

D 05/16/78

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ORG: WILLIAMS D H
AR PWR & LIGHT

DOC DATE: 05/02/78
DATE RCVD: 05/16/78

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SUBJECT: LTR 1 ENCL 1
FORWARDING SUBJECT FACILITY'S FIRST QUARTER, 1978, NATIONAL POLLUTANT
DISCHARGE ELIMINATION SYSTEM REPT FOR NPDES PERMIT NO ARO001392.

PLANT NAME: ARKANSAS - UNIT 1

REVIEWER INITIAL: XJM
DISTRIBUTOR INITIAL: *W*

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ANNUAL ENVIRONMENTAL RPTS (OL STAGE).
(DISTRIBUTION CODE A007)

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KASTNER**W/ENCL

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HELPING BUILD ARKANSAS

ARKANSAS POWER & LIGHT COMPANY

PO BOX 551 LITTLE ROCK, ARKANSAS 72203 • (501) 371-4000

May 2, 1978

REC'D MAY 16 11 10 51

RECEIVED DISTRIBUTION
GENERAL INVESTMENT

1-058-3

Mr. E. Morris Howard, Director
Office of Inspection & Enforcement
Region IV
U. S. Nuclear Regulatory Commission
611 Ryan Plaza Drive, Suite 1000
Arlington, Texas 76011

Subject: Arkansas Nuclear One - Unit 1
Docket No. 50-313
License No. DPR-51
NPDES Report
(File: 0900, 0485)

Gentlemen:

Per Technical Specification 5.6.2.c, we have attached the First Quarter, 1978, National Pollutant Discharge Elimination System Report for NPDES Permit No. AR0001392.

Very truly yours,

Donald H. Williams
for Daniel H. Williams
Manager, Licensing

DHW:REI:ce

Attachment

cc: Director of Nuclear Reactor Regulation
ATTN: Mr. D. K. Davis, Acting Chief
Operating Reactors Branch #2
U. S. Nuclear Regulatory Commission
Washington, D. C. 20555

~~701350114~~

A007
5/11



NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-00073

ARKANSAS POWER & LIGHT CO
Mr. William Cavanaugh, III
Executive Director of
Generation & Construction
P. O. Box 551
Little Rock, Arkansas 72203

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 boxes containing asterisks. "AVERAGE" is average computed over actual time discharge is operating. "MAXIMUM" and "MINIMUM" are extreme values observed during the reporting period.
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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.

12-18 AR ST	14-19 AR0001392 PERMIT NUMBER	117-191 001 DIS	SIC	135-211 138-291 35° 18' 36" N LATITUDE	130-271 138-291 130-271 92° 13' 53" W LONGITUDE
120-271 122-279 124-281 REPORTING PERIOD: FROM 7 8 0 1 0 1 YEAR MO DAY		XNY THRU		120-271 122-279 124-281 7 8 0 1 3 1 YEAR MO DAY	

PARAMETER		QUANTITY				CONCENTRATION					FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX.	MINIMUM	AVERAGE	MAXIMUM	UNITS			NO. EX.
Once Through Cooling Water (001) Flow Rate	REPORTED	N.A.	1066	1128	MGD	0						Cont.	Record
	PERMIT CONDITION	N.A.	1140	1145									Cont.
Temperature	REPORTED	N.A.	49.42	59.03	°F	0						Cont.	Record
	PERMIT CONDITION	N.A.	105	110									Cont.
Free Available Chlorine	REPORTED						N.A.	0.09	0.2	mg/l	0	2/7	Grab
	PERMIT CONDITION						N.A.	0.2	0.5				1/7
Low Volume Waste Water (01A) Flow Rate	REPORTED	N.A.	0.076	0.194	MGD	NA						Ea. Batch	Record
	PERMIT CONDITION	N.A.	Not Specified	Not Specified									Daily Average
Total Suspended Solids	REPORTED						N.A.	34.75	51	mg/l	0	1/7	Grab
	PERMIT CONDITION						N.A.	30	100				1/7
Oil and Grease	REPORTED						N.A.	0	0	mg/l	0	1/7	Grab
	PERMIT CONDITION						N.A.	15	20				1/7
pH	REPORTED						6.0	N.A.	9.0	pH	0	Ea. Batch	Record
	PERMIT CONDITION						6.0	N.A.	9.0				1/7
Turbine Bldg. Sump Drain Water (01A) Flow Rate	REPORTED	N.A.	0.070	0.144	MGD	NA						Daily Average	Estimate
	PERMIT CONDITION	N.A.	Not Specified	Not Specified									Daily Average

