



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

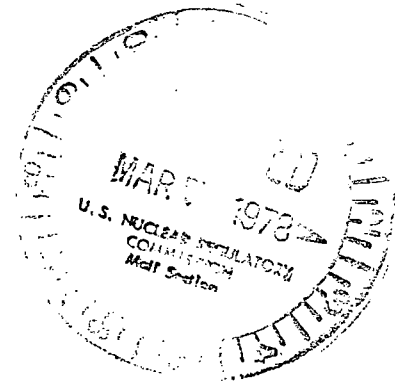
REGULATORY DOCKET FILE COPY

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

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1/1

The Energy People

780670019



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,

A handwritten signature in cursive script, appearing to read "H. J. Heller", is written over a horizontal line.

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

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 columns labeled "No. Ex." If none, enter "0".
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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.

12-20 NJ ST 14-141 0005622 F 117-191 FAC DIS 4931 SIC 120-211 78 122-219 01 124-241 01 REPORTING PERIOD: FROM 120-371 78 126-291 01 130-311 31 TO

LATITUDE LONGITUDE

PARAMETER		QUANTITY				UNITS	NO. EX	CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM				MINIMUM	AVERAGE	MAXIMUM				
00017 4 HEAT MILLIONS OF BTU'S PER DAY HR EFFLUENT NET 50050 1 FLOW	REPORTED	0	7900	13,300	MBTUHR MFTUHR		*	*	*	*	MKCLOY		Calc.	N/A
	PERMIT CONDITION	*	*	*			*	*	*	*			*	*
EFFLUENT GROSS	REPORTED	0	315.1	1598.4	MGD		*	*	*	*	MGD		Calc.	N/A
	PERMIT CONDITION	*	*	*			*	*	*	*			*	*
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER: Schneider F. W. TITLE OF THE OFFICER: V.P. - Production DATE: 78 02 27

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

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

DELAWARE RIVER
LOWER ALLOWAYS CREEK
COOLING WATER

GP AT HI
17 2 1

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12-21 NJ ST	14-101 0005622 PERMIT NUMBER	117-101 481 DIS	4931 SIC	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM			TO		
130-211 7	132-211 8	134-211 0	130-211 7	132-211 8	134-211 3
YEAR	MO	DAY	YEAR	MO	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 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	REPORTED	6.82	7.07	7.20	SU		***	***	***			2/7	GR.
	PERMIT CONDITION	6.00	***	9.00			***	***	***				
50050 1 EFFLUENT GROSS FLOW	REPORTED	.0	299.3	532.8	MGD		***	***	***	MGD		CALC.	N/A
	PERMIT CONDITION	***	***	***			***	***	***				
	REPORTED				#								
	PERMIT CONDITION												
	REPORTED						CONDENSER DISCHARGE THERMAL MONITORING DEVICE						
	PERMIT CONDITION						INDICATES HIGHER THAN ACTUAL CONDENSER DISCHARGE						
	REPORTED						TEMPERATURES. DESIGN CHANGE IN PROGRESS TO RELOCATE						
	PERMIT CONDITION						DISCHARGE THERMAL MONITORING DEVICE AND CORRECT						
	REPORTED						PROBLEM.						
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE		
Schneider, F. W.			V.P.-Production			7 8 0 2 2 7		
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 ALLCHAYS CREEK
 COOLING WATER

P AT MI
 17 2 1

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5. Specify sample type ("grab" or "hr. composite") as applicable. If frequency was continuous, enter "NA".
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12-22 NJ ST	14-101 0005672 PERMIT NUMBER	117-101 482 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			DAY		
120-221 7	122-221 8	124-221 0	126-221 1	128-221 3	130-221 1
YEAR			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					DEG. C		*	*	*	*	DEG. C			
	PERMIT CONDITION	*	*	*	*			*	*	*	*				
CC010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED					DEG. C		*	*	*	*	DEG. C			
	PERMIT CONDITION	*	*	*	*			46.00	*	*	*				
CC016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED					DEG. C		*	*	*	*				
	PERMIT CONDITION	*	*	*	*			15.30	*	*	*				
C04C0 1 PH	REPORTED					SU		*	*	*	*				
	PERMIT CONDITION	6.00	*	*	*			9.00	*	*	*				
5C050 1 FLCW	REPORTED					MGD		*	*	*	*	MGD			
	PERMIT CONDITION	*	*	*	*			*	*	*	*				
	REPORTED	NO DISCHARGE OCCURRED DURING THIS REPORTING PERIOD.													
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER Schneider F. W.			TITLE OF THE OFFICER V.P. - Production			DATE 78 0 2 2 7			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	MO	DAY	YEAR	MO		

PUBLIC SERVICE ELECTRIC & GAS SALES

80 PARK PLACE

NEWARK

NJ 07101

DELAWARE RIVER
LOWER ALLOWAYS CREEK
COOLING WATER

GP AT MI
17 2 1

INSTRUCTIONS

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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.

