8564 M 9003 851329

AGENCY COPY

STATION CODE

REPORTED

MONTHLY REPORT FORM NAME, ADDRESS, CITY, COUNTY, ZIP

CAK HARBOR

TOLEDO EDISON COMPANY

DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1

DATE (MONTH, YEAR) 21800011011 MAY 1985

PAGE PRINTING DATE APPLICATION NO. 10F1 04/19/35 0H03U3786

5501 NORTH STATE ROUTE 2

43449 OTTAWA

SAMPLING STATION DESCRIPTION 331 DISCHARGE TO LAKE ERIE

IN(1)	- ENTER 1 FOR COM	TINUOUS. 2 FOR C	OMPOSITE 3 FOR C	GRAB SAMPLE F	REPORTING LAB ANALYST							
IN(2)	ENTER FREQUENC	CY OF SAMPLING			Toledo Edi	ison Compa	ny	R. J. Scott				
(1)	1	3	1	3				T T				
五 (2)	999	1	999	1								
RIC	WATER	PH	CONCUI	CHLOR								
A C	TEMP.			FREE A								
E N	F	S.U.	MED	MG/L								
COD		3.0.	1100	1137 6								
AND CODE NO. AT RIGHT	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CO		
DAY	00011	00400	50050	50064								
01	65	8.1	18.0	0.0			1					
02	63	8.5	19.7	0.0								
03	62	7.4	19.2	0.0								
04	63	AN	18.9	AN					-			
-		THE RESERVE AND ADDRESS OF THE PARTY OF THE				CONTRACTOR OF THE PARTY OF THE		-				
05	65	AN	18.9	AN			-	-	-			
06	66	7.9	18.8	0.0					and the same of	500 Nov (Carl)		
07	65	8.5	18.9	0.0				-				
08	65	7.8	19.2	0.0						-		
09	65	7.7	18.9	0.0	-	-	-	-				
10	68	7.3	18.3	0.0				-				
11	69	AN	18.7	AN								
12	71	AN	19.8	AN					-			
13	70	8.1	18.2	0.0								
14	66	8.5	17.2	0.0								
15	71	8.4	18.5	0.0								
16	70	8.7	20.5	0.0								
17	70	8.7	23.2	0.0								
18	67	AN	23.3	AN								
19	69	AN	22.3	AN		HUNG WELL						
20	70	8.6	20.4	0.0								
21	68	8.5	19.1	0.0		Appropriate the	THE PROPERTY					
22	67	8.5	18.6	0.0								
23	67	7.6	17.7	0.0	D.130	1000 - 600	CONTRACTOR OF					
24	67	6.7	17.4	0.0			1					
25	69	AN	19.0	AN				STATE OF STREET				
26	70		19.1	AN .								
27		AN			-							
-	71	AN	19.2	AN	-	-	-					
28	69	8.5	20.1	0.0		-			-			
29	67	8.6	19.8	0.0	-			-	-	-		
30	70	8.6	19.0	0.0	-		-	-		-		
31	74	8.6	20.0	0.0		1						
						1	T	_				
OTAL	2099		599.9	0.0				-	-	-		
VG.	68		19.4	0.0						-		
AAX.	74	8.7	23.3	0.0	-		-	-		-		
AIN.	62 NAL REMARKS	6.7	17.2	0.0				1				

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

8506260603 850612 PDR ADOCK 05000346 PDR

DISTRIBUTION WHITE - AGENCY YELLOW - AGENCY GREEN - REPORTER FORM NO. EPA-4500 (10-80) FORMERLY 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 6/4/85

SIGNATURE OF REPORTER

Stephen M. Jan

8564 M 9003 850329

MONTHLY REPORT FORM

AGENCY COPY

21800011002

REPORTED

NAME, ADDRESS, CITY, COUNTY, ZIP

DAK HARBOR

STATION CODE

DATE (MONTH, YEAR)

