

8301 M 8412 770309
MONTHLY REPORT FORM

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

REPORTED DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO

TOLEDO EDISON COMPANY
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1
5501 NORTH STATE ROUTE 2
GAK HARBOR 43449 OTTAWA

2IB00011001 MAY 1984

1 06/14/83 OH000378

50-346

SAMPLING STATION DESCRIPTION
001 COLLECTION BOX

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB

ANALYST

Toledo Edison Company

R. J. Scott

DAY	ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT					REPORTING CODE		REPORTING CODE		REPORTING CODE		REPORTING CODE	
	(1)	(2)	WATER TEMP. F	PH S.U.	CONDUIT FLOW MGD	CHLOR TOT RE MG/L	CHLOR FREE A MG/L						
	1	3	1	3	3								
	999	1	999	1	1								
	00011	00400	50050	50060	50064								
01	62	8.2	22.0	0.0	0.0								
02	58	8.0	18.3	0.0	0.0								
03	58	7.8	18.1	0.0	0.0								
04	57	8.0	19.1	0.0	0.0								
05	57	AN	19.4	AN	AN								
06	58	AN	19.1	AN	AN								
07	59	8.2	19.0	0.0	0.0								
08	59	8.6	19.7	0.0	0.0								
09	58	8.4	20.5	0.0	0.0								
10	58	8.4	20.9	0.0	0.0								
11	AN	8.6	AN	0.0	0.0								
12	AN	AN	AN	AN	AN								
13	61	AN	27.4	AN	AN								
14	60	8.1	21.3	0.0	0.0								
15	60	8.3	22.1	0.0	0.0								
16	57	8.2	28.0	0.0	0.0								
17	54	7.8	27.4	0.0	0.0								
18	63	7.9	24.5	0.0	0.0								
19	66	AN	21.0	AN	AN								
20	64	AN	19.9	AN	AN								
21	64	7.8	19.1	0.0	0.0								
22	68	8.2	20.2	0.0	0.0								
23	69	8.3	21.7	0.0	0.0								
24	69	8.3	21.8	0.0	0.0								
25	71	8.4	22.3	0.0	0.0								
26	70	AN	24.8	AN	AN								
27	68	AN	24.5	AN	AN								
28	67	AN	24.6	AN	AN								
29	63	7.8	23.5	0.2	0.0								
30	61	7.3	22.7	0.0	0.0								
31	AN	7.0	AN	0.0	0.0								
TOTAL	1739	--	612.9	0.2	0.0								
AVG.	62	--	21.9	0.0	0.0								
MAX.	71	8.6	28.0	0.2	0.0								
MIN.	54	7.0	18.1	0.0	0.0								

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

8406190285 840531
PDR ADDCK 05000346
R PDR

IE 25
1/1

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER
FORM NO. EPA-4500 (10-80)
COPYRIGHT EPA SUR 1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED: 6/5/84
SIGNATURE OF REPORTER: T. D. Murray
TITLE OF REPORTER: Station Superintendent

8301 M 8412 770309
MONTHLY REPORT FORM

820308 **OhioEPA**

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

REPORTED DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO.

TOLEDO EDISON COMPANY
 DAVIS-BESSE NUCLEAR
 POWER STATION - UNIT NO.1
 5501 NORTH STATE ROUTE 2
 OAK HARBOR 43449 OTTAWA

2IB00011002 MAY 1984

1 06/14/83 OH0003786

SAMPLING STATION DESCRIPTION

002 AREA RUNOFF

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) - ENTER FREQUENCY OF SAMPLING

Toledo Edison Company

R. J. Scott

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT

DAY	CONCUI FLOW MGD	PH S.U.	RESIDU T. NFL MG/L	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	1	3	3								
(1)	999	1	1								
(2)											
01	0.000			50050	00400	00530					
02	0.000										
03	0.066										
04	0.099										
05	0.000										
06	0.000										
07	0.000	8.2	75								
08	0.343										
09	0.000										
10	0.000										
11	0.024										
12	0.000										
13	0.150										
14	0.000	8.1	87								
15	0.000										
16	0.000										
17	0.000										
18	0.099										
19	0.165										
20	0.456										
21	0.052	8.1	23								
22	0.367										
23	0.127										
24	0.000										
25	0.174										
26	0.019										
27	0.000										
28	0.315										
29	0.014	8.0	72								
30	0.066										
31	0.000										

TOTAL	2.536	--	257								
AVG.	0.082	--	64								
MAX.	0.456	8.2	87								
MIN.	0.000	8.0	23								

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

Total Nonfilterable Residue (Total Suspended Solids); daily maximum limit of 50 mg/l was exceeded on May 7, 14, and 29, 1984. Reports issued to the Ohio EPA on May 9, 15, and June 1, 1984.