1A-20
NJ
ST

14-101
0005622
PERMIT NUMBER

117-101
484
DIS

4931
SIC

LATITUDE
LONGITUDE

REPORTING PERIOD: FROM

120-210 122-20 124-20
7 8 01 0 1
YEAR MO DAY

TO

125-271 127-201 129-211
7 8 01 1 31
YEAR MO DAY

122-271

124-201

128-201

PARAMETER		QUANTITY				UNITS	NO. EX.	CONCENTRATION			UNITS	NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		(3 card only)			UNITS			(4 card only)							UNITS
		MINIMUM	AVERAGE	MAXIMUM				MINIMUM	AVERAGE	MAXIMUM					
CC010 2 TEMPERATURE, WATER DEG. CENTIGRADE INFLUENT	REPORTED	1					*	*	*	*					
	PERMIT CONDITION	*	*	*	*	DEG. C	*	*	*	*			CONT	*	
CC310 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED						*	*	*	*					
	PERMIT CONDITION	*	*	*	*	DEG. C	*	*	*	*			CONT	*	
CC016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED						*	*	*	*					
	PERMIT CONDITION	*	*	*	*	DEG. C	*	*	*	*			*	*	
C0400 1 PH	REPORTED						*	*	*	*					
	PERMIT CONDITION	6.00	*	*	*	SU	*	*	*	*			2/7	GR	
5C050 1 FLOW	REPORTED						*	*	*	*					
	PERMIT CONDITION	*	*	*	*	MGD	*	*	*	*			CONT	*	
	REPORTED														
	PERMIT CONDITION	NO DISCHARGE OCCURRED THIS REPORTING PERIOD.													
	REPORTED														
	PERMIT CONDITION														

NAME OF PRINCIPAL EXECUTIVE OFFICER: Schneider F. W.
 TITLE OF THE OFFICER: V.P. - Production
 DATE: 7 8 01 22 17
 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 OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT: *N. J. ...*

484 IS CONDENSER COOLING WATER WHEN INTRK PH LES THAN 9.0 IS PH NOT TO EXCD INTRK
 PH 6.0, DIS PH NOT TO BE LESS. WHEN INTRK PH GREAT OF ORIGINAL

80 PARK PLACE

NEWARK

NJ 07101

DELAWARE RIVER
LOWER ALLWAYS CREEK
COOLING WATER

GP AT MI
17 2 1

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12-14 NJ ST	14-19 0005622 PERMIT NUMBER	117-181 483 DIS	4931 SIG	LATITUDE	LONGITUDE
122-211 123-211 124-211 REPORTING PERIOD: FROM		78 01 01 YEAR MO DAY	TO	125-211 126-211 127-211 718 01 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	1				DEG.C		* * * *	* * * *	* * * *				
	PERMIT CONDITION	* * * *	* * * *	* * * *				* * * *	* * * *	* * * *			CONT	*
CC010 1 TEMPERATURE, WATER DEG. CENTIGRADE EFFLUENT GROSS	REPORTED					DEG.C		* * * *	* * * *	* * * *				
	PERMIT CONDITION	* * * *	* * * *	46.00				* * * *	* * * *	* * * *			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
30050 1 FLOW EFFLUENT GROSS	REPORTED					HGD		* * * *	* * * *	* * * *				
	PERMIT CONDITION	* * * *	* * * *	* * * *				* * * *	* * * *	* * * *			CONT	*
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION	NO DISCHARGE OCCURRED THIS REPORTING PERIOD.												

NAME OF PRINCIPAL EXECUTIVE OFFICER Schneider, F. W.	TITLE OF THE OFFICER V.P.-Production	DATE 718 01 21 7 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 OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT
---	---	------------------------------------	--	--

PA Form 3320-1 (10-7) 403 IS CONDENSER COOLING WATER WHEN INTK PH LESS THAN 9.0, PH NOT TO EXCD INTK IN 6.0, DIS PH NOT TO BE LESS. WHEN INTK PH GREAT ORIGINAL