1985

MAY

PAGE PRINTING DATE APPLICATION NO. 19F1 04/19/85 0H0003786

TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1

5501 NORTH STATE ROUTE 2 43449 OTTAWA

SAMPLING STATION DESCRIPTION

302 OUTFALL TOUSSAINT RIVER

IN(1)	ENTER 1 FOR COM	NTINUOUS 2 FOR C	OMPOSITE, 3 FOR	GRAB SAMPLE R	REPORTING LAB		A	ANALYST			
iN(2)	ENTER FREQUEN	CY OF SAMPLING			Toledo Edison Company			R. J. Scott			
2 (1)	3	3	3	1							
H (2)	1	1	1	999							
AT RI	PH	RESIDU	0&G	CONDUI							
ES 0		T. NFL	TOTAL	FLOW		140					
DE N	S.U.	MG/L	MG/L	MGD							
TER ANALYSES PERFORMED AND CODE NO. AT RIGHT (C) (1)											
ANI	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING COD	
DAY	00400	00530	00550	50050							
01				0.293							
02		No.		0.255							
03	FREE PLANS	ADDRESS OF THE REAL PROPERTY.		0.255			No.				
04				0.255							
05	BANKS BY SE	14.01.50		0.264	Mary Mary						
06	7.9	119	0	0.260							
07	STATE OF THE STATE			0.255							
08				0.255							
09				0.255							
10				0.255							
11				0.255							
12				0.255							
13	8.3	41	0	0.255	I A TOPE OF					7.00	
14				0.293							
15	HEADING STATE			0.518							
16				0.316							
17				0.340	100						
18				0.321						-	
19	PENTEN I			0.255							
20	7.9	48	0	0.372	100000			-			
21				0.255							
22				0.255	-		-	-			
23		THE STATE OF	I CONTRACT	0.255						2 10 10 10 10 10 10 10 10 10 10 10 10 10	
24			-	0.255	-		-	-			
25				0.255							
26				0.255	-		-			-	
27				0.692						-	
28	8.1	56		0.297							
29				0.255				-	-	-	
30				0.255			-	-	-	-	
31				0.255	1						
****		1 244	1 0	T 0.000	T		T	1			
TOTAL		264	0	9.066	+	-		-	1		
AVG.		64	0	0.292	-	-	-	+	-		
MAX.	8.3	119	0	0.692	-	-	+	-	-		
MIN.	7.9	41	CODES MUST BE EX	0.255					1		

An exceedence for the month of May for Total Non-filterable residue was recorded at Outfall 902 (Area Runoff). An exceedence notice was sent to OEPA on June 5, 1985

DISTRIBUTION WHITE - AGENCY YELLOW - AGENCY GREEN - REPORTER FORM NO. EPA-4500 (10-80) FORMERLY 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 6/4/85

SIGNATURE OF REPORTER



8504 M 9003 850329 MONTHLY REPORT FORM

AGENCY COPY

REPORTED

NAME, ADDRESS, CITY, COUNTY, ZIP

CAK HARBOR

STATION CODE 21800011003 DATE (MONTH, YEAR) 1985

PAGE PRINTING DATE APPLICATION NO. 10F1 04/19/85 0H0003786

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

43449 CTTAWA

SAMPLING STATION DESCRIPTION

003 OUTFALL NAVARRE MARSH

MAY

NOTE: THIS FORM MUST BE TYPED

(64(1)	- ENTER 1 FOR CO	ONTINUOUS 2 FOR CO	OMPOSITE 3 FOR	GRAB SAMPLE	REPORTING LAB		ANALYST				
	enter FREQUEN	ICY OF SAMPLING			Toledo Ed:	iny	R.	J. Sco	ott		
(1)	-	1									
H (2)	1	999 CONDUI									
AT R							HE FE Y				
0	T. NFL	FLOW	A second	1		4 - 1 10 5					
AND CODE NO AT RIGHT	ME/L	MGD	A	A	A	A second				A	
000	A STATE OF THE STA	Alexander	A		A = 1					A	
AN			REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING COO	E REPO	ORTING COD	DE REPORTING CODE	REPORTING COO
DAY	60530	50050							1011		
01		0.222					1000000		FURNIS	ASSESSION	
02		0.222									
03	All of the same	0.222								A	
04		0.222									
05	72	0.222						4		A Comment	
06	79	0.222						4			
07		0.222			In the latest						PALE NAME OF THE PARTY OF THE P
08		0.222						-		-	
09		0.222					1	-			
10		0.222			-	-	-	-			
11		0.222			1	1	-				-
12		0.222			4	-	-	-			
13		0.222			-		-	-	-		
14		0.222				4	-	-	-		-
15		0.222						-	_		
16		0.222	-	4	4	4	-	-	-		-
17		0.222	-	1		-	-		-		-
18		0.222			4	1		-			
19	A	0.222						-	-		
20		0.222			-			-			-
21		0.222						-	-		1
22		0.222			1	4		-	_		
23		0.222			4			-			
24	-	0.222			1			-			
25		0.222			The state of the s	1			-		
26		0.222				1		-			
27		0.222				4		-			
28		0.222						-			
29		0.222						-			
30		0.222	1					-			
31		0.222									1
	7.0	200	-	-	-			-			
TOTAL		6.882									
AVG.	79	0.222		-				-			
MAX.	79	0.222						-		-	
MIN.	79	0.222	A						-		