DISTRIBUTION
 WHITE - AGENCY
 YELLOW - AGENCY
 GREEN - REPORTER

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED
 6/5/84

SIGNATURE OF REPORTER
 T. D. Murray

T. D. Murray

TITLE OF REPORTER
 Station Superintendent

8301 M P412 770309
MONTHLY REPORT FORM

820308 OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP: TOLEDO EDISON COMPANY, DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1, 5501 NORTH STATE ROUTE 2, GAK HARBOR, 43449 OTTAWA

STATION CODE: 2IB00011003

DATE (MONTH, YEAR): MAY 1984

REPORTED: PAGE 1 OF 1, PRINTING DATE 06/14/83, APPLICATION NO. 0H0003786

SAMPLING STATION DESCRIPTION: 003 SCREENWASH

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE
IN(2) - ENTER FREQUENCY OF SAMPLING

REPORTING LAB: TOLEDO EDISON COMPANY

ANALYST: R. J. SCOTT

DAY	CONCUI FLOW MGD	RESIDU T. NFL MG/L	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	50050	00530								
01	0.222									
02	0.222									
03	0.222									
04	0.222									
05	0.222									
06	0.222									
07	0.222	81								
08	0.222									
09	0.222									
10	0.222									
11	0.222									
12	0.222									
13	0.222									
14	0.222									
15	0.222									
16	0.222									
17	0.222									
18	0.222									
19	0.222									
20	0.222									
21	0.222									
22	0.222									
23	0.222									
24	0.222									
25	0.222									
26	0.222									
27	0.222									
28	0.222									
29	0.222									
30	0.222									
31	0.222									

TOTAL	6.882	81								
AVG.	0.222	81								
MAX.	0.222	81								
MIN.	0.222	81								

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER
FORM NO. EPA-4500 (10-80)

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED: 6/5/84
SIGNATURE OF REPORTER: T. D. Murray
TITLE OF REPORTER: Station Superintendent

8301 M 8412 770309
MONTHLY REPORT FORM

NAME, ADDRESS, CITY, COUNTY, ZIP STATION CODE DATE (MONTH, YEAR) PAGE PRINTING DATE APPLICATION NO.
TOLEDO EDISON COMPANY 21B00011602 MAY 1984 1 06/14/83 OH0003786
DAVIS-BESSE NUCLEAR
POWER STATION - UNIT NO.1 SAMPLING STATION DESCRIPTION
5501 NORTH STATE ROUTE 2 602 LOW VOLUME WASTES
OAK HARBOR 43449 OTTAWA

NOTE: THIS FORM MUST BE TYPED

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE REPORTING LAB ANALYST
 IN(2) - ENTER FREQUENCY OF SAMPLING Toledo Edison Co. R. J. Scott

DAY	PH		RESIDU T. NFL		O&G TOTAL		CONDUI FLOW		REPORTING CODE		REPORTING CODE		REPORTING CODE		REPORTING CODE		REPORTING CODE		REPORTING CODE	
	S.U.	MG/L	MG/L	MG/L	MG/L	MG/L	MGD	MGD												
	3	3	3	1																
	1	1	1	999																
	00400	00530	00550	50050																
01				0.074																
02				0.074																
03				0.074																
04				0.074																
05				0.074																
06				0.074																
07	8.9	12	0	0.074																
08				0.074																
09				0.074																
10				0.074																
11				0.074																
12				0.074																
13				0.074																
14	8.9	13	0	0.074																
15				0.074																
16				0.074																
17				0.074																
18				0.074																
19				0.074																
20				0.074																
21	8.9	16	1	0.074																
22				0.074																
23				0.074																
24				0.074																
25				0.074																
26				0.074																
27				0.074																
28				0.074																
29	8.4	20	0	0.074																
30				0.074																
31				0.074																

TOTAL	--	61	1	2,294																
AVG.	--	15	0	0.074																
MAX.	8.9	20	1	0.074																
MIN.	8.4	12	0	0.074																

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION
 WHITE - AGENCY
 YELLOW - AGENCY
 GREEN - REPORTER
 FORM NO. EPA 4500 (10-80)
 PREPARED BY EPA 518.1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED 6/5/84	SIGNATURE OF REPORTER T. D. Murray <i>TDMurray</i>	TITLE OF REPORTER Station Superintendent
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391 E 8412 770305
MONTHLY REPORT FORM

820308 OhioEPA

NAME ADDRESS, CITY, COUNTY, ZIP STATION CODE DATE (MONTH, YEAR) PAGE PRINTING DATE APPLICATION NO
 TOLEDO EDISON COMPANY 21800011601 MAY 1984 1 06/14/83 OH000379
 DAVIS-BESSE NUCLEAR
 POWER STATION - UNIT NO.1 SAMPLING STATION DESCRIPTION
 5501 NORTH STATE ROUTE 2 601 SANITARY
 CAK HARBOR 43449 OTTAWA

