		Walter F. Bacon	TELEPHONE		DATE		
Gary J. Taylor Vice President, Nuclear Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; 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 SEE 18 U S C § 1001 AND 33 U S C § 1319 (Penalties under these statutes may include fines up to $10,000 and / or maximum imprisonment of between 6 months and 5 years.)	W. Frank Bacon	803	345-4156	97	7	2
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

IWC = 100%
IF A TEST FAILS, A TRE PLAN MAY BE REQUIRED. SEE PERMIT PARAGRAPHS III. A. 12.c
CHRONIC TOXICITY IWC = 100.00% EFFLUENT

Metals analysis on failed sample did not show contamination.
The animals in the test did not die, but they did not reproduce.
Chronic toxicity samples taken during the week of June 23 passed.

DMR Attachment for Toxicity Test Results. Bureau of Water

SCE&G/SUMMER NUCLEAR STATION Permit number SC0030856 Discharge number 0012
Final Limits 11/01/1993-09/30/1997 Parameter Code TGP3B MLOC=1 IWC=100.00% effluent

Monitoring period	Year	Month	Day		Year	Month	Day
From	97	06	01	To	97	06	30

Date 06/02/97
Lab ID 36001

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control	20	0	Pass	16	10	Fail
Test	20	1		2	9	

Date 06/23/97
Lab ID 36001

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control	20	2	Pass	27	115	Pass
Test	19	1		27	73	

Date
Lab ID

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control						
Test						

Date
Lab ID

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control						
Test						

Date
Lab ID

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control						
Test						

Signature of Principal Executive Officer or Authorized Agent W. Frank Jr for GJT

Name/Title of Principal Executive Officer *(typed or printed)* Gary J. Taylor, Vice President, Nuclear Operations

DHEC 3420 (8/96)

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) SC0030856 PERMIT NUMBER

(17-19) 001 3 DISCHARGE NUMBER

MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 08 / 01 / 1996 - 09 / 30 / 1997
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00400 LAB ID: 20001	SAMPLE MEASUREMENT	**********	**********	*******		**********					
pH		**********	**********	*******	7.0	**********	7.0	SU	0	01/30	GR
Standard Units	PERMIT REQUIREMENT	**********	**********	*******	6.0	**********	8.5				
MLOC=1		**********	**********	*******	MINIMUM	**********	MAXIMUM	SU		01/30	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
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	PERMIT REQUIREMENT										
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	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

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Walter F. Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER: SC0030856
(17-19) DISCHARGE NUMBER: 002 1

MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

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DMR VALID: 11 / 01 /93 - 09 / 30 / 97
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00011 LAB ID: 20001 Water Temperature (Fahrenheit) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********					
	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	REPORT DAILY MX	DEG. FAR.		01/DS	CN
00400 LAB ID: 20001 pH Standard Units MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******		**********					
	PERMIT REQUIREMENT	**********	**********	*******	6.0 MINIMUM	**********	9.0 MAXIMUM	SU		01/DS	GR
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	100 DAILY MX	MG/L		01/DS	GR
00556 LAB ID: 20001 Oil & Grease Freon Extr-Grav Method MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	15 MO AVG	20 DAILY MX	MG/L		01/DS	GR
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	Not	Discharged		**********	**********	**********	*******			
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/DS	ES
50060 LAB ID: 20001 Total Residual Chlorine MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	0.1 MO AVG	0.1 DAILY MX	MG/L		01/DS	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER: Gary J. Taylor, Vice President, Nuclear Operations (TYPED OR PRINTED)

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, 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 SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (Penalties under these statutes may include fines up to $10 000 and / or maximum imprisonment of between 6 months and 5 years.)

Walter F. Bacon
W. Frank Bacon
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

There was no discharge from Outfall 002 during this month.

NOTE: TOTAL RESIDUAL CHLORINE - FREQUENCY - PAGE 5 OF 44, PERMIT.
NOTE: pH - SAMPLE 1/OCCURRENCE, MAX OF 1/MON. WHERE DURATION OF DISCHARGE EXCEEDS 1 MON. CONDUCT 1/MON.
NOTE: SAMPLES SHALL BE TAKEN AT FOLLOWING LOCATION - SEE PARA. A. 4.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME: SCE&G / SUMMER NUCLEAR STATION
ADDRESS: P.O. BOX 88
Jenkinsville, SC 29065

FACILITY: SCE&G / SUMMER NUCLEAR STATION
LOCATION: HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER: SC0030856
(17-19) DISCHARGE NUMBER: 002 2

MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TGP3B LAB ID: 36001	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********					
7 Day Chronic Static		**********	**********	*******	**********	**********	Not Discharged				
Toxicity C. Dubia PF	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	REPORT	0=PASS			
MLOC=1		**********	**********	*******	**********	**********	DAILY MX	1=FAIL		01/DS	GR
	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

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

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Walter F. Bacon

W. Frank Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

COMMENT AND EXPLANATION OF ANY VIOLATIONS (*Reference all attachments here*)
NOTE: SAMPLES TAKEN 1/OCCURRENCE
NOTE: SAMPLES TAKEN AT FOLLOWING IWC = 100%
If a test fails, a TRE plan may be required. See permit paragraphs (s) III. A. 12. c.
CHRONIC TOXICITY IWC = 100.00% EFFLUENT

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) SC0030856 PERMIT NUMBER

(17-19) 003 1 DISCHARGE NUMBER

MAJOR

39 CM FINAL LIMITS

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

DMR VALID: 12 / 01 / 1995 - 09 / 30 / 1997

NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00400 LAB ID: 20001	SAMPLE	**********	**********	*******		**********					
pH	MEASUREMENT	**********	**********	*******	6.4	**********	7.8	SU	0	01/DS	GR
Standard Units	PERMIT	**********	**********	*******	6.0	**********	9.0				
MLOC=1	REQUIREMENT	**********	**********	*******	MINIMUM	**********	MAXIMUM	SU		01/DS	GR
00530 LAB ID: 20001	SAMPLE	**********	**********	*******	**********						
Total Suspended	MEASUREMENT	**********	**********	*******	**********	1.7	10.0	MG/L	0	01/DS	GR
Solids (TSS)	PERMIT	**********	**********	*******	**********	30	100				
MLOC=1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	MG/L		01/DS	GR
00556 LAB ID: 20001	SAMPLE	**********	**********	*******	**********						
Oil & Grease Freon	MEASUREMENT	**********	**********	*******	**********	1.6	6.6	MG/L	0	01/DS	GR
Extr-Grav Method	PERMIT	**********	**********	*******	**********	15	20				
MLOC=1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	MG/L		01/DS	GR
01022 LAB ID: 20001	SAMPLE	**********	**********	*******	**********						
Boron, Total	MEASUREMENT	**********	**********	*******	**********	518.4	775.0	MG/L	0	01/DS	GR
	PERMIT	**********	**********	*******	**********	REPORT	REPORT				
MLOC=1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	MG/L		01/DS	GR
01042 LAB ID: 20001	SAMPLE	**********	**********	*******	**********						
Copper, Total as Cu	MEASUREMENT	**********	**********	*******	**********	0.032	0.123	MG/L	0	01/DS	GR
	PERMIT	**********	**********	*******	**********	1.0	1.0				
MLOC=1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	MG/L		01/DS	GR
01045 LAB ID: 20001	SAMPLE	**********	**********	*******	**********						
Iron, Total as Fe	MEASUREMENT	**********	**********	*******	**********	0.140	0.327	MG/L	0	01/DS	GR
	PERMIT	**********	**********	*******	**********	1.0	1.0				
MLOC=1	REQUIREMENT	**********	**********	*******	**********	MO AVG	INST MX	MG/L		01/DS	GR
50050 LAB ID: 20001	SAMPLE				**********	**********	**********	*******			
Flow in Conduit	MEASUREMENT	0.004189	0.004350	MGD	**********	**********	**********	*******	0	01/DS	ES
	PERMIT	REPORT	REPORT		**********	**********	**********	*******			
MLOC=1	REQUIREMENT	MO AVG	DAILY MX	MGD	**********	**********	**********	*******		01/DS	ES

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		Walter F. Bacon	TELEPHONE		DATE		
Gary J. Taylor Vice President, Nuclear Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (Penalties under these statutes may include fines up to $10,000 and/or maximum imprisonment of between 6 months and 5 years.)	W. Frank Bacon	803	345-4156	97	7	22
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: pH - SAMPLE 1/OCCURRENCE, MAXIMUM OF 1/MONTH. WHERE DURATION OF DISCHARGE EXCEEDS 1/MONTH, CONDUCT 1/MONTH.
NOTE: SAMPLES TAKEN AT FOLLOWING LOCATION - SEE PARA. A. 3.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) SC0030856 PERMIT NUMBER
(17-19) 004 1 DISCHARGE NUMBER
MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	100 INST MX	MG/L		01/DS	GR
00556 LAB ID: 20001 Oil & Grease Freon Extr-Grav Method MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	15 MO AVG	20 INST MX	MG/L		01/DS	GR
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	No	Discharge		**********	**********	**********	*******			
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/DS	CN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (*Penalties under these statutes may include fines up to $10,000 and / or maximum imprisonment of between 6 months and 5 years.*)

Walter F. Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES SHALL BE TAKEN AT FOLLOWING LOCATION (S) - SEE PARA. A. 4.

