



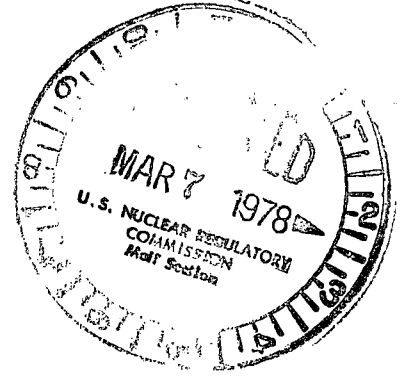
PSEG

REGULATORY DOCKET FILE COPY

Public Service Electric and Gas Company
Salem Generating Station P.O. Box #168 Hancocks Bridge, New Jersey 08038

March 3, 1978

Director
Office of Nuclear Reactor Regulation
U. S. Nuclear Regulatory Commission
Washington, D.C. 20555



Dear Sir:

APPENDIX B TO OPERATING LICENSE DPR-70
ENVIRONMENTAL TECHNICAL SPECIFICATIONS FOR
SALEM GENERATING STATION

In compliance with Section 5.6.1, Routine Reports, Salem Environmental Technical Specifications, enclosed are the following reports for the month of January 1978.

1. National Pollutant Discharge Elimination System Discharge Monitoring Reports Permit No. NJ 0005622
2. Operating Report of the Industrial Waste Treatment Plant
3. Waste Water Treatment Report.

Sincerely yours,

H. J. Heller
Manager - Salem Generating Station

JMZ:lds
Enclosures

A007
S
1/1

The Energy People



PSEG

Public Service Electric and Gas Company

Salem Generating Station P.O. Box #168 Hancocks Bridge, New Jersey 08038

February 28, 1978

Status of Compliance Branch
Enforcement Division
U.S. Environmental Protection Agency
Region II
26 Federal Plaza
New York, New York 10007

Attention: Dr. Richard A. Baker, Chief

Dear Sir:

NATIONAL POLLUTANT DISCHARGE
ELIMINATION SYSTEM
DISCHARGE MONITORING REPORTS
SALEM NUCLEAR GENERATING STATION
PERMIT NO. NJ 0005622

Attached are the Discharging Monitoring Reports for Salem Nuclear
Generating Station containing the information, as outlined in
Permit No. NJ 0005622 for the month of January, 1978.

Very truly yours,

H. J. Heller
Manager - Salem Generating Station

JMZ:jcm

CC: Director, Division of Water Resources (N.J. Dept. of Env. Pro.)
General Manager - Electric Production
Director, Office of Nuclear Reactor Regulation, USNRC,
Washington, D.C. 20555

17.5.18.R1

The Energy People

PUBLIC SERVICE ELEC & GAS SALE
 80 PARK PLACE
 NEWARK
 NJ 07101

DELAWARE RIVER
 LOWER ALLOWAYS CREEK
 COOLING WATER

INSTRUCTIONS

1. Provide data for period covered by this report in spaces marked "REPORTING PERIOD".
2. Enter reported minimum, average and maximum values under "QUANTITY" and "CONCENTRATION" in the units specified for each parameter as appropriate. Do not enter values in boxes containing asterisks. "AVERAGE" is average computed over actual time discharge is operating. "MAXIMUM" and "MINIMUM" are extreme values observed during the reporting period.
3. Specify the number of analyzed samples that exceed the maximum (and/or minimum as appropriate) permit conditions in the column labeled "No. Ex." If none, enter "0".
4. Specify frequency of analysis for each parameter as No. analyses/No. days. (e.g., "3/7" is equivalent to 3 analyses performed every 7 days.) If continuous enter "CONT."
5. Specify sample type ("grab" or "hr. composite") as applicable. If frequency was continuous, enter "NA".
6. Appropriate signature is required on bottom of this form.
7. Remove carbon and retain copy for your records.
8. Fold along dotted lines, staple and mail Original to office specified in permit.