NOTE: THIS FORM MUST BE TYPED

IN(1) ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE		REPORTING LAB							ANALYST	
IN(2) ENTER FREQUENCY OF SAMPLING		TOLEDO EDISON CO.							R. J. SCOTT	
DAY	3	3	3	1	3	3	3	3	3	3
	1	1	1	999	1	1	1	1	1	1
	COLOR SEVER UNITS	ODOR SEVER UNITS	TURBID SEVER UNITS	CONDUIT FLOW MGD	CHLOR TOT RE MG/L	BOD 5 DAY MG/L	PH S.U.	RESIDU T. NFL MG/L	FEC CO MF-FCB #/100M	
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	00083	01330	01350	50050	50060	00310	00400	00530	31616	
01	1	1	1	0.009	2.5					
02	1	1	1	0.009	0.8					
03	1	1	1	0.009	1.0					
04	1	1	1	0.009	3.0					
05	AN	AN	AN	0.009	AN					
06	AN	AN	AN	0.009	AN					
07	0	0	1	0.009	0.2					
08	0	0	0	0.009	1.5	12			AA	
09	2	1	2	0.009	1.0					
10	1	0	?	0.009	1.3					
11	1	0	1	0.009	0.6					
12	AN	AN	AN	0.009	AN					
13	AN	AN	AN	0.009	AN					
14	1	0	1	0.009	3.0		8.5			
15	1	0	1	0.009	0.5					
16	1	0	0	0.009	3.0			18		
17	1	0	1	0.009	0.4					
18	0	0	0	0.009	1.0					
19	AN	AN	AN	0.009	AN					
20	AN	AN	AN	0.009	AN					
21	1	1	1	0.009	0.0					
22	1	0	0	0.009	1.8					
23	0	0	0	0.009	3.0					
24	0	0	0	0.009	2.0					
25	0	0	0	0.009	0.2					
26	AN	AN	AN	0.009	AN					
27	AN	AN	AN	0.009	AN					
28	AN	AN	AN	0.009	AN					
29	0	0	0	0.009	2.0					
30	0	0	0	0.009	2.0					
31	0	0	0	0.009	0.0					
TOTAL	14	6	13	0.279	30.8	12	--	18	AA	
AVG.	1	0	1	0.009	1.4	12	--	18	AA	
MAX	2	1	2	0.009	3.0	12	8.5	18	AA	
MIN	0	0	0	0.009	0.0	12	8.5	18	AA	

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

AA - Below detectable limit

DISTRIBUTION
 WHITE - AGENCY
 YELLOW - AGENCY
 GREEN - REPORTER
 FORM NO. EPA-4500 (10-80)
 PREPARED BY EPA (SR)

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED: 6/5/84
 SIGNATURE OF REPORTER: T. D. Murray
 TITLE OF REPORTER: Station Superintendent

8381-N 8412 770309
MONTHLY REPORT FORM

820308 OhioEPA

NAME, ADDRESS, CITY, COUNTY, ZIP: TOLEDO EDISON COMPANY, DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1, 5501 NORTH STATE ROUTE 2, GAK HARBOR, 43449 OTTAWA

STATION CODE: 21B00011603

DATE (MONTH, YEAR): MAY 1984

PAGE: 1 OF 1

PRINTING DATE: 06/14/83

APPLICATION NO: OH000378

SAMPLING STATION DESCRIPTION: 603, REGENERATES

NOTE: THIS FORM MUST BE TYPE

IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE			REPORTING LAB				ANALYST			
IN(2) - ENTER FREQUENCY OF SAMPLING			Toledo Edison Co.				R. J. Scott			
ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT	PH S.U.	RESIDU T. NFL MG/L	CONDUIT FLOW MGD	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
(1)	3	3	1							
(2)	1	1	999							
DAY	00400	00530	50050							
01										
02										
03										
04										
05										
06										
07										
08										
09										
10										
11										
12										
13										
14										
15										
16										
17										
18										
19										
20										
21										
22										
23										
24										
25										
26										
27										
28										
29										
30										
31										
TOTAL	---	---	---							
AVG.	---	---	---							
MAX.	---	---	---							
MIN.	---	---	---							

ADDITIONAL REMARKS (AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

AH - Neutralizing Tank Out of Service For Maintenance during the entire month of May.

DISTRIBUTION
WHITE - AGENCY
YELLOW - AGENCY
GREEN - REPORTER
FORM NO. EPA-4500 (10-80)
FORMERLY EPA 518-1

I CERTIFY UNDER THE PENALTY OF LAW THAT I HAVE PERSONALLY EXAMINED AND AM FAMILIAR WITH THE INFORMATION SUBMITTED 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.