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
Anderson, John W., Jr.	Superintendent of Power Plant	7 8 • 14 11 3 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

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

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12-W AR ST	14-181 AR0001392 PERMIT NUMBER	107-181 001 DIS	SIC	135° 18' 36" N LATITUDE	92° 13' 53" W LONGITUDE
122-211 122-225 124-281 REPORTING PERIOD: FROM		7 18 0 1 0 1 YEAR MO DAY	XXX THRU	7 18 0 1 3 1 YEAR MO DAY	

PARAMETER		QUANTITY				UNITS	CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		(2 card only)					(4 card only)						
		MINIMUM	AVERAGE	MAXIMUM			MINIMUM	AVERAGE	MAXIMUM				
Total Suspended Solids	REPORTED			*		N.A.	19.7	43		0	1/7	Grab	
	PERMIT CONDITION					N.A.	30	100		0	1/7	Grab	
Oil and Grease	REPORTED					N.A.	9.7	14.8		0	1/7	Grab	
	PERMIT CONDITION					N.A.	15	20		0	1/7	Grab	
pH	REPORTED					6.8	N.A.	8.2		0	1/7	Grab	
	PERMIT CONDITION					6.0	N.A.	9.0		0	1/7	Grab	
Cooling Tower Blow-Down Water (OIB) Flow	REPORTED	N.A.	0	0		NA					None	N/A	
	PERMIT CONDITION	N.A.	Not Specified	Not Specified	MGL						Daily Average	Estimate	
pH	REPORTED					N.A.	N.A.	N.A.		NA	None	N/A	
	PERMIT CONDITION					6.0	N.A.	9.0		0	1/7	Grab	
	REPORTED												
	PERMIT CONDITION												
	REPORTED												
	PERMIT CONDITION												

NAME OF PRINCIPAL EXECUTIVE OFFICER	TITLE OF THE OFFICER	DATE
ANDERSON, John W., Jr.	Superintendent of Power Plant	7 18 0 4 1 13
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.

John W. Anderson
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

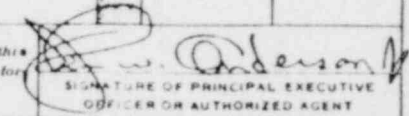
ARKANSAS POWER & LIGHT CO

Mr. William Cavanaugh, III
Executive Director of
Generation & Construction
P. O. Box 551
Little Rock, Arkansas 72203

(12-15) AR ST	(14-18) AR0001392 PERMIT NUMBER	(17-18) 002 DIS	(19-20) SIC	(21-22) 35° 18' 36" N LATITUDE	(23-24) 92° 13' 53" W LONGITUDE
REPORTING PERIOD: FROM		(20-21) 7 8 0 1 0 1 YEAR MO DAY	(22-23) XXX THRU	(24-25) 7 8 0 1 3 1 YEAR MO DAY	

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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PARAMETER		(3 card only) QUANTITY				UNITS	NO. EX.	(4 card only) CONCENTRATION			UNITS	NO. ET	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
Treated Sanitary Sewage (002) Flow Rate	REPORTED	N.A.	0.0014	0.0053		NA						Daily	Estimate	
	PERMIT CONDITION	N.A.	Not Specified	Not Specified	MGD							Daily Average		
Biochemical Oxygen Demand	REPORTED						N.A.	18.5	37.6		0	1/7	Grab	
	PERMIT CONDITION						N.A.	30	45	mg/l		1/7		
Total Suspended Solids	REPORTED						N.A.	19.75	32.5		0	1/7	Grab	
	PERMIT CONDITION						N.A.	30	45	mg/l		1/7		
Fecal Coliform	REPORTED						N.A.	11.8	260		0	1/7	Grab	
	PERMIT CONDITION						N.A.	200	400	number 100ml		1/7		
pH	REPORTED						7.4	N.A.	7.6		0	1/7	Grab	
	PERMIT CONDITION						6.0	N.A.	9.0	pH		1/7		
	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.							
Anderson, John W., Jr.		Superintendent of Power Plant			7 8 0 4 1 3 YEAR MO DAY									
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT														

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

ARKANSAS POWER & LIGHT CO

Mr. William Cavanaugh, III
Executive Director of
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P. O. Box 551
Little Rock, Arkansas 72203

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5. Specify sample type ("2-5" or "hr. composite") as applicable. If frequency - as 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.