(12-21) NJ ST	(14-19) 0005622 PERMIT NUMBER	F	(17-19) FAC DIS	4931 SIC	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM			(20-21) 7 8 YEAR	(22-23) 0 1 MO	(24-25) 0 1 DAY	TO
			(26-27) 7 8 YEAR	(28-29) 0 1 MO	(30-31) 3 1 DAY	

PARAMETER	REPORTED	QUANTITY (3 card only)			UNITS	NO. EX	CONCENTRATION (4 card only)			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM (32-42)	AVERAGE (44-54)	MAXIMUM (56-66)			MINIMUM (68-78)	AVERAGE (80-90)	MAXIMUM (92-102)				
00017 4 HEAT MILLIONS OF BTU'S PER DAY HR EFFLUENT NET	REPORTED	0	7900	13,300	MBTUHR MCTUDY		*****	*****	*****	MKCLDY		Calc.	N/A
	PERMIT CONDITION	*****	*****	16300.00				*****	*****		*****		*
50050 1 FLOW EFFLUENT GROSS	REPORTED	0	315.1	1598.4	MGD		*****	*****	*****	MGD		Calc.	N/A
	PERMIT CONDITION	*****	*****	*****				*****	*****		*****		CONT
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Schneider	F. W.	V.P. - Production		78	02		
LAST	FIRST	MI	TITLE	YEAR	MO	DAY	

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
NO. 158-R0073

PUBLIC SERVICE ELEC & GAS SALE
80 PARK PLACE
NEWARK
NJ 07101

DELAWARE RIVER
LOWER ALLOWAYS CREEK
COOLING WATER

GP AT MI
17 2 I

INSTRUCTIONS

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3. Specify the number of analyzed samples that exceed the maximum (and/or minimum as appropriate) permit conditions in the columns labeled "No. Ex." If none, enter "0".
4. Specify frequency of analysis for each parameter as No. analyses/No. days. (e.g., "3/7" is equivalent to 3 analyses performed every 7 days.) If continuous enter "CONT."
5. Specify sample type ("grab" or "hr. composite") as applicable. If frequency was continuous, enter "NA".
6. Appropriate signature is required on bottom of this form.
7. Remove carbon and retain copy for your records.
8. Fold along dotted lines, staple and mail Original to office specified in permit.

12-M NJ ST	14-101 0005622 PERMIT NUMBER	117-101 481 DIS	4931 SIC	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM			TO		
120-211 7	122-211 8	124-211 0	126-211 1	128-211 0	130-211 1
YEAR	MO	DAY	YEAR	MO	DAY

PARAMETER		(3 card only)				UNITS	NO. EX	(4 card only)				NO. EX	FREQUENCY OF ANALYSIS	SAMPL TYPE
		MINIMUM	AVERAGE	MAXIMUM	UNITS			MINIMUM	AVERAGE	MAXIMUM	UNITS			
00010 2 TEMPERATURE, WATER DEG. CENTIGRADE INFLUENT	REPORTED	-.1	1.3	8.9	DEG.C		*****	*****	*****	DEG.C		CONT.	N/A	
	PERMIT CONDITION	*****	*****	*****										*****
00010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED	-.2	9.2	24.7	DEG.C		*****	*****	*****	DEG.C		CONT.	N/A	
	PERMIT CONDITION	*****	*****	46.00										*****
00016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED	.1	7.9	23.9	# DEG C	14	*****	*****	*****			CONT.	N/A	
	PERMIT CONDITION	*****	*****	15.30										*****
00400 1 PH EFFLUENT GROSS	REPORTED	6.82	7.07	7.20	SU		*****	*****	*****			2/7	GR.	
	PERMIT CONDITION	6.00	*****	9.00										*****
50050 1 FLOW EFFLUENT GROSS	REPORTED	.0	299.3	532.8	MGD		*****	*****	*****	MGD		CALC.	N/A	
	PERMIT CONDITION	*****	*****	*****										*****
	REPORTED				#									
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER			DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.				SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			
Schneider, F. W.		V.P.-Production			7 8 0 2 2 7									
LAST	FIRST	MI	TITLE			YEAR	MO	DAY	EPA Form 3320-1 (10-72)				PAGE	OF
			DIS 481 IS CONDENSER COOLING WATER. WHEN INTK PH LESS THAN 6.0, DIS PH NOT TO BE LESS. WHEN INTK PH GREATER THAN 9.0, DIS PH NOT TO EXCD INTK							ORIGINAL				