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

DISTRIBUTION WHITE - AGENCY YELLOW - AGENCY GREEN - REPORTER FORM NO. EPA-4500 (10-80) FORMERLY 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 6/4/85

S. M. Quennoz

8504 M 9103 850329 MONTHLY REPORT FORM

AGENCY COPY

REPORTED

NAME ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR) MAY 1985

PAGE PRINTING DATE APPLICATION NO.

TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO. 1

10F1 04/19/85 0H0003786

5501 NORTH STATE ROUTE 2 DAK HARBOR

43449 OTTAWA

SAMPLING STATION DESCRIPTION 601 DISCHARGE STP

21800011601

NOTE: THIS FORM MUST BE TYPED

IN(1)	- ENTER 1 FOR CON	NTINUOUS, 2 FOR C	COMPOSITE, 3 FOR C	GRAB SAMPLE P	REPORTING LAB			ANALYST				
IN(2)	- ENTER FREQUENC	CY OF SAMPLING			Toledo Edison Company			R. J. Scott				
(1)	3	3	3	1	3	3						
(2) (BR)	The second second	1	1	999	1	1						
AT R	COLOR	ODOR	TURBID	CONDUI		RESIDU						
10.0	SEVER	SEVER	SEVER	FLOW	5 DAY	T. NFL						
ENTER ANALYSES PERFORMED AND CODE NO. AT RIGHT A CO CO CO CO CO CO CO CO CO	UNITS	UNITS	UNITS	MGD	MG/L	MG/L						
ANI	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING COD	E REPORTING CODE	REPORTING CODE	REPORTING CODE		
DAY	00083	71330	01350	50050	00310	00530			1 1 1 1 1 1 1			
01	1	1	1	0.009	Residence .				THE RESERVE			
02	1	1	1	0.009					1			
03	2	2	2	0.009								
04	AN	AN	AN	0.009								
05	AN	AN	AN	0.009		THE RESIDENCE						
06	2	2	2	0.009								
07	1	1	1	0.009	16				101100000000000000000000000000000000000			
08	1	1	1	0.009								
09	1	1	11	0.009	The state of the s							
10	1	1	1.	0.009								
11	AN	AN	AN	0.009								
12	AN	AN	AN	0.009								
13	1	1	1	0.009								
14	1	1	1	0.009								
15	1	1	1 .	0.009								
16	1	1	1	0.009								
17	1	1	1	0.009		26						
18	AN	AN	AN	0.009								
19	AN	AN	AN	0.009	A STATE OF THE PARTY OF THE PAR							
20	1	1	1	0.009		8						
21	1	1	1	0.009	12					1 1 1 1 1 1 1 1		
22	1	1	1	0.009								
23	1	1	1	0.009		The second						
24	1	1	1	0.009								
25	AN	AN	AN	0.009								
26	AN	AN	AN	0.009								
27	AN	AN	AN	0.009								
28	1	1	1	0.009								
29	1	1	1	0.009	The state of the s							
30	2	2	2	0.009								
31	2	2	2	0.009								
			3.2				-		1			
TOTAL	26	26	26	0.279	28	34						
AVG.	1	1	1	0.009	14	17						
MAX.	2	2	2	0.009	16	26						
MIN.	1	1	1	0.009	12	8	-					

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

DISTRIBUTION WHITE - AGENCY YELLOW - AGENCY GREEN - REPORTER FORM NO. EPA-4500 (10-80) FORMERLY EPA-SUR-1 ECERTIFY 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. 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 6/4/85