Outfall 004 was not discharged this month. All Steam Generator blowdown was recovered via the Nuclear Blowdown Demineralizer.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME: SCE&G / SUMMER NUCLEAR STATION
ADDRESS: P.O. BOX 88
Jenkinsville, SC 29065

FACILITY: SCE&G / SUMMER NUCLEAR STATION
LOCATION: HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER	
SC0030856	005 1	MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00310 LAB ID: 20001 BOD - 5 Day (20 Degrees C) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	9.9	10.7	MG/L	0	01/07	24
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	45 DAILY MX	MG/L		01/07	24
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	4.3	5.7	MG/L	0	01/07	24
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	45 DAILY MX	MG/L		01/07	24
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	0.002767	0.005100	MGD	**********	**********	**********	*******	0	06/30	IN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/07	IN
74055 LAB ID: 20001 Fecal Coliform General MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	<2.8	8.0	# PER 100 ML	0	02/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	200 30D AVGEO	400 DAILY MX	# PER 100 ML		02/30	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

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W. Frank Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES TAKEN AT FOLLOWING LOCATIONS - SEE PARA. A. 2.

BOD-5 analysis: June 4 blanks and QC unsat
June 18 blanks unsat, QC sat
June 11 and 25 blanks and QC satisfactory

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME: SCE&G / SUMMER NUCLEAR STATION
ADDRESS: P.O. BOX 88
Jenkinsville, SC 29065

FACILITY: SCE&G / SUMMER NUCLEAR STATION
LOCATION: HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER	
SC0030856	06A 1	MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.7	0.7	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	100 INST MX	MG/L		01/30	GR
00556 LAB ID: 20001 Oil & Grease Freon Extr-Grav Method MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.0	0.0	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	15 MO AVG	20 INST MX	MG/L		01/30	GR
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	0.026667	0.028900	MGD	**********	**********	**********	*******	0	03/30	IN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/30	IN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

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Walter F. Bacon

W. Frank Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES TAKEN AT FOLLOWING LOCATIONS - SEE PARA. A.2.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME: SCE&G / SUMMER NUCLEAR STATION
ADDRESS: P.O. BOX 88
Jenkinsville, SC 29065

FACILITY: SCE&G / SUMMER NUCLEAR STATION
LOCATION: HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER: SC0030856
(17-19) DISCHARGE NUMBER: 06B 1
MAJOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) AVERAGE	QUANTITY OR LOADING (54-61) MAXIMUM	UNITS	(4 Card Only) (38-45) MINIMUM	QUALITY OR CONCENTRATION (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	11.9	11.9	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	98 DAILY MX	MG/L		01/30	GR
00556 LAB ID: 20001 Oil & Grease Freon Extr-Grav Method MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	1.4	1.4	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	15 MO AVG	19 DAILY MX	MG/L		01/30	GR
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	0.030133	0.045600	MGD	**********	**********	**********	*******	0	03/30	IN
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/30	IN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (*Penalties under these statutes may include fines up to $10,000 and / or maximum imprisonment of between 6 months and 5 years.*)

Walter F. Bacon

W. Frank Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES TAKEN AT FOLLOWING LOCATIONS - SEE PARA. A. 2.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME: SCE&G / SUMMER NUCLEAR STATION
ADDRESS: P.O. BOX 88
Jenkinsville, SC 29065