DISCHARGE MONITORING REPORT

PUBLIC SERVICE ELEC & GAS SALE
80 PARK PLACE
NEWARK
NJ 07101

DELAWARE RIVER
LOWER ALLCHWAYS CREEK
COOLING WATER


AT MI
17 2 I

INSTRUCTIONS

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5. Specify sample type ("grab" or "hr. composite") as applicable. If frequency was continuous, enter "NA".
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7. Remove carbon and retain copy for your records.
8. Fold along dotted lines, staple and mail Original to office specified in permit.

12-24 NJ ST	14-181 0005622 PERMIT NUMBER	117-101 482 DIS	4931 BIC	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM			TO		
120-211 7 8	122-211 0 1	124-211 0 1	126-271 7 8	128-291 0 1	130-311 3 1
YEAR MO DAY			YEAR MO DAY		

PARAMETER		(3 card only) QUANTITY				UNITS	NO. EX	(4 card only) CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
C0010 2 TEMPERATURE, WATER DEG. CENTIGRADE INFLUENT	REPORTED					DEG. C		*****	*****	*****	DEG. C			
	PERMIT CONDITION	*****	*****	*****	*****		*****	*****	CONT	*				
C0010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED					DEG. C		*****	*****	*****	DEG. C			
	PERMIT CONDITION	*****	*****	46.00	*****		*****	*****	CONT	*				
C0016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED					DEG. C		*****	*****	*****				
	PERMIT CONDITION	*****	*****	15.30	*****		*****	*****	*	*				
C0400 1 PH	REPORTED					SU		*****	*****	*****				
	PERMIT CONDITION	6.00	*****	9.00	*****		*****	*****	2/7	GR				
5C050 1 FLCW EFFLUENT GROSS	REPORTED					MGD		*****	*****	*****	MGD			
	PERMIT CONDITION	*****	*****	*****	*****		*****	*****	CONT	*				
	REPORTED	NO DISCHARGE OCCURRED DURING THIS REPORTING PERIOD.												
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE			I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
LAST	FIRST	MI	TITLE	YEAR	NO	DAY	YEAR	NO		
Schneider	F.	W.	V.P. - Production	78	02	27				

PUBLIC SERVICE ELEC & GAS SALE

80 PARK PLACE

NEWARK

NJ 07101

DELAWARE RIVER
LOWER ALLOWAYS CREEK
COOLING WATER

GP AT MI
17-2 I

INSTRUCTIONS

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5. Specify sample type ("grab" or "hr. composite") as applicable. If frequency was continuous, enter "NA".
6. Appropriate signature is required on bottom of this form.
7. Remove carbon and retain copy for your records.
8. Fold along dotted lines, staple and mail Original to office specified in permit.

12-28 NJ ST	14-101 0005622 PERMIT NUMBER	117-101 484 DIS	4931 SIC	LATITUDE	LONGITUDE
120-21) 122-22) 124-23) 7 18 01 0 1 YEAR MO DAY			126-27) 128-28) 130-29) 7 18 01 31 YEAR MO DAY		