12-9 AR ST PERMIT NUMBER AR0001392

14-181 DIS 001 SIC

117-191 35° 18' 36" N 92° 13' 53" W
LATITUDE LONGITUDE

120-211 122-219 124-251 REPORTING PERIOD FROM 7/8 0/2 0/1 YEAR MO DAY THRU 7/8 0/2 2/8 YEAR MO DAY

PARAMETER		QUANTITY				UNITS	NO. EX	CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM				MINIMUM	AVERAGE	MAXIMUM				
Once Through Cooling Water (001) Flow Rate	REPORTED	N.A.	397.8	1128		0						Cont.	Record	
	PERMIT CONDITION	N.A.	1140	1145	MGD							Cont.	Record	
Temperature	REPORTED	N.A.	32.92	41.12		0						Cont.	Record	
	PERMIT CONDITION	N.A.	105	110	°F							Cont.	Record	
Free Available Chlorine	REPORTED	Chlorination Equipment Out of Service Entire Month						N.A.	0	0		0	2/7	Grab
	PERMIT CONDITION							N.A.	0.2	0.5	mg/l		1/7	Grab
Low Volume Waste Water (01A)	REPORTED	N.A.	0.034	0.077		NA							Ea. Batch	Record
	PERMIT CONDITION	N.A.	Not Specified	Not Specified	MGD								Daily Average	Estimate
Total Suspended Solids	REPORTED						N.A.	23.4	42.6		0	1/7	Grab	
	PERMIT CONDITION							N.A.	30	100	mg/l		1/7	Grab
Oil and Grease	REPORTED							N.A.	0	0	mg/l	0	1/7	Grab
	PERMIT CONDITION							N.A.	15	20	mg/l		1/7	Grab
pH	REPORTED							6.0	N.A.	8.9		0	Ea. Batch	Record
	PERMIT CONDITION							6.0	N.A.	9.0	pH		1/7	Grab
Turbine Bldg. Sump Drain Water (01A) Flow Rate	REPORTED	N.A.	0.047	0.086		NA							Daily Average	Estimate
	PERMIT CONDITION	N.A.	Not Specified	Not Specified	MGD								Daily Average	Estimate
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Anderson, John W., Jr.		Superintendent of Power Plant				7/8 0/4 1/13								
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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
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Executive Director of
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P. O. Box 551
Little Rock, Arkansas 72203

(12-15) AH ST	(14-16) ARG001392 PERMIT NUMBER	(17-19) 001 DIS	(20-21) SIC	(22-23) 35° 18' 36" N LATITUDE	(24-25) 92° 13' 53" W LONGITUDE					
REPORTING PERIOD FROM		(130-131) 7 YEAR	(132-133) 0 MO	(134-135) 2 DAY	THRU	(136-137) 7 YEAR	(138-139) 18 MO	(140-141) 0 DAY	(142-143) 2 DAY	(144-145) 8 DAY

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PARAMETER		QUANTITY				UNITS	NO. EX.	CONCENTRATION			UNITS	NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	MINIMUM			AVERAGE	MAXIMUM					
Total Suspended Solids	REPORTED							N.A.	11.3	18.5	mg/l	0	1/7	Grab
	PERMIT CONDITION							N.A.	30	100			1/7	Grab
Oil and Grease	REPORTED							N.A.	8.85	16.1	mg/l	0	1/7	Grab
	PERMIT CONDITION							N.A.	15	20			1/7	Grab
pH	REPORTED							6.5	N.A.	8.4	pH	0	1/7	Grab
	PERMIT CONDITION							6.0	N.A.	9.0			1/7	Grab
Cooling Tower Blow-Down Water (01B Flow Rate)	REPORTED	N.A.	0	0		MGD	NA						None	N/A
	PERMIT CONDITION	N.A.	Not Specified	Not Specified									Daily Average	Estimate
pH	REPORTED							N.A.	N.A.	N.A.	pH	NA	None	N/A
	PERMIT CONDITION							6.0	N.A.	9.0			1/7	Grab
	REPORTED													
	PERMIT CONDITION													
	REPORTED													
	PERMIT CONDITION													