FACILITY: SCE&G / SUMMER NUCLEAR STATION
LOCATION: HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

PERMIT NUMBER (2-16)	DISCHARGE NUMBER (17-19)	
SC0030856	007 1	MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 01 / 01 / 1995 - 09 / 30 / 1997
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00400 LAB ID: 20001 pH Standard Units MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	6.2	**********	7.6	SU	0	01/07	GR
	PERMIT REQUIREMENT	**********	**********	*******	6.0 MINIMUM	**********	9.0 MAXIMUM	SU		01/07	GR
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	4.5	4.5	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	100 INST MX	MG/L		01/30	GR
00556 LAB ID: 20001 Oil & Grease Freon Extr-Grav Method MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.0	0.0	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	15 MO AVG	20 INST MX	MG/L		01/30	GR
01051 LAB ID: 20001 Lead, Total MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.072	0.088	MG/L	3	03/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	0.05 MO AVG	0.05 INST MX	MG/L		01/30	GR
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	0.051667	0.075000	MGD	**********	**********	**********	*******	0	01/DS	ES
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/30	ES
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		Walter F. Bacon	TELEPHONE		DATE		
Gary J. Taylor Vice President, Nuclear Operations	I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; 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 SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (*Penalties under these statutes may include fines up to $10,000 and / or maximum imprisonment of between 6 months and 5 years*)	W. Frank Bacon	803	345-4156	97	7	22
TYPED OR PRINTED		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	AREA CODE	NUMBER	YEAR	MO	DAY

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

Inline pH samples are also logged once per discharge.

NOTE: SAMPLES TAKEN AT FOLLOWING LOCATIONS - SEE PARA. A.3.

High lead concentration from battery room discharged to Outfall 007.

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16)	(17-19)	
SC0030856	008 1	MAJOR
PERMIT NUMBER	DISCHARGE NUMBER	

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 /93 - 09 / 30 / 97
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	30 MO AVG	100 INST MX	MG/L		01/DS	GR
00556 LAB ID: 20001 Oil & Grease Freon Extr-Grav Method MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	15 MO AVG	20 INST MX	MG/L		01/DS	GR
01042 LAB ID: 20001 Copper, Total as Cu MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	1.0 MO AVG	1.0 INST MX	MG/L		01/DS	GR
01045 LAB ID: 20001 Iron, Total as Fe MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********						
	PERMIT REQUIREMENT	**********	**********	*******	**********	1.0 MO AVG	1.0 INST MX	MG/L		01/DS	GR
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	No	Discharge		**********	**********	**********	*******			
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/01	IN
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

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W. Fred Sacco

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES 1/OCCURRENCE = TAKEN AT LEAST 1/OCCUR, IF DURATION EXCEEDS 1 WK, SAMPLE WEEKLY BASIS
NOTE: SAMPLES TAKEN AT FOLLOWING LOCATIONS - SEE PARA. A.3.

Outfall 008 was not discharged during this month.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) SC0030856 PERMIT NUMBER

(17-19) 012 1 DISCHARGE NUMBER

MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 / 1993 - 09 / 30 / 1997
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		QUANTITY OR LOADING (3 Card Only) (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	QUALITY OR CONCENTRATION (4 Card Only) (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00400 LAB ID: 20001 pH Standard Units MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	6.2	**********	6.2	SU	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	6.0 MINIMUM	**********	8.5 MAXIMUM	SU		01/30	GR
00530 LAB ID: 20001 Total Suspended Solids (TSS) MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.0	0.0	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	26 MO AVG	70 DAILY MX	MG/L		01/30	GR
00556 LAB ID: 20001 Oil & Grease Freon Extr-Grav Method MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	1.6	1.6	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	9 MO AVG	11 DAILY MX	MG/L		01/30	GR
50050 LAB ID: 20001 Flow in Conduit MLOC=1	SAMPLE MEASUREMENT	0.028900	0.028900	MGD	**********	**********	**********	*******	0	01/30	ES
	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		01/30	ES
50060 LAB ID: 20001 Total Residual Chlorine MLOC=1	SAMPLE MEASUREMENT	**********	**********	*******	**********	<0.10	<0.10	MG/L	0	01/30	GR
	PERMIT REQUIREMENT	**********	**********	*******	**********	0.5 MO AVG	1.0 DAILY MX	MG/L		01/30	GR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (*Penalties under these statutes may include fines up to $10 000 and / or maximum imprisonment of between 6 months and 5 years.*)

Walter F. Bacon

W. F. Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES TAKEN AT FOLLOWING LOCATIONS - SEE PARA. A. 2.

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER	(17-19) DISCHARGE NUMBER	
SC0030856	012 2	MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 08 / 01 / 1995 - 09 / 30 / 1997
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TGA3B LAB ID: 36001	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********					
48 Hour Static Acute		**********	**********	*******	**********	**********	0		0	01/30	GR
Cerio. Dubia	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	0	0=PASS			
MLOC=1		**********	**********	*******	**********	**********	DAILY MX	1=FAIL		01/30	GR
	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

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319 (*Penalties under these statutes may include fines up to $10 000 and / or maximum imprisonment of between 6 months and 5 years.*)

Walter F. Bacon

W. Frank Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	24
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES TAKEN AT FOLLOWING IWC = 100%
If a test fails, a TRE plan may be required. See permit paragraph (s) III. A. 13. c.
Acute toxicity IWC=100.00% effluent.