PUBLIC SERVICE ELEC & GAS SALE
80 PARK PLACE
NEWARK

DELAWARE RIVER
LOWER ALLOWAYS CREEK
COOLING WATER

GP AT MI
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13-14 NJ ST	14-19 0005622 PERMIT NUMBER	117-101 405 DIS	4931 SIC	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM		120-211 7 8	122-211 0 1	124-211 0 1	TO
		120-211 YEAR	122-211 MO	124-211 DAY	120-211 7 8
		120-211 YEAR	122-211 MO	124-211 DAY	120-211 7 8

PARAMETER		QUANTITY				UNITS	NO. EX	CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SA TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
00010 2 TEMPERATURE, WATER DEG. CENTIGRADE INFLUENT	REPORTED	.2	1.3	3.9	DEG. C	14	*****	*****	*****	DEG. C		CONT.	N/A	
	PERMIT CONDITION	*****	*****	*****			*****	*****	*****					*****
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			*****	*****	*****					*****
00016 4 TEMPERATURE DIFFERENCE EFFLUENT NET	REPORTED	.1	8.0	23.1	# DEG C		*****	*****	*****			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			*****	*****	*****					*****
50050 1 FLCW	REPORTED	.0	304.0	532.8	MGD		*****	*****	*****	MGD		CALC.	N/A	
	PERMIT CONDITION	*****	*****	*****			*****	*****	*****					*****
	REPORTED				#		CONDENSER DISCHARGE THERMAL MONITORING DEVICE							
	PERMIT CONDITION						INDICATES HIGHER THAN ACTUAL CONDENSER DISCHARGE							
	REPORTED				#		TEMPERATURES. DESIGN CHANGE IN PROGRESS TO RELOCATE							
	PERMIT CONDITION						DISCHARGE THERMAL MONITORING DEVICE AND CORRECT							
	REPORTED				#		PROBLEM.							
	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 1 2 27				
LAST	FIRST	MI	TITLE	YEAR	NO	DAY				

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

DELAWARE RIVER
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12-21 NJ ST	14-101 0005622 PERMIT NUMBER	117-101 486 DIS	4931 SIG	LATITUDE	LONGITUDE
REPORTING PERIOD: FROM			TO		
120-211	120-211	120-211	120-211	120-211	120-211
7	8	0	1	0	1
YEAR	MO	DAY	YEAR	MO	DAY

PARAMETER		(3 card only) QUANTITY				UNITS	NO. EX	(4 card only) CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		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	* * * *	* * * *	* * * *									* * * *	* * * *
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									* * * *	* * * *
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	REPORTED	6.32	7.07	7.20	SU			* * * *	* * * *	* * * *			2/7	GR.
	PERMIT CONDITION	6.00	* * * *	9.00									* * * *	* * * *
5C050 1 FLOW EFFLUENT GROSS	REPORTED	0	342.0	532.8	MGD			* * * *	* * * *	* * * *	MGD		CALC.	N/A
	PERMIT CONDITION	* * * *	* * * *	* * * *									* * * *	* * * *
	REPORTED				#								Condenser discharge thermal monitoring device	
	PERMIT CONDITION												indicates higher than actual condenser discharge	
	REPORTED				#								temperatures. Design change in progress to relocate	
	PERMIT CONDITION												discharge thermal monitoring device and correct	
	REPORTED				#								problem.	
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER			TITLE OF THE OFFICER			DATE		
Schneider, F.	W.		V.P. - Production			7	8	02 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

PUBLIC SERVICE ELEC & GAS SALE

80 PARK PLACE

NEWARK

NJ 07101

DELAWARE RIVER
LOWER ALLOWAYS CREEK

INSTRUCTIONS

1. Provide dates 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 bases other than metric. "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) special 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.