DATE REPORT COMPLETED 6/5/84	SIGNATURE OF REPORTER T. D. Murray <i>TDMurray</i>	TITLE OF REPORTER Station Superintendent
---------------------------------	---	---

DATE REPORT FORM

REPORTER



ADDRESS CITY COUNTY ZIP

STATION CODE

DATE (MONTH YEAR)

PAGE PRINTING DATE APPLICATION NO

5533 NORTH STATE ROUTE 2
 OAK HARBOR 43449 OTTAWA

01100123

11 1984

01100123 01100123

SAMPLING STATION DESCRIPTION

SD FLOOD DRAIN

NOTE: THIS FORM MUST BE TYPED

IN(1) ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

IN(2) ENTER FREQUENCY OF SAMPLING

Toledo Edison Co.

R. J. Scott

ENTER ANALYSIS TESTS, UNITS AND CODE NO. AT RIGHT

DAY	CONDUI									
	FLCW	PH	DBG							
	MGD	S.U.	TOTAL							
	HG/L		HG/L							
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
	50050	00400	00550							
01	0.123									
02	0.123									
03	0.123									
04	0.123									
05	0.123									
06	0.123									
07	0.123	8.0	0							
08	0.123									
09	0.123									
10	0.123									
11	0.123									
12	0.123									
13	0.123									
14	0.123	8.1	0							
15	0.123									
16	0.123									
17	0.123									
18	0.123									
19	0.123									
20	0.123									
21	0.123	7.9	0							
22	0.123									
23	0.123									
24	0.123									
25	0.123									
26	0.123									
27	0.123									
28	0.123									
29	0.123	8.1	1							
30	0.123									
31	0.123									
TOTAL	3.813	--	1							
AVG	0.123	--	0							
MAX	0.123	8.1	1							
MIN	0.123	7.9	0							

ADDITIONAL REMARKS (ANALYTICAL CODES MUST BE EXPLAINED IN THIS SECTION)

YELLOW GREEN REPORTER

DATE REPORT COMPLETED: 6/5/84
 SIGNATURE OF REPORTER: T. D. Murray

Station Superintendent

WASTE ADDRESS: CIP COURT 24

STATION CODE: 03445

DATE (MONTH YEAR): 05 84

PAGE: 1 PRINTING DATE: APPLICATION NO. 03445-0111077

SAMPLING STATION DESCRIPTION: 833 W. 10TH ST. ROUTE 2 JOL. ENTRAL STATION
DAN HARBOR 03445 OTTAWA

NOTE: THIS FORM MUST BE TY

RE: ENTER 1 FOR CONTINUOUS 2 FOR COMPOSITE 3 FOR GRAB SAMPLE

REPORTING LAB

ANALYST

FR: ENTER FREQUENCY OF SAMPLING

Toledo Edison Co.

R. J. Scott

ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT	REPORTING CODE									
	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE
(1) 1										
(2) 999										
WATER TEMP. F										
DAY 00011										
01 55										
02 53										
03 50										
04 51										
05 51										
06 51										
07 52										
08 53										
09 52										
10 51										
11 AN										
12 AN										
13 54										
14 53										
15 53										
16 54										
17 52										
18 55										
19 57										
20 58										
21 58										
22 59										
23 61										
24 61										
25 62										
26 63										
27 62										
28 60										
29 60										
30 56										
31 AN										
TOTAL 1557										
AVG 50										
MAX 63										
MIN 50										

ADDITIONAL REMARKS: REPORTING CODES MUST BE EXPLAINED IN THIS SECTION

DISPOSITION:
WHITE - AGENT
YELLOW - AGENT
GREEN - REPORTER
ECHO FOR EPA 2501-108-00

REPORTER'S SIGNATURE: T. D. Murray

DATE REPORT COMPLETED: 6/5/84

TITLE OF REPORTER: Station Superintendent

50-346



RR 2 P-8-84-05
E 2.40.1.1.3
G84 354AL

June 13, 1984

Ohio Environmental Protection Agency
Technical Records Section
P.O. Box 1049
Columbus, Ohio 43216

Gentlemen:

Attached is a copy of the May 1984 Wastewater Report for Davis-Besse Nuclear Power Station, Unit No. 1.

Yours truly,

A handwritten signature in cursive script that reads 'T D Murray'.

Terry D. Murray
Station Superintendent
Davis-Besse Nuclear Power Station
(419) 259-5660

TDM/KLN/yml
encl. (2 copies)

cc: J. E. Sullivan
W. G. Rogers, NRC Resident Inspector
J. L. Scott-Wasilk
J. F. Stolz, NRC

IE25
11