DMR Attachment for Toxicity Test Results. Bureau of Water

SCE&G/SUMMER NUCLEAR STATION Permit number SC0030856 Discharge number 0122
Final Limits 08/01/1995-09/30/1997 Parameter Code TGA3B MLOC=1 IWC=100.00% effluent

Monitoring period	Year	Month	Day		Year	Month	Day
From	97	06	01	To	97	06	30

Date 06/02/97
Lab ID 36001

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control	20	2				
Test	20	0	Pass			

Date
Lab ID

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control						
Test						

Date
Lab ID

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control						
Test						

Date
Lab ID

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control						
Test						

Date
Lab ID

Group	All tests # Adults	All tests # Dead	All tests Pass/Fail	Chronic tests only Average Young	Chronic tests only Variance	Chronic tests only Pass/Fail
Control						
Test						

Signature of Principal Executive Officer or Authorized Agent W. [illegible] for GJT

Name/Title of Principal Executive Officer *(typed or printed)* Gary J. Taylor, Vice President, Nuclear Operations

DHEC 3420 (8/96)

PERMITTEE NAME/ADDRESS (*Include Facility Name/Location if Different*)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) SC0030856 PERMIT NUMBER
(17-19) 014 1 DISCHARGE NUMBER
MAJOR

MONITORING PERIOD	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 12 / 01 / 1995 - 09 / 30 / 1997
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) (46-53) QUANTITY OR LOADING (54-61) AVERAGE	MAXIMUM	UNITS	(4 Card Only) (38-45) QUALITY OR CONCENTRATION (46-53) MINIMUM	AVERAGE	(54-61) MAXIMUM	UNITS	NO. EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
00300 LAB ID: 20001 Dissolved Oxygen	SAMPLE MEASUREMENT	**********	**********	*******	6.1	**********	**********	MG/L	0	01/30	GR
MLOC=1	PERMIT REQUIREMENT	**********	**********	*******	1.0 INST MIN	**********	**********	MG/L		01/30	GR
00400 LAB ID: 20001 pH	SAMPLE MEASUREMENT	**********	**********	*******	7.1	**********	8.9	SU	2	03/30	GR
Standard Units MLOC=1	PERMIT REQUIREMENT	**********	**********	*******	6.0 MINIMUM	**********	8.5 MAXIMUM	SU		01/30	GR
00610 LAB ID: 20001 Ammonia - Nitrogen	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.25	0.60	MG/L	0	01/30	GR
Total as N MLOC=1	PERMIT REQUIREMENT	**********	**********	*******	**********	2.1 MO AVG	4.2 DAILY MX	MG/L		01/30	GR
01042 LAB ID: 20001 Copper, Total as Cu	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.013	0.013	MG/L	0	01/30	GR
MLOC=1	PERMIT REQUIREMENT	**********	**********	*******	**********	0.028 MO AVG	0.039 DAILY MX	MG/L		01/30	GR
01092 LAB ID: 20001 Zinc, Total	SAMPLE MEASUREMENT	**********	**********	*******	**********	0.031	0.031	MG/L	0	01/30	GR
MLOC=1	PERMIT REQUIREMENT	**********	**********	*******	**********	0.059 MO AVG	0.065 DAILY MX	MG/L		01/30	GR
50050 LAB ID: 20001 Flow in Conduit	SAMPLE MEASUREMENT	0.105033	0.450000	MGD	**********	**********	**********	*******	0	99/99	CN
MLOC=1	PERMIT REQUIREMENT	REPORT MO AVG	REPORT DAILY MX	MGD	**********	**********	**********	*******		99/99	CN
50060 LAB ID: 20001 Total Residual Chlorine	SAMPLE MEASUREMENT	**********	**********	*******	**********	<0.10	<0.10	MG/L	0	01/30	GR
MLOC=1	PERMIT REQUIREMENT	**********	**********	*******	**********	0.1 MO AVG	0.1 DAILY MX	MG/L		01/30	GR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Gary J. Taylor
Vice President, Nuclear Operations
TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN, 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. (*Penalties under these statutes may include fines up to $10,000 and / or maximum imprisonment of between 6 months and 5 years.*)

Walter F. Bacon
W. Frank Bacon
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES TAKEN AT FOLLOWING LOCATIONS - SEE PARA. A. 3.