0005622
PERMIT NUMBER

878
DIS

4931
SIG

LATITUDE
LONGITUDE

7 | 8 | 0 | 1 | 0 | 1
YEAR MO DAY

7 | 8 | 0 | 1 | 3 | 1
YEAR MO DAY

REPORTING PERIOD: FROM

TO

PARAMETER	REPORTED	QUANTITY				UNITS	NO. EX	CONCENTRATION			UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
50310 1 BOD, 5-DAY, 20 DEG. C. EFFLUENT GROSS	REPORTED	.029	.080	.104	KG/DAY	0	4.4	9.2	12	MG/L	0	1/7	GR.	
PERMIT CONDITION	*****	*****	*****	*****			*****	30.	45.			3/30	GR	
03511 1 SOLIDS, TOTAL SUSPENDED EFFLUENT GROSS	REPORTED	.54	.67	.73	KG/DAY	0	62	76.4	84	MG/L	3	3/30	24 HR. COM	
PERMIT CONDITION	*****	*****	*****	*****			*****	30.	45.			1/30	24	
11117 1 FLOATING SOLIDS EFFLUENT GROSS	REPORTED	0	0	0	VIS	0	*****	*****	*****	*****	*****	5/7	N/A	
PERMIT CONDITION	0	0	0	*****			*****	*****	*****			EXCP	*	
50310 1 FLGH EFFLUENT GROSS	REPORTED	6.0x10 ⁻⁴	2.3x10 ⁻³	8.1x10 ⁻²	HGD	0	*****	*****	*****	HGD	0	30/30	30 DAY CO	
PERMIT CONDITION	*****	*****	*****	*****			*****	*****	*****			*	*	
74055 1 CALIFORN-FECAL EFFLUENT GROSS	REPORTED	*****	*****	*****	N/100HL	0	< 2.2	< 2.2	< 2.2	*****	0	1/7	G	
PERMIT CONDITION	*****	*****	*****	*****			*****	200.	400.			1/30	GR	
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER: Schneider, F. W.
TITLE OF THE OFFICER: V.P. - Production
DATE: 7 | 8 | 0 | 2 | 2 | 7

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: *[Signature]*



Public Service Electric and Gas Company Salem Nuclear Generating Station
P.O. Box #168 Hancock's 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 dark ink, appearing to read "H. J. Heller", written in a cursive style.

H. J. Heller
Manager - Salem Generating Station

JMZ:jcm

15.5.18. R-1

PUBLIC SERVICE ELECTRIC AND GAS COMPANY

Salem
Hancocks Bridge
 FOR JANUARY

GENERATING STATION
 NEW JERSEY
 19 78

- HACKENSACK RIVER
 DELAWARE RIVER
 INTERSTATE SANITATION COMMISSION

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	TEMP. - °F	PH	ALUM USED LBS x 1000	COAGULANT USED LBS	SLUDGE REMOVED CU FT x 10
									288					
			12.8	95					220	95				
			217.6	90					54	90				
			343.7	95					114	95				
			109.2	95					234	95				
			333.6	90					129	90				
			246.3	110										
			211.7	105					126	105				
			148.3	75										
			130.2	60										
			42.4	80										
			138.3	90										
			306.7	90										
			57.2	108										
			55.0	108										
			271.1	110										
			140.8	107					216	107				
			277.6	87					198	87				
			360.0	87					246	87				
			197.0	90					278	90				
			413.2	95					288	95				
			195.0	90										
			669.6	100										
			276.8	105										
			241.0	105					252	105				
									297					
									126					
			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 *James P. ...* Title Performance Engineer
 Manager *W. J. Keller*

Public Service Electric and Gas Company Salem Nuclear Generating Station
P.O. Box #168 Harcocks 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,



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

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

Name of Utility: PSE&G-Salem Generating Station

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	6.2	3.6	.6	7.8	.6	.6	.6	3.6	.6	.6	2.6	.6	.6	.6	3.6	3.6	7.8	7.8	.6	.6	3.6	3.6	3.6	3.6	.6	.6	.6	.6	.6	2.3	
Plant Effluent Flow Maximum Rate 1000 G/D	.6	.6	7.8	3.6	.6	7.8	.6	.6	3.6	2.0	.6	.6	8.1	1.6	.6	.6	6.5	3.6	3.6	7.8	7.8	.6	.6	7.8	3.6	3.6	.6	1.7	1.7	.6	.6	6.1	
Chlorine	immediate		.5	.3	.1	2.2			.5	1.9	.5	>3	2.5			1.0	>3	1.7	2.4	.4			.3	2.3	1.6	.4	.4						
	Residual mg/l developed		3	1.5	.5	>3			2	>3	1	>3	>3			>3	>3	>3	>3	1.5			2.4	>3	>3	2.3	>3					1.5	
Sludge Removed from Plant (Gals., lbs., ft ³)												350																					
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												83.3					84															6.2	
Final Effluent mg/l																																	
B.O.D. Final Effluent mg/l			9							4.4							11.5							12.0								15.0	
Other Laboratory Tests Performed	Diss. O		5.7	3.0	4.7	3.5			3.9	6.2	2.0	2.5	2.5			6.3		5.7	8.6	6.8						5.1	4.9				3.6		
	COD		10.6							31.6							12.1							2.4								10.0	
pH	Fecal Coliform		42						22								42							42								42	
	Temp. (°C)		6.4	6.5	6.8	6.8			5.9	6.2	6.7	6.7	6.8			6.5	6.5	6.4	6.4	6.3			6.2	6.5	6.4	6.9	6.7				6.7		
Hrs. Attended at Plant	Lic. Op.				7					7					2							7		7									
Other			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, 22, 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 086