REPORTING PERIOD: FROM

TO

102-071

104-001

100-701

PARAMETER		QUANTITY				UNITS	NO. EX	CONCENTRATION				UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM				MINIMUM	AVERAGE	MAXIMUM					
CC010 2 TEMPERATURE, WATER DEG. CENTIGRADE INFLUENT	REPORTED					DEG.C		*****	*****	*****					
	PERMIT CONDITION	*****	*****	*****				*****	*****	*****	DEG.C		CONT	*	
CC010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED					DEG.C		*****	*****	*****					
	PERMIT CONDITION	*****	*****	46.00				*****	*****	*****	DEG.C		CONT	*	
CC016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED					DEG C		*****	*****	*****					
	PERMIT CONDITION	*****	*****	15.30				*****	*****	*****			*	*	
C0400 1 PH	REPORTED					SU		*****	*****	*****					
	PERMIT CONDITION	6.00	*****	9.00				*****	*****	*****			2/7	GR	
5C050 1 FLOW	REPORTED					HGD		*****	*****	*****					
	PERMIT CONDITION	*****	*****	*****				*****	*****	*****	HGD		CONT	*	
REPORTED															
PERMIT CONDITION															
REPORTED															
PERMIT CONDITION															
REPORTED															
PERMIT CONDITION															
		NO DISCHARGE OCCURRED THIS REPORTING PERIOD.													

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE	
Schneider	F. W.	V.P. - Production		7 18	0 22 17
LAST	FIRST	MI	TITLE	YEAR	MO DAY

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

[Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

PUBLIC SERVICE ELEC & GAS SALE
 80 PARK PLACE
 NEWARK
 NJ 07101

DELAWARE RIVER
 LOWER ALLWAYS CREEK
 COOLING WATER

GP AT HI
 17-2-1

INSTRUCTIONS

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5. Specify sample type ("grab" or "hr. composite") as applicable. If frequency was continuous, enter "NA".
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7. Remove carbon and retain copy for your records.
8. Fold along dotted lines, staple and mail Original to office specified in permit.

12-20 NJ ST	14-10 0005622 PERMIT NUMBER	117-10 483 DIS	4931 SIC	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM		120-01 78	122-20 01	124-20 01	TO
		YEAR	MO	DAY	
		100-27 7	100-20 8	100-21 28	
		YEAR	MO	DAY	

PARAMETER		QUANTITY				UNITS	NO. EX	CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
CC010 2 TEMPERATURE, WATER DEG. CENTIGRADE INFLUENT	REPORTED							*	*	*	*			
	PERMIT CONDITION	*	*	*	*	DEG.C		*	*	*	*	DEG.C		CONT
CC010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED							*	*	*	*			
	PERMIT CONDITION	*	*	*	46.00	DEG.C		*	*	*	*	DEG.C		CONT
CC016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED							*	*	*	*			
	PERMIT CONDITION	*	*	*	15.30	DEG C		*	*	*	*			*
CG400 1 PH	REPORTED							*	*	*	*			
	PERMIT CONDITION	6.00	*	*	9.00	SU		*	*	*	*			2/7
5C050 1 FLOW	REPORTED							*	*	*	*			
	PERMIT CONDITION	*	*	*	*	MGD		*	*	*	*	MGD		CONT
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION	NO DISCHARGE OCCURRED THIS REPORTING PERIOD.												
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE		I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
Schneider, F.	W.	V.P.-Production	7	8	02/27		
LAST	FIRST	MI	TITLE	YEAR	MO	DAY	

403 IS CONDENSER COOLING WATER. WHEN INTK PH LESS THAN 6.0, DIS PH NOT TO BE LESS. WHEN INTK PH GREAT PH NOT TO EXCD INTK

PUBLIC SERVICE ELEC & GAS SALES
80 PARK PLACE
NEWARK
NJ 07101

DELAWARE RIVER
LOWER ALLOWAYS CREEK
COOLING WATER

GP AT MI
17 2 1

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7. Remove carbon and retain copy for your records.
8. Fold along dotted lines, staple and mail Original to office specified in permit.