Flow - digital data not captured by collection device for June 1 -2; partial data for June 3. Reason unknown.
pH high due to faulty relief valve in TBCCC system, relieved to TB sump.
6/5 pH 7.05; 6/6 ph 8.90, 8.94; 6/7 pH 8.77, 8.72, 7.05

PERMITTEE NAME/ADDRESS (Include Facility Name/Location if Different)

NAME SCE&G / SUMMER NUCLEAR STATION
ADDRESS P.O. BOX 88
Jenkinsville, SC 29065

FACILITY SCE&G / SUMMER NUCLEAR STATION
LOCATION HIGHWAY 215

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

Form Approved.
OMB No. 2040-0004
Approval expires 05-31-98

(2-16) PERMIT NUMBER: SC0030856
(17-19) DISCHARGE NUMBER: 014 2
MAJOR

MONITORING PERIOD

	YEAR	MO	DAY		YEAR	MO	DAY
FROM	97	06	01	TO	97	06	30
	(20-21)	(22-23)	(24-25)		(26-27)	(28-29)	(30-31)

39 CM FINAL LIMITS
DMR VALID: 11 / 01 / 1993 - 09 / 30 / 1997
NOTE: Read Instructions before completing this form.

PARAMETER (32-37)		(3 Card Only) QUANTITY OR LOADING (46-53) AVERAGE	(54-61) MAXIMUM	UNITS	(4 Card Only) QUALITY OR CONCENTRATION (38-45) MINIMUM	(46-53) AVERAGE	(54-61) MAXIMUM	UNITS	NO EX (62-63)	FREQUENCY OF ANALYSIS (64-68)	SAMPLE TYPE (69-70)
TGP3B LAB ID: 36001	SAMPLE MEASUREMENT	**********	**********	*******	**********	**********		0=PASS			
7 Day Chronic Static		**********	**********	*******	**********	**********	0	1=FAIL	0	01/30	GR
Toxicity C. Dubia PF	PERMIT REQUIREMENT	**********	**********	*******	**********	**********	REPORT	0=PASS			
MLOC=1		**********	**********	*******	**********	**********	DAILY MX	1=FAIL		01/30	GR
	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

Gary J. Taylor
Vice President, Nuclear Operations

TYPED OR PRINTED

I CERTIFY UNDER PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED HEREIN; 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. SEE 18 U.S.C. § 1001 AND 33 U.S.C. § 1319. *(Penalties under these statutes may include fines up to $10,000 and / or maximum imprisonment of between 6 months and 5 years.)*

Walter F. Bacon

W. Frank Bacon

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

TELEPHONE		DATE		
803	345-4156	97	7	22
AREA CODE	NUMBER	YEAR	MO	DAY

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

NOTE: SAMPLES TAKEN AT FOLLOWING IWC = 100%.
If a test fails, a TRE plan may be required. See permit paragraph (s) III. A. 12. c.
Chronic toxicity IWC=100.00% effluent.

DMR Attachment for Toxicity Test Results. Bureau of Water

SCE&G/SUMMER NUCLEAR STATION Permit number SC0030856 Discharge number 0142
Final Limits 11/01/1993-09/30/1997 Parameter Code TGP3B MLOC=1 IWC=100.00% effluent

Monitoring period	Year	Month	Day		Year	Month	Day
From	97	06	01	To	97	06	30

Date 06/02/97		All tests			Chronic tests only		
Lab ID 36001	Group	# Adults	# Dead	Pass/Fail	Average Young	Variance	Pass/Fail
	Control	20	0		15	11	
	Test	20	1	Pass	14	20	Pass

Date		All tests			Chronic tests only		
Lab ID	Group	# Adults	# Dead	Pass/Fail	Average Young	Variance	Pass/Fail
	Control						
	Test						

Date		All tests			Chronic tests only		
Lab ID	Group	# Adults	# Dead	Pass/Fail	Average Young	Variance	Pass/Fail
	Control						
	Test						

Date		All tests			Chronic tests only		
Lab ID	Group	# Adults	# Dead	Pass/Fail	Average Young	Variance	Pass/Fail
	Control						
	Test						

Date		All tests			Chronic tests only		
Lab ID	Group	# Adults	# Dead	Pass/Fail	Average Young	Variance	Pass/Fail
	Control						
	Test						

Signature of Principal Executive Officer or Authorized Agent W. Fowlke for GJT

Name/Title of Principal Executive Officer *(typed or printed)* Gary J. Taylor, Vice President, Nuclear Operations

DHEC 3420 (8/96)