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE	
Anderson, John W., Jr.		Superintendent of Power Plant		7 18 0 4 1 12	
LAST	FIRST	MI	TITLE	YEAR	MO DAY

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12-16 AH ST	14-18 AR0001392 PERMIT NUMBER	117-121 02 DIS	SIC	126-271 35° 18' 36" N LATITUDE	128-281 92° 13' 53" W LONGITUDE
130-211 7 8 0 2 0 1 YEAR MO DAY		122-230 XXX THRU		126-271 7 8 0 2 2 8 YEAR MO DAY	

REPORTING PERIOD: FROM

PARAMETER		QUANTITY					CONCENTRATION					FREQUENCY OF ANALYSIS	SAMPLE TYPE
		MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX.	MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX.		
Treated Sanitary Sewage (002) Flow Rate	REPORTED	N.A.	0.002	0.005	MCD	NA						Daily Average	Estimate
	PERMIT CONDITION	N.A.	Not Specified	Not Specified									Daily Average
Biochemical Oxygen Demand	REPORTED					N.A.	15.9	29	mg/l	0	1/7	Grab	
	PERMIT CONDITION					N.A.	30	45		1/7	Grab		
Total Suspended Solids	REPORTED					N.A.	24.6	37	mg/l	0	1/7	Grab	
	PERMIT CONDITION					N.A.	30	45		1/7	Grab		
Fecal Coliform	REPORTED					N.A.	1.5	5	number 100ml	0	1/7	Grab	
	PERMIT CONDITION					N.A.	200	400		1/7	Grab		
pH	REPORTED					7.2	N.A.	8.2	pH	0	1/7	Grab	
	PERMIT CONDITION					6.0	N.A.	9.0		1/7	Grab		
	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.						
Anderson, John W., Jr.		Superintendent of Power Plant			7 8 0 4 1 3 YEAR MO DAY								
LAST FIRST MI		TITLE			YEAR MO DAY		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT						

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DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

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12-B AR ST	14-181 AR0001392 PERMIT NUMBER	117-181 001 DIS	SIC	126-271 128-291 130-311 35° 18'36"N 92° 13'53"W LATITUDE LONGITUDE
120-211 122-231 124-251 REPORTING PERIOD FROM 7 8 0 3 0 1 YEAR MO DAY		THRU XWX		126-271 128-291 130-311 7 8 0 3 3 1 YEAR MO DAY

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		MINIMUM	AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
Once Through Cooling Water (001) Flow Rate	REPORTED	N.A.	685	1128	MGD	0				Cont.	Record	
	PERMIT CONDITION	N.A.	1140	1145								
Temperature	REPORTED	N.A.	53.14	47.49	°F	0				Cont.	Record	
	PERMIT CONDITION	N.A.	105	110								
Free Available Chlorine	REPORTED	Chlorination Equipment Out of			mg/l	0	N.A.	0	0	2/7	Grab	
	PERMIT CONDITION	Service Entire Month					N.A.	0.2	0.5			
Low Volume Waste Water (01A) Flow Rate	REPORTED	N.A.	0.0 23	0.081	MGD	NA				Ea. Batch	Record	
	PERMIT CONDITION	N.A.	Not Specified	Not Specified								
Total Suspended Solids	REPORTED				mg/l	0	N.A.	24.4	50	1/7	Grab	
	PERMIT CONDITION						N.A.	30	100			
Oil and Grease	REPORTED				mg/l	0	N.A.	0	0	1/7	Grab	
	PERMIT CONDITION						N.A.	15	20			
pH	REPORTED				pH	/	5.4	N.A.	9.0	Ea. Batch	Record	
	PERMIT CONDITION						6.0	N.A.	9.0			
Turbine Bldg. Sump Drain Water (01A) Flow Rate	REPORTED	N.A.	0.031	0.036	MGD	NA				Daily	Average	Estimate
	PERMIT CONDITION	N.A.	Not Specified	Not Specified								
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.					
Anderson, John W., Jr.		Superintendent of Power Plant			7 8 0 4 1 1 3							
LAST	FIRST	MI	TITLE	YEAR	MO	DAY	SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT					