SIGNATURE OF REPORTER

S. M. Quennoz

8504 M 9003 850329 MONTHLY REPORT FORM

AGENCY COPY

REPORTED



NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO

TOLEDO EDISON COMPANY DAVIS-BESSE NUCLEAR

1985 21800011512 MAY

10F1 04/19/85 0H3333786

POWER STATION - UNIT NO.1 5501 NORTH STATE ROUTE 2

SAMPLING STATION DESCRIPTION

502 LOW VOLUME WW SETTLING BASIN OVERFLOW

43449 OTTAWA CAK HARBOR NOTE: THIS FORM MUST BE TYPED REPORTING LAB ANALYST IN(1) - ENTER 1 FOR CONTINUOUS, 2 FOR COMPOSITE, 3 FOR GRAB SAMPLE IN(2) - ENTER FREQUENCY OF SAMPLING Toledo Edison Company R. J. Scott YSES PERFORMED E NO. AT RIGHT 3 (2) 999 CONDUI RESIDU CSG FLOW T. NFL TOTAL MG/L MGD MG/L TER REPORTING CODE | REPORTING CODE REPORTING CODE | REPORT 50150 00536 66550 DAY .046 01 02 .046 03 .046 04 .046 05 .046 06 .046 3 0 07 .046 08 .046 09 .046 10 .046 11 .046 12 .046 0 13 .046 14 .046 15 .046 16 .046 17 .046 18 .046 19 .046 20 046 0 21 .046 .046 22 23 .046 .046 24 .046 25 .046 26 .046 27 .046 2 0 28 .046 29 30 .046 .046 31 1.426 0 TOTAL AVG .046 0 4 0 .046 MAX MIN .046 0

ADDITIONAL REMARKS

(AH REPORTING CODES MUST BE EXPLAINED IN THIS SECTION)

DISTRIBUTION WHITE . AGENCY YELLOW . AGENCY GREEN - REPORTER FORM NO. EPA-4500 (10-80) FORMERLY 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 6/4/85

SIGNATURE OF REPORTER

S. M. Quennoz

85-04 M 9003 850329

MONTHLY REPORT FORM

AGENCY COPY

REPORTED

NAME, ADDRESS, CITY, COUNTY, ZIP

STATION CODE

DATE (MONTH, YEAR)

PAGE PRINTING DATE APPLICATION NO

TOLEDO EDISON COMPANY

MAY 1985 21800011801

10F1 04/19/85 0H0003786

DAVIS-BESSE NUCLEAR POWER STATION - UNIT NO.1 5501 NORTH STATE ROUTE 2

SAMPLING STATION DESCRIPTION 801 INTAKE PRIOR COOLING OPERATION

43449 OTTAWA DAK HARBOR

NOTE: THIS FORM MUST BE TYPED

IN(1)	- ENTER 1 FOR CON	NTINUOUS, 2 FOR C	OMPOSITE, 3 FOR C	The second secon	REPORTING LAB	ANALYST					
IN(2)	- ENTER FREQUENC	CY OF SAMPLING		7	Toledo Edi	R. J. Scott					
2 (1)	1		THE REAL PROPERTY.								
AND CODE NO. AT RIGHT A NO. CODE NO. AT RIGHT (E) (1)	999	PRINCIPLE S									
I R	WATER	Entre									
0.0	TEMP.						Mary Wall				
DE	F	100									
000											
AN	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTING CODE	REPORTIN	G CODE	REPORTING CODE	REPORTING COD
DAY	00011	Street Street	H. Landitte								
01	60					Berg St. 1994					WHEN THE
02	58										
03	57		Halman								
04	57										
05	58		Section 1								1000
06	60										
07	60		Mark Control	Partie Sent liver	STATE OF THE PARTY						
08	61										
09	61										
10	62										
11-	63		MELLIS CONTRACTOR		O STATE OF						
12	64										
13	65			The same	Part House	A DOMESTICAL PROPERTY.					A CONTRACTOR OF THE PARTY OF TH
14	61										
15	65										
16	66		The state of								
17	64										
18	62		110								
19	62										
20	63										
21	64							-			
22	64										
23	61			112 12 12							
24	63										
25	64										
26	64										-
27	66	I de la constante						-			
28	65										-
29	64										
30	65										
31	68										
			-	1	1					_	
TOTAL	1937									-	
AVG.	62										
MAX.	68										
MIN.	NAL REMARKS			XPLAINED IN THIS S							

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

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

6/4/85

SIGNATURE OF REPORTER

S. M. Quennoz

TITLE OF REPORTER

Plant Manager