(12-2) NJ ST	(4-18) 0005622 PERMIT NUMBER	(117-19) 485 DIS	4931 BIC	LATITUDE	LONGITUDE			
REPORTING PERIOD: FROM		(20-21) 78	(22-23) 01	(24-25) 01	TO	(26-27) 78	(28-29) 01	(30-31) 31
		YEAR	NO	DAY		YEAR	NO	DAY

PARAMETER		QUANTITY				UNITS	NO. EX	CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
00010 2 TEMPERATURE, WATER CEG. CENTIGRADE INFLUENT	REPORTED	.2	1.3	3.9	DEG.C		*****	*****	*****	DEG.C		CONT.	N/A	
	PERMIT CONDITION	*****	*****	*****			*****	*****	*****			*****	CONT	*
00010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED	.3	9.3	26.8	DEG.C		*****	*****	*****	DEG.C		CONT.	N/A	
	PERMIT CONDITION	*****	*****	46.00			*****	*****	*****			*****	CONT	*
00016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED	.1	8.0	23.1	# DEG C	14	*****	*****	*****			CONT.	N/A	
	PERMIT CONDITION	*****	*****	15.30			*****	*****	*****			*	*	
00400 1 PH	REPORTED	6.82	7.07	7.20	SU		*****	*****	*****			2/7	GR.	
	PERMIT CONDITION	6.00	*****	9.00			*****	*****	*****			2/7	GR	
50050 1 FLCW	REPORTED	.0	304.0	532.8	MGD		*****	*****	*****	MGD		CALC.	N/A	
	PERMIT CONDITION	*****	*****	*****			*****	*****	*****			CONT	*	
	REPORTED				#		CONDENSER DISCHARGE THERMAL MONITORING DEVICE					INDICATES HIGHER THAN ACTUAL CONDENSER DISCHARGE		
	PERMIT CONDITION						TEMPERATURES. DESIGN CHANGE IN PROGRESS TO RELOCATE					DISCHARGE THERMAL MONITORING DEVICE AND CORRECT		
	REPORTED				#		DISCHARGE THERMAL MONITORING DEVICE AND CORRECT					PROBLEM.		
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
Schneider F. W.	V.P. - Production	7 8 0 2 27
LAST FIRST MI	TITLE	YEAR NO DAY

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

[Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

PUBLIC SERVICE ELEC & GAS SALE
80 PARK PLACE
NEWARK
NJ 07101

DELAWARE RIVER
LOWER ALLOWAYS CREEK
COOLING WATER

GP AT MI
17 2 1

INSTRUCTIONS

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12-31 NJ ST	14-101 0005622 PERMIT NUMBER	117-101 486 DIS	4931 SIC	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM		7 8 0 1 0 1 YEAR MO DAY	TO	7 8 0 1 3 1 YEAR MO DAY	

PARAMETER		(3 card only) QUANTITY				UNITS	NO. EX	(4 card only) CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
C0010 2 TEMPERATURE, WATER DEG. CENTIGRADE INFLUENT	REPORTED	.4	1.3	10.3	DEG. C		*****	*****	*****	DEG. C		CONT.	N/A	
	PERMIT CONDITION	*****	*****	*****			*****	*****	*****			CONT.	*	
C0010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED	0	8.3	23.1	DEG. C		*****	*****	*****	DEG. C		CONT.	N/A	
	PERMIT CONDITION	*****	*****	46.00			*****	*****	*****			CONT.	*	
C0016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED	0	7.0	19.9	# DEG C	15	*****	*****	*****			CONT.	N/A	
	PERMIT CONDITION	*****	*****	15.30			*****	*****	*****			*	*	
C0400 1 PH EFFLUENT GROSS	REPORTED	6.32	7.07	7.20	SU		*****	*****	*****			2/7	GR.	
	PERMIT CONDITION	6.00	*****	9.00			*****	*****	*****			2/7	GR	
50050 1 FLCW EFFLUENT GROSS	REPORTED	0	342.0	532.8	MGD		*****	*****	*****	MGD		CALC.	N/A	
	PERMIT CONDITION	*****	*****	*****			*****	*****	*****			CONT.		
	REPORTED				#									
	PERMIT CONDITION				#									
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

Condenser discharge thermal monitoring device indicates higher than actual condenser discharge temperatures. Design charge in progress to relocate discharge thermal monitoring device and correct problem.

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE		
Schneider, F.	W.		V.P. - Production			7	8	0 2 27
LAST	FIRST	MI	TITLE	YEAR	MO	DAY		

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

[Signature]
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

DISCHARGE MONITORING REPORT

DELAWARE RIVER
LOWER ALLWAYS CREEK

INSTRUCTIONS

1. Provide dates for period covered by this report in spaces under "REPORTING PERIOD".
2. Enter reported minimum, average and maximum values under "QUANTITY" and "CONCENTRATION". In the units specified for each parameter as appropriate. Do not enter values in units other than those indicated in "AVERAGE" in average computed over actual time intervals in operating "MAXIMUM" and "MINIMUM" are values observed during the reporting period.
3. Specify the nature of analyses that exceed the maximum limit, or minimum as appropriate.
4. Specify conditions in the columns headed "No. Ex." If entry, enter "0".
5. Specify frequency of analysis for each parameter as No. analyses/No. days (e.g., "3/7" to signify "1 analysis performed every 7 days") if continuous enter "CONT".
6. Specify sample type ("grab" or "in composite") as applicable. If frequency was continuous, enter "N/A".
7. Appropriate signature is required on bottom of this form.
8. Remove carbon and retain copy for your records.
9. Fold along dotted lines, staple and mail Original to office specified in permit.

PERMIT NUMBER: 0005622

DIST: 678

SIC: 4931

LATITUDE: _____
LONGITUDE: _____

REPORTING PERIOD: FROM
YEAR: 78 MONTH: 01 DAY: 1

TO
YEAR: 78 MONTH: 01 DAY: 31

PARAMETER	QUANTITY			CONCENTRATION			NO. EX.	UNITS	MAXIMUM	AVERAGE	MINIMUM	EXC	FREQ	ANALYSIS	SAMP. TYPE
	MINIMUM	AVERAGE	MAXIMUM	MINIMUM	AVERAGE	MAXIMUM									
COAG. 1	APPROVED	.029	.080	.104	4.4	9.2	12	GR.	1/7	GR.					
COAG. 2	APPROVED	.54	.67	.73	62	76.4	84	KG/DAY	3/30	3	24 HR. COMP.				
SOLIDS, TOTAL	APPROVED	0	0	0	0	0	0	KG/DAY	1/30	24					
FLOATING SOLIDS	APPROVED	0	0	0	0	0	0	KG/DAY	5/7	N/A					
EFFLUENT GROSS	PERMIT	0	0	0	0	0	0	KG/DAY	1/30	24					
SUSPENDED	PERMIT	0	0	0	0	0	0	KG/DAY	1/30	24					
EFFLUENT GROSS	PERMIT	6.0X10 ⁻⁴	2.3X10 ⁻³	8.1X10 ⁻²	0	0	0	KG/DAY	3/30	30 DAY COMP.					
FLCH	APPROVED	0	0	0	0	0	0	KG/DAY	3/30	30 DAY COMP.					
EFFLUENT GROSS	PERMIT	0	0	0	0	0	0	HGD	1/7	GR.					
74055 1	APPROVED	0	0	0	0	0	0	HGD	1/7	GR.					
COLLIFORM-FECAL	APPROVED	0	0	0	< 2.2	< 2.2	< 2.2	N/100ML	1/30	GR.					
EFFLUENT GROSS	PERMIT	0	0	0	0	0	0	KG/DAY	1/30	GR.					

NAME OF PRINCIPAL EXECUTIVE OFFICER: _____
TITLE OF THE OFFICER: _____
DATE: _____
V.P. - Production: _____
Schneider, F. W.

I certify that I am familiar with the information contained in this report and that to the best of my knowledge and belief such information is true, complete, and accurate.

SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER: _____
OFFICE ON 11-20-78 11:23 AM



Public Service Electric and Gas Company Salem Nuclear Generating Station
P.O. Box #168 Hancocks Bridge, New Jersey 08038

February 13, 1978

Director, Division of Water Resources
N. J. Department of Environmental Protection
P. O. Box 2809
Trenton, New Jersey 08625

Attention: Delaware Basin

Dear Sir:

Attached is the Operating Report for the month of January, 1978
for the Industrial Waste Treatment Plant for Salem Generating
Station.

Very truly yours,

A handwritten signature in cursive script, appearing to read "H. J. Heller", written in dark ink.

H. J. Heller
Manager - Salem Generating Station

JMZ:jcm

15.5.18. R-1

**MONTHLY OPERATING REPORT OF INDUSTRIAL WASTE TREATMENT PLANT
PUBLIC SERVICE ELECTRIC AND GAS COMPANY**

Salem
Hancocks Bridge
FOR JANUARY

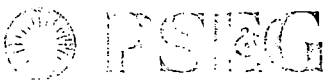
GENERATING STATION
NEW JERSEY
19 78

HACKENSACK RIVER
 DELAWARE RIVER
 INTERSTATE SANITATION COMMISSION

DAY OF MONTH	DISCH. BEFORE MIX.			WASTE STREAM BEFORE MIXING					Discharged By Dow Industrial Svc.			CLARIFIER OPERATION			
	FLOW - GAL x 10 ⁶	TEMP. - °F	PH	FLOW -	TEMP. - °F	PH	ACID WASTE LBS x 1000	ALKALINE WASTE LBS x 1000	HOURS OF OPERATION	FLOW - GAL x 10 ⁶	TEMP. - °F	PH	ALUM USED LBS x 1000	COAGULANT USED LBS	SLUDGE REMOVED CU FT x 10
1															
2									288						
3				12.8	95				220	95					
4				217.6	90				54	90					
5				343.7	95				114	95					
6				109.2	95				234	95					
7				333.6	90				129	90					
8				246.3	110										
9				211.7	105				126	105					
0				148.3	75										
1				130.2	60										
2				42.4	80										
3				138.3	90										
4				306.7	90										
5				57.2	108										
6				55.0	108										
7				271.1	110										
8				140.8	107				216	107					
9				277.6	87				198	87					
0				360.0	87				246	87					
1				197.0	90				278	90					
2				413.2	95				288	95					
3				195.0	90										
4				669.6	100										
5				276.8	105										
6				241.0	105				252	105					
7															
8									297						
9															
0									126						
1				241.0	105				84	105					
VG.				181.8					101.6						
BYPASS OPERATION															
VG.															

REMARKS All Waste automatically discharged between 6.0-9.0 pH. Average is
for 31 days whether discharge occurred or not.

Signature of Licensee *Jim Lushko Jr* Title Performance Engineer
Manager *W. J. Keller*



Public Service Electric and Gas Company Salem Nuclear Generating Station
P.O. Box #168 Hancocks Bridge, New Jersey 08038

February 9, 1978

Director, Division of Water Resources
N.J. Department of Environmental Protection
P.O. Box 2809
Trenton, New Jersey 08625

Attention: Delaware Basin

Dear Sir:

Attached is the Wastewater Treatment Report for the
month of January, 1978 for the Sewage Treatment Plant
at the Salem Generating Station.

Very truly yours,

A handwritten signature in cursive script, appearing to read "H. J. Heller", is written over the typed name.

H. J. Heller
Manager - Salem Generating Station

JMZ:edl
16.5.18.R1

NEW JERSEY STATE DEPARTMENT OF ENVIRONMENTAL PROTECTION
DIVISION OF WATER RESOURCES
BUREAU OF WATER POLLUTION CONTROL
WASTEWATER TREATMENT REPORT

DELAWARE

County: Salem
Municipality: Lower Alloways Creek
Township

Name of Utility: PSE&G-Salem Generating Station

Design Flow: 12,500 GPD
Plant Phone: (609) 365-7000
Month: July 1971

Day of the month	1	2	3	4	5	6	7	8	9	10	11	12	13	14	15	16	17	18	19	20	21	22	23	24	25	26	27	28	29	30	31	Avg.
Receiving Watercourse	7776 typical value based on drainage area and average rainfall																															
Upstream from Effluent MGD	7776 typical value based on drainage area and average rainfall																															
Plant Effluent Flow for 24-hr Period 1000 G/D	.6	.6	4.2	2.6	.6	7.8	.6	.6	.6	3.6	.6	.6	2.6	.6	.6	.6	3.6	2.6	9.8	9.8	.6	.6	2.6	3.6	3.6	.6	.6	.6	.6	.6	.6	2.3
Plant Effluent Flow Maximum Rate 1000 G/D	.6	.6	9.8	3.6	.6	9.8	.6	.6	3.6	2.0	.6	.6	8.1	2.6	.6	.6	1.7	3.6	3.6	9.8	9.8	.6	.6	9.8	3.6	3.6	.6	1.7	1.7	.6	.6	6.1
Chlorine	immediate		.5	.2	.1	2.2			.5	1.9	.5	2.3	2.5			1.0	2.3	1.7	2.7	.4			.2	2.3	1.6	.4	.4				.6	
	developed		3	1.5	.5	2.3			2	2.2	1	2.3	2.3			2.3	2.3	2.3	2.3	2.7	4.7			2.4	2.3	2.3	2.3	2.3			1.5	
Sludge Removed from Plant (Gals., lbs., ft ³)												2500																				
Settleable Solids Final Effluent mg/l			<.1	<.1	<.1	<.1				<.1	<.1	<.1	<.1	<.1			<.1	<.1	<.1	<.1	<.1			<.1	<.1	<.1	<.1	<.1			<.1	
Suspended Solids Final Effluent mg/l													8.33				8.4														6.2	
B.O.D. Final Effluent mg/l			9							4.4							11.5							12.0							15.0	
Other Laboratory Tests Performed	Diss. O ₂		5.7	2.0	4.7	3.5			3.9	6.2	2.0	2.5	2.5			6.3		5.7	8.6	6.8						5.1	4.7			3.6		
	COD		107.6							21.6							157.6							21.9							10.0	
	Fecal Coliform		42							42							42								42						42	
pH			6.4	6.5	6.8	6.8			5.9	6.6	6.7	6.7	6.8			6.5	6.5	6.4	6.4	6.3			6.2	6.5	6.4	6.7	6.4			6.3		
	Temp. (°C)		8	8	8	9			10	10	11	9	9			7	11	8	8	8			8	8	9	10	8			8		
Mrs. Attend. at Plant	Lic. Op.			7						7				2								3	4					7				
	Other		8	8	8	8			8	8	8	8	8			8	8	8	8	8			8	8	8	8	8			8		

Note every instance of temporary bypassing of any units or interruption of disinfection and reason.

Dates when outfall was dye tested and results

Remarks:

Plant not equipped with totalizing meter-effluent flow based on best estimate available.

Dissolved Oxygen meter was not working on 11, 23, 24 and 25.

Number of Connections and flow at end of month	Residential _____
	Apartments _____
	Commercial _____
	Industrial _____

Licensed Operator: K. L. Roman Grade: S-2
Registry Number: S-3697

I hereby certify the above to be correct to the best of my knowledge.
Signed: [Signature] Title: SUPV IN CHARGE

This report is to be forwarded on or before the 10th of the month following that for which the report is made out, to the NEW JERSEY STATE DEPARTMENT OF ENVIRONMENTAL PROTECTION, Bureau of Water Pollution Control, P.O. Box 1390, Trenton, NJ 0862