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

Form Approved
OMB NO. 158-R0073

ARKANSAS POWER & LIGHT CO


Mr. William Cavanaugh, III
Executive Director of
Generation & Construction
P. O. Box 551
Little Rock, Arkansas 72203

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 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".
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-W AH ST	14-16 AM00U1392 PERMIT NUMBER	117-119 0v1 DIS	SIC	126-271 35° 18' 36" N LATITUDE	128-291 92° 13' 53" W LONGITUDE
130-211 REPORTING PERIOD FROM		122-231 7 0 0 3 0 1 YEAR MO DAY	THRU	128-271 7 8 0 3 3 1 YEAR MO DAY	

PARAMETER		(3 card only) QUANTITY				UNITS	(4 card only) CONCENTRATION				FREQUENCY OF ANALYSIS	SAMPL TYPE	
		MINIMUM (138-45)	AVERAGE (140-5)	MAXIMUM (144-5)			NO. EX	MINIMUM (140-8)	AVERAGE (144-8)	MAXIMUM (148-8)			UNITS
Total Suspended Solids	REPORTED						N.A.	16.2	22.5		0	1/7	Grab
	PERMIT CONDITION						N.A.	30	100	mg/l	0	1/7	Grab
Oil and Grease	REPORTED						N.A.	7.22	14.5		0	1/7	Grab
	PERMIT CONDITION						N.A.	15	20	mg/l	0	1/7	Grab
pH	REPORTED						6.9	N.A.	8.3		0	1/7	Grab
	PERMIT CONDITION						6.0	N.A.	9.0	pH	0	1/7	Grab
Cooling Tower Blow Down Water (01B) Flow Rate	REPORTED	N.A.	0	0			NA					None	N/A
	PERMIT CONDITION	N.A.	Not Specified	Not Specified	MGD							Daily Average	Estimate
pH	REPORTED						N.A.	N.A.	N.A.		NA	None	N/A
	PERMIT CONDITION						6.0	N.A.	9.0	pH	0	1/7	Grab
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
Anderson, John W., Jr.	Superintendent of Power Plant	7 8 0 4 1 3					
LAST	FIRST	MI	TITLE	YEAR	MO	DAY	

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM
DISCHARGE MONITORING REPORT

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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., "1/7" 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.

12-38 AR ST	14-161 AR0001392 PERMIT NUMBER	117-181 002 DIS	SIC	120-211 (22-23) (24-25) 7 8 0 3 0 1 YEAR MO DAY	126-271 (28-29) (30-31) XXX THRU 7 8 0 3 3 1 YEAR MO DAY	119-181 35° 18' 36" N 92° 13' 53" W LATITUDE LONGITUDE
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REPORTING PERIOD FROM

(32-37)

PARAMETER		QUANTITY				UNITS	CONCENTRATION			UNITS	NO. EX.	FREQUENCY OF ANALYSIS	SAMPLE TYPE	
		MINIMUM	AVERAGE	MAXIMUM	NO. EX.		MINIMUM	AVERAGE	MAXIMUM					
Treated Sanitary Sewage (002) Flow Rate	REPORTED	N.A.	0	0		MGD				NA		None	N/A	
	PERMIT CONDITION	N.A.	Not Specified	Not Specified								Daily Average	Estimate	
Biochemical Oxygen Demand	REPORTED							N.A.	N.A.	N.A.	mg/l	0	None	N/A
	PERMIT CONDITION							N.A.	30	45		1/7	Grab	
Total Suspended Solids	REPORTED	Sewage Plant Out of Service						N.A.	N.A.	N.A.	mg/l	0	None	N/A
	PERMIT CONDITION	Entire Month						N.A.	30	45		1/7	Grab	
Fecal Coliform	REPORTED							N.A.	N.A.	N.A.	number/100ml	0	None	N/A
	PERMIT CONDITION							N.A.	200	400		1/7	Grab	
pH	REPORTED							N.A.	N.A.	N.A.	pH	0	None	N/A
	PERMIT CONDITION							6.0	N.A.	9.0		1/7	Grab	

NAME OF PRINCIPAL EXECUTIVE OFFICER		TITLE OF THE OFFICER		DATE	
Anderson, John W., Jr.	Superintendent of Power Plant	7	8	0	4
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.

John W. Anderson, Jr.
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT